Connecting with users and citizens
The Audit Commission is an independent body responsible for ensuring that public money is spent economically, efficiently and effectively, to achieve high-quality local and national services for the public. Our work covers local government, health and criminal justice services.

As an independent watchdog, we provide important information on the quality of public services. As a driving force for improvement in those services, we provide practical recommendations and spread best practice. As an independent auditor, we monitor spending to ensure public services are good value for money.
<table>
<thead>
<tr>
<th>Contents</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Introduction</td>
</tr>
<tr>
<td>Why more guidance?</td>
</tr>
<tr>
<td>Structure of the report</td>
</tr>
<tr>
<td>How to use this guide</td>
</tr>
<tr>
<td>2 Case studies</td>
</tr>
<tr>
<td>Torfaen and the Big T:</td>
</tr>
<tr>
<td>Open Space event – Nottinghamshire Healthcare NHS Trust</td>
</tr>
<tr>
<td>Norfolk Learning Difficulty Partnership Board</td>
</tr>
<tr>
<td>Best Value Review of Direct Payments – Wiltshire</td>
</tr>
<tr>
<td>Action for Health Senior Citizens in Newcastle</td>
</tr>
<tr>
<td>Younglivin – Kingston Social Services</td>
</tr>
<tr>
<td>ACCENT Scheme – Suffolk Constabulary</td>
</tr>
<tr>
<td>E-consultation – Royal Borough of Kensington and Chelsea</td>
</tr>
<tr>
<td>Best Value Review of Access to Housing Services – London Borough of Southwark</td>
</tr>
<tr>
<td>3 The principles of successful consultation</td>
</tr>
<tr>
<td>4 Conclusion</td>
</tr>
<tr>
<td>Appendix 1: Legislation and government guidelines on consultation</td>
</tr>
<tr>
<td>Appendix 2: Views on consultation</td>
</tr>
<tr>
<td>Appendix 3: References; Further reading; Advisory group</td>
</tr>
</tbody>
</table>
Introduction

1 People benefit most from public services that are based on a real understanding of their needs. This report aims to inform and encourage public sector service providers to develop new and effective ways of involving local people in improving the services that they use. We hope that it will help those providers who are not yet fully engaged with their local communities to make a meaningful start; that it will help to develop those who are already achieving some success in this area; and that it will provide fresh and challenging ideas for everyone.

2 Our own consultations with service providers show that they particularly value information about what works resulting from the efforts and experiences of others. In this guide we look across the full range of public sector services and encourage cross-fertilisation of ideas from local government, health and criminal justice. We have centred the guide on examples of good practice from a range of sources, setting out how specific issues involved in consulting, communicating with and involving service users have been tackled, and giving the details of contacts who are willing to provide further information about their projects.

3 Many sources of guidance on this subject are already available, and for that reason we are not taking a step-by-step ‘how to do it’ approach here. However, we have gathered learning points from the case studies and from these we have developed the main principles of effective consultation and involvement. These are set out in chapter 2. The appendices to this guide provide summaries of our research, other information about the legislative background and latest guidance and a list of other sources of information and advice.

4 We hope that the practical information and contacts in the case studies will be of particular use to service providers at operational level, and to those with cross-organisation responsibility for policy on consultation and involvement of service users. Additionally, we hope that managers at executive level will take note of the learning points and principles that need their involvement. This guidance should also be of interest to service users and communities. It shows the means by which they can get involved, and what they can expect from their local service providers.

Why more guidance?

5 Improving the level of involvement of local people is a major part of the government’s agenda to modernise public services. Recent legislation and guidance in the public sector emphasises consultation and involvement of the general public and service users in developing services and local policy (Appendix 1).
But developing an approach that is more centred on service users is not just a regulatory obligation. It is also part of good management and high-quality service provision. Consulting and involving service users, and finding out what the general public want from their local services, should not be seen as an extra chore for service providers, but as a means of carrying out their work more efficiently and effectively – it may even make life easier for them.

In 1999, the Audit Commission published *Listen up! Effective Community Consultation*, setting out the growing importance of public consultation in the public sector, and giving practical guidance on how to involve communities in decision-making and service provision (Ref. 1). This guidance provides a strong framework for managing communication with service users. A large amount of other guidance and documentation is now available on approaches to consultation and involvement (Appendix 3).

However, this remains a priority area for development for many service providers. For example, our report on equality and diversity earlier this year concluded that involving service users is a critical factor for local authorities aiming to achieve the principles of best value and their statutory duties on equal opportunities, and that councils have a long way to go if they are to meet these requirements (Ref. 2).

On the other hand, many organisations have achieved a great deal in this area. As more and more interesting and effective approaches are tried and tested by various service providers, it makes sense to share their experiences and lessons with others. Even those service providers with a good track record in consulting service users need to continue to develop new and innovative methods of communicating with people, and involving hard-to-reach groups.

The Audit Commission itself is working to develop better awareness of service users in all aspects of our work. Our strategy includes as a key aim: ‘Focusing our work on users’ and the public’s experiences of public services and their outcomes’. We have developed pilot schemes that are trying out user-led techniques and developing user-centred methods to lead the way for our future work. This guidance is part of our programme to achieve new, more user-focused ways of working across all of our activities, including audit, inspection, research, and the communication of performance data.
In looking at the barriers to achieving involvement, we have identified four key problem areas where organisations could learn from the experiences of others:

1. Getting people interested

Our own consultation with service providers highlights the differences in approach between those who feel that they are achieving a good standard of public involvement, and those who don’t (Appendix 2). For those who don’t, a major stumbling block is the sense that the public are not really interested in taking part in consultation:

*Ordinary folk… don’t want to be involved. That is a fact of life.*

Our first group of case studies from Torfaen and Nottinghamshire are particularly strong examples of approaches that have got people interested in local policy, service provision and decision-making. They demonstrate how people can be invited to engage with complex issues and come up with ideas of their own on public policy and priorities. If questions and ideas are presented in a way that people can genuinely engage with, it soon becomes clear that they do want to be involved.

It is vital, however, that their contribution has a genuine influence, and that this is seen to be the case. A number of the voluntary organisations we spoke to (Appendix 2) spoke of their increasing frustration and scepticism about the lack of feedback and outcomes from the consultations that they took part in, a problem that Nottinghamshire Healthcare NHS Trust has also faced since its consultation event. The responsibility for involvement is an ongoing one – consultees need to know about the decisions and actions that have resulted from their contribution in the long term.

2. Involving the right people

When we asked voluntary organisations about their experiences of consultation (Appendix 2), a number commented on the issues around ongoing communication with service users:

*Consultation as an event is far less satisfactory and meaningful for service users and carers than ongoing meaningful involvement.*

*We have to be careful not to create professional consultees.*

Our next group of case studies have all tackled the issue of involving specific groups of service users with specific needs. The approaches that they have taken are varied, from the practical methods used by the Norfolk Learning Difficulty Partnership Board to the creative approach of the Old Spice Drama Group in Newcastle. However, they share a common willingness to hand over control and ownership to the service users...
themselves, who frequently take projects forward in ways not necessarily foreseen by the service providers. Maintaining the flexibility to do this is a key factor in achieving genuine involvement in the long term.

3. Making use of technology

In our discussions with service providers, those who used a wider choice of approaches and techniques were more likely to see themselves as successful in community consultation. New technology provides an ongoing source of ideas and developments that can both stimulate new approaches to consultation and open up new possibilities for analysis and the feedback of results.

In some cases, unequal access to facilities, such as computers and mobile phones, needs to be tackled if these are to play a key part in consultation. However, new technology has the potential to enable involvement in complex and demanding issues and to allow participants to lead discussions according to their own priorities. Our third group of case studies looks at the different types of technology that are used to engage and consult communities.

4. Shifting awareness

Service providers have told us that a key factor in successful consultation and involvement is the extent to which consultation is seen as a permanent and valued part of the organisation’s approach, influencing the culture at all levels of the organisation:

It’s got to become part of your culture really hasn’t it, to make it work. I think the council employs about 6,000 people and there is not much point in having two or three committed community development workers if the [rest] aren’t signed up to it.

Our final case study highlights how consulting service users on the same issues as staff and management can lead to a better understanding of different perspectives throughout the organisation, and can allow contrasting experiences of the service to be shared and understood at all levels.

How to use this guide

The people who provided these examples do not necessarily feel that they have achieved perfect solutions to the issues that they are trying to tackle. Many of them point out that more work and development will be carried out on their approach. However, the important thing is getting started. Trying something out, then working on the things that can be improved is more productive than waiting for the ideal answer to come along. Good practice is not always perfect.
The case studies provided here have been organised according to the problems that they attempt to solve. We have set them out like this in the hope that readers of this guidance will look for answers to the questions that they have about involving service users and local communities – rather than just at the examples from providers of the same services as their own.

For each case study, we have provided named individuals who are happy to be contacted by other organisations for more information about their approach.
Case studies

Getting People Interested

Case study 1

Torfaen and the Big T²

Background and aims

The Big T² event, held in May 2002, followed the original Big T in 2000. It combined fun activities, exhibitions, performances and instant opinion polls to get local people participating in planning the county’s future. With the emphasis on energy and excitement, the day gave lots of opportunities for people from the widest possible range of agencies and communities to have their say. The main aim was to allow local people to decide for themselves how they would like to be involved in influencing Torfaen’s future. The organisers also hoped to raise awareness of the Council’s work in partnership with others and to form links between different interest groups within the community, as well as increasing goodwill between the Council and local people.

What happened

The exhibitions and events filled the County Hall Civic Suite with a lively mixture of workshops, voting, feedback and presentations, organised by Torfaen County Borough Council in liaison with a range of key partners. These included health, police, voluntary groups and youth partnership.

The day started with a Workshop called ‘How are we doing?’, in which Clive Grace, Chief Executive of the County Council, put Torfaen ‘in the dock’ in order to examine just how much progress was being made on key issues. A ten minute video called Real People, Real Lives showed examples of partnership working and the difference that it makes to people’s lives, looking at issues like parenting support, people’s financial situation, the fabric of communities and support for young people.

Electronic voting gave all of the participants the opportunity to give an immediate verdict on ‘How are we doing?’ in terms of achieving the vision statements in the current Future of Torfaen Plan. The results suggested that the areas where people thought Torfaen was achieving the most were Better Care and Support, and Better Learning. The area of most concern was Better Prospects, suggesting that people had more worries about the local economy, jobs and wealth.

Next, everyone had a chance to choose the vision statement that they were most interested in and groups were formed around the hall to discuss each one. In each group, a Council Lead Officer and a partner organisation representative worked with group members to get agreement on three outcomes that they could sign up to. Every group reported an amazing level of engagement in the debate – in some cases, they had trouble limiting themselves to three outcomes! There are too many suggestions to list here in full but they included:

- more and better local play areas designed with the involvement of young people;
employing a sexual health educator;
increasing entrepreneurship, building confidence and increasing good-quality childcare;
increasing young people’s participation in the democratic process;
developing low cost and rented housing in the right locations;
creating 4000 jobs by 2008;
upgrading Cwmbran and Pontypool Stations and doubling train frequencies; and
running the Council’s vehicle fleet on a mixture of green energy sources by 2004.

During lunch, delegates were able to enjoy demonstrations and performances, including drama, gym, poetry, music and art, helping to fire enthusiasm and demonstrate local achievements. Then a theme of The Sky’s the Limit! was introduced by a presentation from John Getty, the Chairman of a small family engineering firm that has had key roles in the Virgin Balloon round the world attempt and the work of the Nassau Space Centre. His key messages for Torfaen included the importance of teamwork, self-belief and the willingness to try, accepting that mistakes happen.

Then each team set to work to develop a more ambitious option – a Big Idea for Torfaen. They came up with exciting, challenging proposals such as:

- a subsidised transport system, including high-speed monorail;
- a Nature Reserve at Pontypool Park;
- an urban health village providing alternative medicine; and
- a Torfaen National Eisteddfod.

Afterwards, Chris Koehli, the District Auditor, asked the delegates to vote on what they felt makes partnership work. The results suggested that there are concerns about how well some partnerships communicate, and about the level of elected members’ involvement. Finally, some of the key people summed up in ‘Just a minute’ each, giving their impressions of the day and of Torfaen’s future.

What was learned

The event was evaluated via evaluation forms and over 60 in-depth interviews held one month later. Comments included:

The event demonstrated Torfaen at its best;
It made me feel part of a community;
Torfaen are looking to the future – a really fantastic day.

The most popular parts of the day were the workshops, exhibitions and networking opportunities. Suggestions for improvements were mainly to do with overcrowding – about 75 more people turned up than expected.

The electronic voting results have been fed into all Torfaen’s key partnerships and sent to every delegate. The electronic information on partnerships is being used to shape Torfaen’s Partnership Framework, and it is helping District Audit to evaluate what makes partnerships work well. Torfaen’s Community Strategy now includes objectives formed from the outcomes of the day.
What made it work

A well-designed flyer, and a ‘hand-written’ compliment slip sent by the Chief Executive to give a personal touch both brought in an excellent level of support. More than 400 local people went to the Big T event, with a further 200 attending as exhibitors or performers, surpassing even the success of the first Big T event, which had 160 participants. The fact that by the end of the day – a Friday – the hall was still full, must be a measure of the enthusiasm generated.

Young people played a key part. A meeting was held beforehand at Pontypool Youth Centre to talk to them about getting involved. A subsidised bus service helped young people to attend and over 60 came along. Literature about Big T was provided in Welsh and English, and Welsh-speaking council staff took part on the day.

The event was friendly and relaxed – and while it was carefully planned, the programme was not rigid, so facilitators were able to give extra time to the most popular activities, while the event host led from the front to keep up the right pace. Energy levels were kept up by a constant supply of tea, coffee, water and soft drinks, served to participants at their tables by council staff who acted as hosts, giving everyone who attended a friendly point of contact.

Improvements for next time

The day was a big success. Sue Morgan, Chief Communications Officer from Torfaen County Council says: We took on board the experience of the first Big T event and found that using performances to highlight local potential, and providing hosted tables, helped to make it go well. We’re looking to repeat the event every two years – some people want to make it even bigger next time! But I think we’d do better to keep it to a manageable size – even so, we’ll have to consider a bigger venue. We’d like to get a few more people from health-related areas involved, and maybe get a bit more participation in the events from the business community.

Contacts

Further information about Big T is available from:

Sue Morgan Principal Communications Officer
Torfaen County Council Civic Centre, Pontypool, Torfaen NP4 6YB
email: sue.morgan@torfaen.gov.uk
Getting People Interested

Case study 2

Open Space event – Nottinghamshire Healthcare NHS Trust

Background and aims

The Open Space event brought together service users, carers, health staff, primary care team members and social services representatives to talk about priorities for improving health services in Nottinghamshire. The aim was to keep the discussion open and flexible, allowing people to come up with their own ideas for topics to explore and areas to prioritise.

What happened

The theme for the day was ‘Service Improvement through Development – Working Together to Improve Services’. Altogether 120 people attended. Some of the service users and carers were existing contacts of the Trust, and in addition the Trust invited the agencies taking part to nominate a number of their own clients to participate.

Joan Durose, the event facilitator, started things off by explaining how Open Space works and getting everyone familiar with the mechanics of the day. Then the discussion began with people putting forward topics that they were interested in and wanted to explore. A diverse range was put forward, from alternative therapies through to acute admission. All of the 27 proposals were written up on flipcharts and put up round the room. People signed up to the ones that they wanted to talk about, and the resulting lists were then used to form discussion groups.

Throughout the rest of the day, the groups met to discuss each topic. In each group a supporter was on hand to help to complete the feedback, which consisted of the key points from the discussion, what the required action was and who was responsible for taking it forward. This information was put up on flipcharts, which were posted in the main room for everyone to read.

At the end of the day, each participant was given three red stars. They were asked to put them on the flipchart topics that were most important to them.

What was learned

All of the 27 topics received some stars of importance. The top five were:

Alternatives to acute admission (36 stars)
This suggested that the Trust should encourage research on alternatives to acute admission, including looking at experimental initiatives. It should also encourage a closer look at different models of best practice, both internally and externally.

Transport provision (24 stars)
The consensus was that the Trust and social services should investigate providing funding for assisted transport.
Acute wards at QMC (23 stars)
These wards needed improvements to the environment and to security, and in the longer term should be considered for movement or closure.

Culturally appropriate services (17 stars)
A cultural review of services and service delivery was suggested, in order to identify gaps.

How to treat someone with a learning difficulty as an adult (17 stars)
The Trust should ensure that staff listen to and take notice of clients.

The remaining topics were put into charts under four major themes – in-patient service issues, community service issues, general service issues, and user and carer issues. The Trust Board discussed these outcomes at their public meeting afterwards, and the Trust’s Executive Leadership Council, made up of around 70 decision-makers from around the Trust, has also considered how to take forward the 27 areas. Action on these points will also be incorporated into Trust staff’s personal objectives.

A number of the priorities identified have already helped to develop services – for example, a dial-a-ride service has been established to help to meet the recognised need for assisted transport. Another idea arising from the event, and since developed in consultation with user groups, is the establishment of a users’ and carers’ resource centre. In order to make space for this in the Trust Headquarters, the Chief Executive and Directors will move into one shared office. This is a reversal of the usual priorities for use of space and has involved a significant organisational and cultural shift.

What made it work
The independent facilitation of the event helped to make sure that the topics for discussion were as varied as the people attending, and that the atmosphere was genuinely open to comments and ideas. Having identified such a large number of key points and potential actions, it was also vital that a structure was in place to collate and organise the material, and to ensure that the services concerned would take the points on board.

Everyone who attended the day agreed that it was vital that follow-up from all the topic areas – and particularly the top five – should be provided to those who took part. A Steering Group was established soon after the day, with members from existing partnerships, to take responsibility for ensuring that action would be taken in every area.

Improvements for next time
The Trust is planning other events in a similar format, and the main point for development in future will be providing more feedback to those who took part. Tracy Holmes, Head of Communications, says: We did write to people with information after the day, but we’ve found that participants want more – they keep asking for more updates on the positive actions that we’ve taken since. So just recently, our Chief Executive has written to everyone with an update on all 27 areas for action. This is something we need to keep on top of – people want to see real results from their involvement.
Contacts

Tracy Holmes, Head of Communications and Involvement
Email: tracy.holmes@hq.cnhc-tr.trent.nhs.uk

Helen Perfect, Special Projects Manager
Email: helen.perfect@nottsnc.nhs.uk
Nottinghamshire Health Trust HQ, Southwell Road, West Rainworth, Mansfield, Notts
NH18 4HH
Involving the Right People

Case study 3
Norfolk Learning Difficulty Partnership Board

Background and aims
The Partnership Board is working to improve services for people with learning difficulties in Norfolk. It has representatives from health, social services, education, district councils, carers and local advocacy groups. It includes people with learning difficulties in its membership, to get service users involved in planning the services that they use and in making high-level decisions that affect their lives. Of 33 board members, seven are people with learning difficulties.

What happens
All Board members were recruited in the same way. Key organisations were approached and asked for representatives to sit on the Board. The members with learning difficulties were nominated by local advocacy and self advocacy groups.

The approach to Board meetings has been designed to make sure that all members have the opportunity to understand and contribute to the Board’s discussions and decisions. All of the information for the Board, including agendas, minutes and reports, is produced using accessible and easy to understand words and pictures. Agendas and reports are sent out at least three weeks before the meeting so that all members have time to read and think about what they are going to be talking about. All members receive the same information – no distinction is made between different members.

All of the people with learning difficulties who sit on the Partnership Board have their own supporter, or advocate. This person is available to provide support during the meeting and in preparing for meetings. There is also a pre-meeting for Board members with learning difficulties two weeks before the main meeting to go through the agenda, minutes and reports. This helps the members with learning difficulties to feel better prepared for the main meeting.

All Board members have signed up to certain rules about how to behave in meetings – for example, participants are reminded that when someone is talking, everyone else should listen, and instructions are included about asking questions and starting the meeting on time. These rules are handed to any guests or members of the public that attend Board meetings, and they are also read out at the start of the meeting. Each meeting begins with an ice-breaker to make sure that everyone feels at ease. For example, on one occasion, when the members introduced themselves they also talked about their favourite TV programme. This helped to relax everyone and to create an informal atmosphere.
All members of the Board use communication cards at the meeting, and at the beginning of each they are reminded how to use them. Red means ‘I want to speak’, green means ‘I agree’ and orange means ‘slow down’. Using these cards helps to ensure that the meeting goes at the right pace and that everyone understands what is being said. There are only ever two main items on the agenda and a break is taken halfway through. This helps to make sure that the agenda isn’t rushed and that the meeting stays manageable.

There are six meetings a year, three of which are public meetings. The public meetings are advertised in the local paper and in the newsletter for people with learning difficulties in Norfolk, which is published in an accessible format after each meeting. The last public meeting attracted 33 members of the public, including people with learning difficulties, carers and staff.

In recognition of their time and the expertise that they bring to the Board, people with learning difficulties who attend the meetings receive expenses, which have been negotiated and agreed with them. Members get £8 for a two-hour meeting, £10 for a three-hour meeting and £12 for a four-hour meeting. On top of this, travel expenses are paid at 24p a mile.

Including the cost of the venue, printing and refreshments, the cost of a large public meeting is between £300 and £500, while normal Board meetings are cheaper. The Partnership Board is supported by a secretary who organises meetings and pre-meetings, prepares minutes, agendas and papers and produces an accessible newsletter. The time dedicated to this role is between one and two days a week.

**What was learned**

The Partnership Board has provided a structure for people with learning difficulties to participate at the highest level of decision-making. And because the Board has real clout, these decisions have genuine outcomes in terms of improving services – as a result, people with learning difficulties can see that their input has brought about change.

But there have been other knock-on benefits. The success of the Board’s approach, and the opportunities that it provides for communication between groups, has increased trust between statutory organisations and advocacy/self advocacy groups. It has also shown how all meetings could be improved, by placing emphasis on getting everyone involved, making sure that documents are clear and accessible, and showing that decisions are genuinely effective in terms of improving services. Other Partnership Boards, for Children’s services and Mental Health services, are about to be set up in Norfolk. They will use the experiences of this Board as a model.

**What makes it work**

An initiative like this needs support and co-operation from everyone taking part if it is going to be successful. In Norfolk, involving people with learning difficulties has had strong commitment from all Board members, including senior managers and chief executives from social services, health, education, carers and advocacy groups, voluntary groups and the private sector, all of whom sit on the Partnership Board and
share responsibility with people with learning difficulties. Having a senior officer to lead on the establishment of the Board from the original strategy has also been very important.

Everyone involved has gained something from participating. Apart from the opportunities to improve planning, decision-making and services, the Board members with learning difficulties find that their confidence is improved by the experience of taking part in meetings and seeing the effects of their input. Also, senior staff in statutory organisations gain confidence in communicating with and involving people with learning difficulties. The Board has provided an effective model for all meetings to be run in a user-friendly way that provides real engagement.

**Improvements for the future**

While the Partnership Board has achieved a great deal in terms of involvement and participation, it would like to go further to engage the widest possible range of people with learning difficulties, and give more people the opportunity to put their views forward. The Board is planning to develop a Norfolk-wide ‘People’s Parliament’ for people with learning difficulties, as well as a structure of local groups that can feed their views into the main Partnership Board. It is also developing its own website that will go online at the end of the year. These developments should make the Board more representative and make it even more effective by including the full range of views.

**Contacts**

*Tim O’Mullane Consultation and Communications*
Norfolk County Council County Hall, Matineau Lane, Norwich NR1 2SQ
Email: tim.omullane.socs@norfolk.gov.uk
Involving the Right People

Case study 4
Best Value Review of Direct Payments – Wiltshire

Background and aims

Wiltshire and Swindon Users’ Network began in 1991 as an independent organisation controlled by service users. Its members are adults who are long-term users of health and social services and its aim is to enable users to join together to bring about changes to the services that they receive and to make them more responsive to all users’ needs. Direct payments were introduced in 1997. This system gives care service users the option of getting payments instead of services from social services, so that they can employ their own care staff and make arrangements that better meet their needs.

The Network’s involvement in the best value review began with an idea for a user-controlled review that it put forward to social services and the University of Bath Research Partnership. Network members had already been involved in research and evaluation of their services, and, before the introduction of direct payments, they had carried out their own assessment of the Wiltshire Independent Living Fund. The Network was ideally placed to take the lead in carrying out the best value review.

The idea was supported by social services, who already thought that a review of direct payments was a priority, and an application for funding was made to the Joseph Rowntree Foundation by Wiltshire and Swindon Users’ Network and the University of Bath Partnership. The Foundation also advised on the development of the full research proposal – service users were competing with professional researchers for funding, so this support was important in creating a level playing field.

What happened

The work was led by a Project Group of disabled people, who were either users, or potential users, of direct payments. They were sent an open invitation to join the group and meet regularly to design and carry out the research. The project employed a disabled researcher as co-ordinator, and also a disabled project director from the Network and a second project director from the University Partnership who acted as review managers for the council. The co-ordinator and directors collated data, did a literature review and wrote the review report.

The project co-ordinator also sought out other potential users of direct payments with dual sensory impairments and learning difficulties to join the Group in order to get other, more marginalised voices heard. Unfortunately, no users from minority ethnic groups were found to take part in the project, so a representative from the Wiltshire Race Equality Council was invited to join the Best Value Project Board.
The Project Group’s methods included:

- a survey of users of the Support Service for Independent Living (SSIL) to see how well it met service users’ needs in providing support to people buying their own care;
- a survey and costings comparing the local SSIL with the support mechanisms used in five other local authority areas;
- a survey of social services staff, exploring the process of setting up and managing direct payments;
- one-to-one interviews carried out by Project Group members with social services team managers;
- a cost comparison between direct payments and direct services, carried out by council officers and commented on by the Project Group;
- some Project Group members kept diaries of their experiences and thoughts about using direct payments or direct services, for a six month period; and
- a literature review on independent living, user empowerment and policy issues nationally, and on other direct payment schemes.

The Joseph Rowntree Foundation funded the Project to support the production of a good practice guide to user involvement in best value reviews, based on the user group’s experiences. This was published by the Foundation after the review was completed.

What was learned

The best value review showed that people in receipt of direct payments value very highly the greater control and independence that they have in relation to the services they receive – despite the fact that many commented on the difficulty and stress of taking on the management of their own care. Since the introduction of direct payments, very few people who have taken them up have later opted to return to direct services. However, the review concluded that much more work needed to be done in order to provide appropriate support and related mechanisms, internal management and financial processes.

The Review concluded that care managers lacked the knowledge and confidence needed to encourage service users to take up direct payments. Occasionally, late payments had left service users unable to pay for the services that they need. Additionally, the SSIL was not catering for the needs of as wide a group of service users as was originally intended.

The users in the Project Group felt that they had gained valuable insights into the care management process that would be helpful to them in future, and that their own skills and confidence had been increased by taking part in the Review. Some were interested in being involved in further research projects. The Council felt that the service had been reviewed thoroughly and that they had gained awareness of how to improve services and systems from the users’ work and expertise.
What made it work

The service users emphasised that throughout the project, the access and support needs of the individual group members were always fully recognised. These included:

- making arrangements for transport;
- pre-meeting briefings for people with learning difficulties and particular communication needs;
- provision of British Sign Language and other interpreter services; and
- speedy reimbursement of expenses and fees.

The project was largely possible because of the strong history of user involvement in Wiltshire, and the learning and experience gained from the previous activities of the Users’ Network. Clare Evans, co-director of the Project and formerly Director of the Users’ Network, points out:

*Having sufficient trust between agencies was a key factor. The County Council handed over considerable power to us in giving us the best value report to do, and having the full support of social services senior management was vital to the Project. We felt we had anxieties to relieve among some council personnel about our ability to deliver the review on time – but in the event, we were complimented on the thoroughness of the research.*

Improvements for next time

Project Group members were less sure of their role in setting up a costings and cost comparison system, and both they and the Council Officers involved were less experienced in communicating with each other. The results of the cost comparison exercise were also questionable – while they concluded that direct payments were more expensive, this does not concur with the results of other studies. More work is needed on the methods used to calculate costs, and more support is necessary to enable service users to take an active part in evaluating this data.

Contacts

Clare Evans Wiltshire and Swindon Users’ Network
c/o 2 The Orchard, Cherhill, Calne, Wiltshire SN11 8YL
e-mail: clareevansuser@yahoo.co.uk


*The Good Practice Guide to User Involvement in Best Value Reviews is available, price £13.95 plus £2 p+p, from:* York Publishing Services Ltd, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ
Tel: 01904 430033
Fax: 01904 430868
Email: orders@yps.ymn.co.uk
Online: http://www.jrf.org.uk/bookshop

*A user-controlled Best Value Review of direct payments – Findings are available at* http://www.jrf.org.uk/knowledge/findings/socialcare/592.asp
Involving the Right People

Case study 5
Action for Health Senior Citizens in Newcastle

Background and aims

Action for Health Senior Citizens in Newcastle (AFH-SCIN) is a sub-group of the Newcastle Healthy City Project. The ten members are older people who have been working on health and safety issues relating to older people since 1992, and have acted as a consultation group for the local community care programme. They have researched and presented older people’s views about services, provided information and encouraged participation in health promotion activities.

The Old Spice Drama Group was founded by AFH-SCIN in 1997 with the aim of using drama to highlight health issues through entertainment. The initiative was developed by older people for older people, and had the immediate benefit of developing older people’s skills as actors, entertainers, writers and producers.

AFH-SCIN then put forward a proposal for funding for an Older and Safer Programme to the Northern Rock Foundation, and the three-year programme started up in April 1999. The aim of the programme is to raise older people’s awareness of how their homes can be made safer, of ways to keep fit and active and of reducing the likelihood of falls.

How it was done

The Old Spice Group started off by attending a training weekend on music, drama and script writing. The Group then worked together to create an entertainment programme based on the theme of health and safety for older people. It has taken its programme of songs, sketches and verses to a range of audiences and venues. As well as performing for older people, Old Spice have also appeared before professional workers, volunteers and students. Local radio has also helped to take the sketches to an even wider audience.

The full programme lasts about 35 minutes and consists of about four sketches interspersed with three songs, spoken verses and poems. Each sketch is quite short and conveys a message, for example, about attitudes to older people within families in everyday life, or about safe behaviour. The tone is light-hearted and humorous, with an underlying serious purpose.

The programme has also been adapted to meet the needs of different audiences. For examples, the words of sketches and songs can be put on an overhead projector for the benefit of the hard of hearing, and visual effects can be expressed in words for the partially sighted. Scripts can also be supplied in advance to translators and interpreters so that translations in other languages are made available for members of ethnic minorities.
The Older and Safer programme has involved events held in each of the three Primary Care Group areas of Newcastle. Older people are invited to a day of fun and entertainment where they can:

- pick up information packs with safety leaflets and booklets;
- get information and advice about safety in the home from stalls provided by the fire service, electricity service, and suppliers of safety equipment;
- try out easy exercises with a tutor;
- complete a Royal Society for the Prevention of Accidents (ROSPA) Checklist for a Safer Home;
- enter a prize quiz about identifying hazards in the home; and
- be entertained by the Old Spice Drama Group with humorous songs and sketches on the theme of safety in the home.

What was learned

The Old Spice Drama Group Programme can be used flexibly to illustrate different topics on different occasions. For example, it has introduced themes for discussion at workshops and conferences. At performances for older people, audiences often join in discussions afterwards and the views expressed have been taken forward by AFH-SCIN to contribute to planning and policy development, on subjects such as:

- community care;
- hospital and community services; and
- health promotion.

This approach has contributed to the level of consultation with older people on the development of initiatives such as the AFH-SCIN’s Older and Active seminar and workshops, the launch of the Better Government for Older People Programme, the Health Improvement Programme and the Health Action Zone Action Plan.

Up to 200 people have attended each Older and Safer Day, and many have collected the information packs and joined in the exercise sessions. The events have provided opportunities to get local organisations involved in the planning of the days, which has also led to their involvement in follow-up work in each local area and has helped to develop partnership working. However, the older people from the AFH-SCIN have taken the lead in organising the events. They have also had the opportunity to influence professional practice and to contribute to the development of accident prevention strategies.

What’s made it work

The key to the success of the AFH-SCIN’s work has been that older people take the lead throughout. As a result, the emphasis in the events and activities has been on entertainment and enjoyment for all of the older people involved. The light-hearted and friendly atmosphere created at Old Spice performances and events helps audiences to get involved and join in discussions. This in turn allows their serious views on services and contributions to policy to be heard.
The performances have also provided an opportunity to show the older person’s perspective to professional staff, voluntary workers and students, while the Older and Safer Days have brought service providers and service users together, encouraging joint working by local organisations and allowing users’ views to be involved. Each event has been evaluated, and information from this process is used to inform and develop future events.

**Improvements for the future**

AFH-SCIN would like to build on its experience of partnership working in order to participate in the Falls Prevention Programmes set out in the National Service Framework Standard on Falls Prevention. It would also like to develop the Older and Safer theme to include safety outside the home, including the prevention of accidents in the street and in open spaces, in partnership with the police as a contribution to Newcastle’s Community Safety Strategy.

Another main objective is to involve elders from minority ethnic communities, and older people with sensory difficulties, in developing appropriate methods of communicating safety messages to these groups. AFH-SCIN would also like to build on its experience of working with training programmes for social work and nursing students, and to develop further ways of presenting users’ perspectives on services.

Groups in other areas have been taking an interest in Old Spice’s performances, and have requested scripts to use themselves. It is likely that Old Spice’s material will be used for the benefit of more older people and with wider applications in the future.

**Contacts**

Vera Bolter Chair Action for Health Senior Citizens in Newcastle
14 Great North Road, Jesmond, Newcastle-upon-Tyne NE2 4PS
email: verabolter@hotmail.com
Involving the Right People

Case study 6
Younglivin – Kingston Social Services

Background and aims

Young people don’t contact social workers. No matter what their problems are, getting help from social services usually depends on teachers, friends or neighbours noticing that there’s a problem and getting help on the young person’s behalf. The aim of the Younglivin project is to put the young person in control of the situation, encouraging them to ask directly for help, advice and information when they need it and on their own terms.

The Project began when social services visited a local girls’ school and asked the pupils to design a poster to promote Children and Family Services. The response to the initial poster design, from the whole school was, ‘Don’t just do a poster – do a website!’ So the same young people were given the role of designing, implementing and maintaining the site. From the outset, the Project was led by the young people themselves.

What happened

An initial monitoring group was set up with a number of girls from the school, a 17 year old student on work experience and a 17 year old man with cerebral palsy, who was put forward by a member of the Disabled Team. This group were involved in every aspect of the project, including going to meetings with councillors and managers.

The website allows young people to get help and advice on the issues that they have selected themselves, and enables them to contact a social worker via a web contact form, so that they don’t have to use email packages or hotmail, which they may not have access to. They can have a two-way conversation with a social worker while feeling anonymous, in a medium that they are comfortable with. To underline this, even the cartoons in the art work for the site face into the screen, to create the feeling of anonymity.

A monitoring group of young people, aged 13-19 and representative of the local community, meets every two months under the chairmanship of a 19 year old, to brainstorm new ideas for the site and to monitor all the content. They get feedback on market testing of the site, vote links on or off, and present Younglivin to schools and agencies within Kingston. To broaden the range of young people involved, representatives from other youth forums, such as the Borough Youth Club, also come along to meetings.

The website has been expanded to offer specific e-services for looked after young people, for example, uniquely enabling them to complete their review process online.
What was learned

It’s clear that young people are accessing help and advice through the site that they otherwise would not ask for. In particular, young males are more willing to come forward with queries, particularly about sexual health and sexuality. Sixty per cent of Younglivin’s users are male, while school nurses find that only 10 per cent of the young people who approach them for help are boys.

Young people have also accessed protection services that they otherwise might not have contacted – for example, a girl who was being sexually abused and who found help through Younglivin, has commented that if the service had been there two years earlier she would have asked for help that much sooner.

Younglivin produces quarterly Webtrend reports that provide statistical information for the Children and Family Services management information meetings. The data is used to help plan services and the future development of the site.

Younglivin has been asked to provide consultancy to two other local authorities who are developing similar projects, both in terms of managing the technology, and involving young people. Other achievements include:

- being presented at the Towards 2005 conference, on implementation of the government’s local authority e-service strategies;
- reaching the finals in the Stockholm Challenge, an international award for innovation using IT;
- winning the 2001 award for Innovation in Health and Social Care; and
- contributing key speakers for the Department of Health Here to Help You Learning Exchange for 2002 Health and Social Care award winners.

What made it work

The young people involved in Younglivin are in no doubt about why the project has been so successful – it’s because the lead, control and implementation of the project rested with them from the very start. Not only have they found media for communication that young people are more comfortable with, they have also found ways to put the control in making contact with social services into the hands of the young person concerned. It also enables fairly immediate contact – very important to young people whose problems are often urgent. The fact that young people are being given the means to tackle their problems before they hit a critical stage may well help avoid the need for crisis intervention in the future.

Malcolm Cannon, the monitoring group chairman says:

The young people involved with the project really feel they own it, and it has helped forge lasting and meaningful partnerships between them and local service providers. It really hit home just how special this situation is when we went to the Health and Social Care Awards – looking round the room, we realised ours was the only table with any young people sitting round it!
Improvements for the future

Younglivin is looking at other ways to make it easier for young people to contact social workers. It is developing a mobile phone based resource to allow young people to contact their personal adviser by text message – ‘putting a social worker in your pocket!’ Younglivin will also soon be available on One-Stop-Shop internet kiosks around the borough. They are expanding on their successful brand to develop more e-services for young people in Kingston. The next initiative will look at how the site can be used to get young people interested in democracy and to create a participatory e-democracy for local young people.

Contacts

Website: www.younglivin.org.uk

Linda Jackson Childrens Services Development Officer
email: linda.jackson@rbk.kingston.gov.uk

Malcolm Cannon eServices Development Officer
email: malcolm.cannon@rbk.kingston.gov.uk

Alpha Children’s Resource Centre, Alpha Road, Surbiton, Surrey KT5 8RS
Making use of technology

Case study 7
ACCENT Scheme – Suffolk Constabulary

Background and aims

Suffolk Constabulary has long recognised the value of consultation with the local community on local policing issues, and it continuously aims to improve the ways of doing this. In particular, it has wanted to move beyond traditional consultation methods and find more dynamic ways of involving and listening to the general public, including hard-to-reach groups. The need is for good quality data that can be quickly and easily fed into planning processes in order to improve services.

During 1999 the Constabulary piloted Active Community Consultation Employing New Technology (ACCENT) – a system that takes TV game show technology to public meetings and uses it to get serious and rigorous information about people’s views.

How it works

The ACCENT equipment consists of 75 infra-red voting handsets, similar to TV remote controls, whose signals are fed into a laptop computer connected to a video projector and portable printer. It combines presentation software, which displays the questions and results, with Question Wizard software, which provides the interactive element. The equipment is fully portable and can be installed in about 30 minutes in a variety of venues.

Questions can be programmed before each meeting, or added during the session so that any extra issues that crop up during discussion can be included. The questions are shown on a large screen and the participants can answer by voting with their handsets. The system immediately collates the results and shows them on the screen in colour charts or graphs.

ACCENT is easy to use, and participants can get comfortable with the system straight away. Usually a question session begins with a few questions on age, gender and ethnicity to allow people to get used to the handsets. Then the main survey questions are asked, and the participants see the results unfolding before them. This often leads to energetic discussions, and to further questions as people ask for more votes on the developing themes. The agenda for discussion at a meeting can be influenced to reflect the issues that are shown to be of most concern.

For example, to get information about fear of crime locally, the question might be, How safe or unsafe do you feel in the area where you live?, offering a choice of answers – 1. very safe. 2. fairly safe 3. fairly unsafe 4. very unsafe. The answers can then also be cross-referred with the answers from other questions, such as age or gender, and the resulting profiles can be instantly shown to the participants.
What has been learned

During the pilot exercise, the system was used to gather opinions from people attending two policing forums and four focus groups. These sessions were facilitated by an independent representative from Pricewaterhouse Coopers and independently evaluated by an assessor from Suffolk County Council.

The evaluation showed that ACCENT was helping a full range of views to be expressed at meetings that might otherwise be dominated by self interest groups or by opinionated individuals. For example, at an interactive focus group with young people, it was noticeable that the loudest leaders of the group, who were trying to sway the meeting in their own direction, were shown by the anonymous voting to be in a minority, giving a far more accurate picture of young people’s views. The young people themselves highlighted the advantages of anonymity in the de-briefing session afterwards. The novelty of the equipment also helped to get young people interested and allowed all sorts of issues to be explored.

ACCENT has been taken into a wide range of venues, including pubs, village halls and schools, and has been used to get information for a number of purposes, including:

- to inform and help to develop the Annual Policing Plan. The priorities identified by people using ACCENT – disorder, violent crime, drugs – were made the Force priorities for the year;
- to consult on levels of council tax;
- to identify priorities and action plans for community safety initiatives;
- to consult on the police authority’s best value reviews. Public views on review topics, such as access to the police and the role and allocation of patrol officers, have been gained at policing forums;
- to explore questions on the fear of crime, showing considerable variation across different parts of the county. As a result, the police authority devoted its annual partnership seminar this year to fear of crime; and
- to consult internally on restructuring review work and as part of a continuous improvement process.

What made it work

The success of ACCENT is largely due to the commitment of Suffolk Constabulary to consulting and involving the general public. ACCENT allows quantitative data to be collected quickly and accurately and, combined with qualitative information from discussions and focus groups, it can give a comprehensive picture of public views and priorities from various parts of the community, informing and directing decision-making at all levels.

The electronic voting system has the advantage of giving a fun, lively and active element to meetings and discussions. It also gives an instant and accurate measure of the full range of views of people attending. In environments where discussions are sometimes dominated by particularly vocal individuals, the anonymity provided by the handsets can help to give a clearer picture of the full range of opinions and viewpoints.
The ability to get instant results from the system also provides opportunities for people to get more involved in the issues being discussed. In the course of a question session, participants can put forward extra questions, and discussions can develop according to the answers. This helps to transfer control of the agenda to the public and allows them to go away with instant information about results and outcomes.

The results of a series of meetings, for example the 14 policing forums held in Suffolk, can be aggregated to reveal the overall views of all those attending. Comparisons can be made with the answers to the same question at previous years’ forums, helping to identify trends.

**Improvements for the future**

Since Suffolk Police acquired ACCENT it has used it on over 150 occasions, and continues to develop the range of uses. For example, the equipment can be used internally for evaluating activities, such as training courses. The handsets have also been used to record individually the answers to multiple choice or survey questions, so that the information can be quickly downloaded for analysis.

**Contacts**

*Clive Marshall*
Suffolk Constabulary Force Headquarters, Martlesham Heath, Ipswich, Suffolk IP5 3QS
email: clive.marshall@suffolk.pnn.police.uk
Making use of technology

Case study 8

E-consultation – Royal Borough of Kensington and Chelsea

Background and aims

This Project aimed to find out whether internet technology could make it easier to gather the views of local people. The intention was to see whether using the internet would increase the number of people taking part in consultation, and whether it would help to make it more of a two-way process.

There were two main goals. Firstly, Kensington and Chelsea wanted to get the views of the community and key stakeholders on their strategy for Implementing Electronic Government, which, at that point, had not been widely consulted on. They also wanted to get people thinking about e-enabled government and how it might affect services and service users.

Secondly, this offered an opportunity to evaluate the potential of the internet for improving this type of detailed consultation process. The project was evaluated both from the council’s point of view and from the perspective of the participants, with a view to developing a model for using the internet in the consultation process in future.

How it was done

Local people were invited to take part through the Borough’s Residents’ Panel – a group of about 1,400 residents representative of the local community – and through community and voluntary organisations, and local businesses. Key stakeholders, for example, from the health authority and police, and council staff, were also involved. Altogether 246 people took part.

Participants were encouraged to make use of free internet facilities and support in local libraries, so that the minority without home internet access could still take part. Altogether about 30 people on the Residents’ Panel opted to use library facilities and 18 went on to contribute their response in this way.

The Borough worked with a consultancy, Dialogue by Design, to produce a wide-ranging web-based consultation process for the public. A model was adapted to get people involved in a difficult topic, and the website was intended to make the e-consultation process as accessible as possible to people with little experience of using technology or the internet.

Two sessions were included:

- For the consultation on the Implementing Electronic Government Strategy, registered participants were able to log in to the site as many times as they liked over a ten-day period, read the consultation text and respond to a series of questions. They could then re-read and amend their responses up until the closing date. They were contacted via email during this period to remind them
about deadlines and to update them on how many people had responded. Phone and email helplines were provided for help with any problems.

- In a second session the participants could see the results of the consultation online. They could view individual responses, grouped by question and by theme, and could download a summary of the results. They could then give views on the consultation process itself.

**What has been learned**

The results showed that members of the public are willing and able to participate in well-structured discussion using internet facilities, even where the topic is complex. The consultation results have led to significant changes in the e-government strategy, with more emphasis being placed on social inclusion.

The main problems identified were to do with:

- the use of passwords and IDs;
- making processes inclusive; and
- the need for good quality support.

But many benefits were also identified. In particular, information was obtained from everyone taking part, not just the more vocal or visible. Information could also be fed back to the people who had contributed, encouraging their sense of ownership of the process and making it clear that the information they supplied was being used. The window of time during which consultees could participate was increased, allowing better quality, more thought-out contributions. And the widening of opportunities to take part helped to avoid certain groups suffering from participation overload.

Over 90 per cent of those taking part said that they would be happy to participate in similar consultations in future. Comments from consultees included:

*I found it really useful to see my own comments and see how they compared with others.*

*The very fact that you are asking for my views without having to go to a crowded room is amazing progress.*

The Project proved that e-consultation can make a significant contribution to the consultation process, though it is unlikely to replace traditional methods until more people have access to the technology.

**What made it work**

Three-quarters of the participants rated the website as easy or very easy to use in order to comment on the e-government plans. Two-thirds rated it easy or very easy to navigate. Careful design of the site and structuring of the multi-path discussion clearly played a crucial role, as did the helpline, which was also well-rated. The Project showed that if these needs are met, people can take part in complex debates, and the internet has great potential for making this process easier.
Improvements for next time

The main areas for further development include:

- simplifying logins and passwords – case sensitive combinations of letters and numbers were used, which caused problems with mistyping;
- making the site easier to use – not everyone who has access to the internet is an expert at using it;
- reducing the amount of time taken to complete the consultation – many of those responding commented on the length of the process;
- training – to develop staff’s technology and customer care skills, and to train people in the community so that they can access the internet; and
- providing kiosks in secure sites, such as council office waiting rooms and libraries.

Contacts

Marion Sinclair Information Systems Strategist  
Royal Borough of Kensington and Chelsea, The Town Hall (RN101), Hornton Street, London W8 7NX  
Email: marion.sinclair@rbkc.gov.uk.

Dialogue by Design  
Ambassador House, Brigstock Road, Thornton Heath,  
Surrey CR7 7JG  
Tel: 020 8683 6602  
Email: pippa@dialoguebydesign.com

Consultation information and responses are available at:  
www.rbkc.gov.uk/consultation

A demonstration presentation on the project is available at:  
www.dialoguebydesign.com
Shifting awareness

Case study 9
Best Value Review of Access to Housing Services – London Borough of Southwark

Background and aims

As part of its best value review of access to housing services, Southwark Housing asked the Office for Public Management (OPM) to carry out a consultation exercise with service users, staff and management to gauge their views on service quality. The services being reviewed were: housing advice; assistance for applicants to the Housing Register and for transfers; and assessment and homelessness prevention services for people with housing problems. The services are aimed at either enabling people to stay in their own homes or helping them to access more suitable housing.

The Review covered access to housing services provided by Neighbourhood Offices, the Housing Access Unit and the Housing Advice Section.

What happened

The consultation was carried out through:

- three service user workshops;
- one staff workshop;
- one workshop with middle managers;
- telephone interviews with elected members;
- telephone interviews with representatives of tenants’ groups;
- a postal survey of over 2000 service users; and
- a postal survey of staff and other agencies.

In the workshops, service users and staff were asked to look at a list of service quality measures, such as the quality of housing stock and systems, the quality of management, and staff skills. They were then asked to score each out of ten in terms of their importance in delivering quality services, and their actual delivery by the Council. Before the managers’ workshop, managers were asked to guess the ratings given by the service users.

This allowed the workshops to identify where there were gaps between the perceived importance of each measure, and its actual delivery. The results from the three groups were then compared and contrasted, in order to highlight the differences in priorities between the groups and to help define gaps in performance.

The resulting analysis of performance gaps was then used in drafting a Vision for Access to Housing Services. Workshops were re-convened to test the Vision document, giving an opportunity to check if the needs and preferences expressed in the consultation had been interpreted accurately.
What was learned

Service users were inclined to identify bigger service gaps than staff, who in turn identified bigger service gaps than managers. The quality measures that each of the three groups selected as having the biggest service gaps were also different between the groups. Service users described the biggest quality gaps as being in the quality of management, the equity and security of systems, and the inter-personal competence of staff. Staff thought the biggest gaps were in the quality of management and the quality of housing stock; and management thought that they were in the quality of housing stock, the responsiveness of staff and the equity of systems.

The consultation showed that the two main problems perceived were around:
- communication and leadership from top managers, filtering down to the front line and affecting the quality of customer care and service delivery; and
- the allocations policy, which was seen as unclear and too rigid, and was not perceived to be fair.

Other related problems included:
- lack of housing stock, and failure to make the best use of existing stock;
- staff training and retention;
- problems with IT systems and contractors; and
- concerns about the quality of service, including staff conduct, waiting times, communication and information, and lack of service user involvement.

From the vision document an Action Plan of urgent improvements was developed and implemented including:
- a newsletter for housing register and transfer applicants;
- re-writing key information leaflets in plain English;
- developing a new range of information leaflets; and
- involving stakeholders in reviewing the housing allocations policy.

Results were also rolled forward into the following formal Best Value Review of Community Housing Services (CHS), which had a number of overlaps with the services covered in the Access to Housing pilot. These results identified needs for: skilled staff delivering a professional service; better communications with service users; clear policies; and improved stakeholder involvement in policy development, which resulted in stakeholder and tenant representation on the formal review’s Project Board.

The subsequent Action and Improvement Plan for the formal CHS Review addresses these needs through: improved staff training and induction; improved service standards; better publicising of translation and interpretation services; and the development of a partnership forum with key stakeholders, including service users. A separate, fundamental internal review of housing allocations policy, involving staff, councillors and key stakeholders – including a tenant representative – has also begun. This review aims to increase choice in lettings and introduce greater transparency.
What made it work

The three workshops with service users were held at a central location, easily accessible by public transport. A random selection of people on the housing register was selected from a range of housing categories and at different stages of the application process. Each workshop had a wide cross section of service users in terms of age, gender, social class and housing situation.

The format for the workshops was designed to get the maximum amount of information on how, why and when customers use the service, and what their experiences and views are. Discussions were held both individually and in groups in order to get the perceptions of the individuals combined with an interactive element.

The workshops allowed three different groups – service users, staff and management – to give their own perceptions and priorities in a directly comparable way. This helped to highlight where the differences in understanding and priorities were, and gave opportunities to tackle the service gaps identified.

Improvements for the future

While the outcomes from this consultation provided useful information, Southwark Housing felt that there was a need for more quantitative research to balance the qualitative approach used here. In particular, it was difficult to recruit focus groups that accurately represented the local community, or that could involve vulnerable service users, such as residents of supported accommodation. For the following Best Value Review of Community Housing Services, a wider range of methods was used, including exit surveys, questionnaires, and focus groups. This has allowed a wider range of clients and viewpoints to be reached.

It also became clear that consultation should be scheduled early within the review, to allow time for an action plan to be developed and commented on by service users and other stakeholders. The Project Board for the later review involved a range of stakeholders, including service users, and an implementation team was recruited to ensure that the Action Plan was carried out.

Contacts

Ross Lambert, Tenant and Leaseholder Participation Compact Manager
e-mail: ross.lambert@southwark.gov.uk

Claire Linnane, Best Value Project Manager
e-mail: claire.linnane@southwark.gov.uk
Southwark Housing
Municipal Offices, 9 Larcom Street, London SE17 1RX
The principles of successful consultation

Our case studies show wide-ranging and contrasting approaches. However from them we have developed the following common underlying principles of effective consultation and involvement.

Commitment and culture

An initiative like this needs support and co-operation from everyone taking part if it is going to be successful. In Norfolk, involving people with learning difficulties has had strong commitment from all Board members, including senior managers and chief executives from social services, health, education, carers and advocacy groups, voluntary groups and the private sector, all of whom sit on the Partnership Board and share responsibility with people with learning difficulties (Case study Norfolk page 13).

Several of our case study contributors commented that a key element in developing a successful initiative was having support at all levels, from frontline staff to senior management, and from the full range of agencies involved. The impetus to prioritise service user and public involvement needs to be part of the organisation’s or partnership’s approach and culture, with participation coming from a genuine commitment to make connections with the community being served. Consultation that arises from a statutory requirement or management directive alone will often fail to deliver the goods.

Support and structure

None of the bodies we wish to help with their consultations have an overall vision, strategy or arranged plan for consultation. It is something they increasingly wish to do and think they do better and better but they haven’t taken proper stock. There is a need for public bodies to each have a trained leader of consultation – someone capable of the oversight of a meaningful and satisfying programme.

Survey of voluntary organisations (Appendix 2)

Another aspect of the organisation’s commitment to involving service users is shown by the extent to which consultation and involvement is supported by cross-organisation structures. Our case study from Nottinghamshire Health Trust shows that the views gathered from a consultation day can have outcomes for a wide range of services, and it needs co-operation and co-ordination across a range of departments and levels, both in approaching the initial consultation and in co-ordinating the responses from the services afterwards. Senior managers should ensure that public involvement is considered in:

- funding – a specific budget for consultation should be considered;
● planning – approaches should be planned and co-ordinated across the whole organisation, not just within individual departments, in order to make the best use of expertise and resources; and

● training – staff at all levels should receive information and support.

Where possible, organisations should allocate specific staff or departments the responsibility for co-ordinating and supporting consultation across the organisation.

Our examples are drawn from both single one-off consultation events, and from ongoing structures providing long-term input. Cross-organisational planning should take account of the need for both long- and short-term consultation, including:

● structures for ongoing community and service user involvement feeding into long-term planning. These should allow ongoing dialogue between organisations and the communities they serve, and give opportunities for participants to build awareness and understanding of the services and issues involved. Examples of this provided here include the Learning Difficulty Partnership Board in Norfolk, and Action for Health Senior Citizens in Newcastle; and

● short-term or one-off research or consultation on specific issues and services. It is important to include these as well as the longer-term structures. They can answer specific questions about the experiences of local service users and broaden the range of people who can be consulted beyond those regularly involved in consultation structures. This can be achieved by consultation events, such as Nottinghamshire Healthcare NHS Trust’s Open Space event, and can be supported by investment in techniques and equipment that help to organise, facilitate and analyse consultations, such as Suffolk Constabulary’s ACCENT scheme.

Diversity and representation

We have to be careful not to create professional consultees.

Survey of voluntary organisations (Appendix 2)

Our contributors have all considered ways to ensure that participants in consultation are representative and inclusive. Ideally, the people who are being consulted should reflect the make-up of the community or section of the community concerned, something that Southwark’s Review of Access to Housing Services tried to achieve by including service users from a range of circumstances and backgrounds. If the consultation is on a specific service, then it may be best to target current service users for their experiences and views. However, it is often important to speak to non-service users, as they can provide information about why they do not access services.
29 Some organisations have commented on the difficulty of achieving a fully representative mix. For example, the Users’ Network in Wiltshire struggled to find disabled service users from minority ethnic groups to join the Group carrying out the review of direct payments. Consultation events that are based on invitations – such as Nottinghamshire Healthcare NHS Trust’s Open Space event – have looked at ways of broadening their invitation list by getting other agencies involved in nominating people to take part. Torfaen’s widespread publicity for their Big T2 achieved a large number of participants, but they then had to deal with the problem of overcrowding.

30 Many of our case studies have achieved wider involvement of the communities concerned by showing specific attention to the needs of those people that they want to engage. For example, Torfaen organised subsidised bus travel for young people attending the Big T2, and were pleased with the number of young people attending, while the disabled service users from Wiltshire who took part in the best value review commented on the strength of the project’s arrangements to consider the access and support needs of the individual group members.

31 When a long-term consultative group is established, there is a danger that its membership remains static and can be unrepresentative. However, Norfolk’s Learning Difficulty Partnership Board has shown how the initial establishment of a consultative approach can lead to a growing network of groups and structures that help to widen the opportunity for service users to have a voice. Membership of long-term groups also needs regular review, to help new people to get involved.

32 Often the voices that particularly need to be heard are the very ones that are most likely to be unrepresented. For example, depending on the objectives of the consultation in question, particular efforts may be necessary in order to hear from specific age groups, rural populations, disabled people, ethnic groups, gay and lesbian people and disadvantaged or homeless people. Our case study from Suffolk’s ACCENT project shows an interesting angle on the use of new technology – that it can allow the quieter voices in a group to be heard, and can provide confidentiality to people who might otherwise be wary of expressing their views in front of others.

Handing over control

The young people involved in Younglivin are in no doubt about why the Project has been so successful - it’s because the lead, control and implementation of the Project rested with them from the very start. Not only have they found media for communication that young people are more comfortable with, they have also found ways to put the control in making contact with social services into the hands of the young person concerned. (Case study Younglivin Kingston page 22)
A key feature for the success of several of our case studies was their willingness to hand over control to the service users or communities involved. For example, Kingston’s Younglivin Project shows how an early approach to young people, asking for their views on a poster about contacting social services, led to a change of direction for the entire project which has now grown into an ongoing and successful web-based scheme. Consultation and involvement should be led by service users – simply asking them for their views on questions determined by the service provider is not enough. Even where the consultation is initially structured by the service provider, Suffolk’s ACCENT scheme has shown that allowing flexibility around the questions asked can allow participants to direct the discussion in order to include the things that are of most importance to them. Wherever possible, organisations should be prepared to hand over or share control with service users, who can then identify their own priorities and lead the way forward. In the case of Newcastle’s Old Spice Drama Group, this has provided opportunities for two-way communication. Using an entertaining format that focuses on the concerns and interests of older people has both allowed local agencies to promote information and advice about health and safety, and has given opportunities for older people to contribute their views to discussions, surveys and events.

Learning from experience

The results showed that members of the public are willing and able to participate in well-structured discussion using internet facilities, even where the topic is complex. The consultation results have led to significant changes in the e-government strategy, with more emphasis being placed on social inclusion. (Case study e-consultation Royal Borough of Kensington and Chelsea page 27).

Equally it’s vital that involvement processes are able to grow and develop according to changing needs, and not remain static. All of our case study sites have carried out some sort of review of the methods that they have used, and have developed their approaches accordingly. For example, Southwark Housing developed their approach to consultation from the experiences of their Best Value Review of Access to Housing Services, and used this to improve the range and representativeness of views gathered for their later Review of Community Housing Services.

Lessons learnt from previous practice are repeatedly incorporated into new approaches and shared with other departments and organisations. This needs a thorough and regular process of evaluation, looking at whether the involvement process is meeting its objectives and what service developments are being achieved as a result. Kensington and Chelsea’s e-consultation has involved a detailed analysis of views and outcomes, leading to concrete recommendations for future e-consultation.
Real results

Most respondents – about three-quarters – emphasised that consultation needed to take place earlier in the process, while a similar proportion wanted to see consultation outcomes having a more genuine influence on decisions.

Survey of voluntary organisations (Appendix 2)

A major priority for people who are participating in consultations is that they can see the results of their contributions **having an influence on decisions, policy and service development**. The members of Norfolk’s Learning Disability Partnership Board have commented that they have valued seeing concrete decisions and actions arising from their input. Ideally, a consultation strategy should aim to relate individual consultations directly to forthcoming decisions or policy developments. The more tangible the outcomes and service developments are, the better, although it is also important to influence broader strategic decisions and priority setting.

Consultation needs to take place in time for the results to have a genuine influence – last-minute consultations may only be adding information after the real decisions have been made. This also allows time for the process to be more thorough and accurate – one of the learning points from Southwark Housing’s review was that consultation needed to take place early enough for the development of an Action Plan, which could then be returned to consultees for further comments and challenges.

However it is worth noting that several of our case study contributors also commented on the knock-on benefits of consultation. Some of these may be less tangible – and should not necessarily be the main focus of involvement – but they can have helpful ongoing effects. Action for Health Senior Citizens in Newcastle explained how their events brought together a range of agencies and service users, whose informal exchange of views helped to improve communication and awareness on both sides. The good will and enthusiasm that is generated by events such as the Big T2 is also seen as a major benefit. Consultation participants from several of our case study sites felt that they had personally gained from their involvement, in terms of their individual skills and understanding.

If participants are to recognise the effectiveness of their involvement, agencies need to plan for the communication of results and outcomes. Immediate feedback can be very powerful, and the new technology used in Kensington and Chelsea’s e-consultation, and in Suffolk’s ACCENT scheme, has the advantage of allowing some instant analysis and relay of results. However, it is also vital that longer-term outcomes and developments are communicated, and this appears to be a frequent stumbling block (see Appendix 2, *What do voluntary organisations think of consultation*).

Nottinghamshire Healthcare NHS Trust found that, despite providing initial feedback, their consultees have demanded more; people want updates on progress and evidence of real change in the long term. The wide scope of some consultations, with a number of services, departments and agencies involved, makes this a demanding process that needs advance planning and commitment.
Conclusion

40 Service providers who are not connecting with the people who use their services or with local communities often express the view that people don’t really want to be consulted or involved. For some organisations, this has grown into an established myth.

41 The many examples of successful consultation provided both here and elsewhere suggest the opposite. People often show real enthusiasm and engagement with their local service providers when they are offered opportunities to get involved and to have an influence on local policy and services. But sometimes a lack of real commitment from service providers leads to cynicism and lack of genuine engagement from the people that they are seeking to consult. Unsuccessful consultations are then used as evidence that service users do not really want to be involved, and so enthusiasm, commitment and involvement end up on a downward spiral.

42 In this report we set out evidence that shows that success can be achieved, in a range of settings and circumstances. While we’ve looked for a wide choice of approaches and techniques, there is still an enormous range of good practice options available that we have not touched on here, and new ones are developing all the time.

43 This is not to say that every initiative described here has got everything right. One of their shared characteristics is their willingness to get going, dealing along the way with uncertainty about the outcomes and the successfulness of their techniques. They have all learnt from experience about what works best and what can be improved. Once they have established connections with the people that they are consulting, then new ideas and approaches continue to develop on both sides and enthusiasm and interest grow and spread.

44 Looking at our case studies, it’s clear that much depends on the level of commitment that organisations and partnerships show towards community involvement. They need cross-organisational structures to support their work in this area, and to help with funding, planning and training. They also need to include both short-term, one-off consultations and longer-term techniques for involving service users and communities in service and policy development.

45 Within each consultation process, efforts should be made to ensure that those taking part are representative and inclusive in relation to the service users or community concerned. Some of the most effective projects have handed over the lead and control to the participants, letting them develop the approach according to their own priorities. Finally, organisations need to evaluate projects and learn from the outcomes of consultation, and ensure that the results have a real influence on decisions, policy and service development. These outcomes also should be communicated back to the service users and communities involved.
We are grateful to all our contributors for their willingness to share their experiences and knowledge. The information in the case studies is backed up by details of contacts who are all willing to provide further information on request. We hope that this will initiate exchanges between organisations from across the full range of local public sector bodies, encouraging the widest possible sharing of ideas.
Appendix 1

Legislation and government guidelines on consultation

The Government has made improving the level of involvement of local people a major part of its agenda to modernise public services. The legislation and guidance described here has set the background for an increased emphasis on public consultation and service user involvement in developing services.

Local government

In 1998 the White Paper, Modern local government – in touch with the people (Ref. 3), sought to bring local government in touch with local communities by modernisation, improving local democracy, increasing financial accountability and improving local services. Then the Local Government Act 1999 introduced best value performance reviews, including consultation with local taxpayers, as one of the key measures of quality and effectiveness.

Now the White Paper Strong Local Leadership – Quality Public Services (Ref. 4) has introduced plans for Comprehensive Performance Assessment (CPA) as the new approach to assessing local government services. Reporting the outcomes of CPA will give more information to local people about how their council is doing, and consultation will be a key element in measuring how satisfied people are with services and in judging how the council is meeting service users’ needs.

National health service

The NHS Plan included plans to place patients at the centre of healthcare provision. The Health and Social Care Act 2001 (Ref. 5) and the NHS Reform and Healthcare Professions Act 2002 (Ref. 6) have enabled the development of new structures for consultation with local communities and for greater involvement of patients in decision-making. Details of these structures have been confirmed in Involving Patients and the Public in Healthcare: Response to the Listening Exercise (Ref. 7). These include:

- local Patients’ Forums will be made up of local volunteers that will monitor and review local health services, influencing and informing management decision-making within Trusts and primary care trusts (PCTs);
- Patient Advice and Liaison Services (PALS) to provide on-the-spot help for patients within trusts;
- the Commission for Patient and Public Involvement in Health (CPPIH) at a national level to set standards and provide training, support and staff for Patients’ Forums. It will also advise the Secretary of State and others on the effectiveness and coverage of patient and public involvement;
- the Independent Complaints Advocacy Service (ICAS), which will be provided and/or commissioned by PCT Patients Forums and will support people who wish to make a complaint;
● from January 2003 there will be a new duty on the NHS to make arrangements to involve and consult the local public on changes to the way services are delivered (section 11 of the Health and Social Care Act 2001); and

● from January 2003 local authority overview and scrutiny committees – local authority committees made up of councillors – will have the power to scrutinise health services and call the NHS into account.

The Department of Health is now setting up the CPPIH, which will in turn set up Patients’ Forums, and is developing regulations and guidance which will set out the details of how these new structures will work.
Appendix 2

Views on consultation

What do service providers think about consultation?

We have asked a group of service providers for their views on the current standard of consultation and how it could be improved. They were drawn from a sample of senior staff (chief executive or director level or equivalent) from local government and health. We asked in-depth questions of 25 of those who, in an earlier consultation, had given their organisation one of the best or one of the lowest ratings for performance on user focus.

Those who considered their performance good in this respect were likely to be those who:

- used a wide range of consultation methods;
- provided general information about their services for their communities; and
- considered consultation to be a permanent and valued part of their organisation and its culture.

They thought that their success resulted from strong commitment, adequate resourcing, appropriate delegation of decision-making powers and providing good information back to the community.

They also emphasised the need to show genuine commitment to user involvement, and to keep working at it continuously:

*You’ve got to want to get the results rather than wanting to get a tick on the boards for having done it.*

*It’s got to become part of your culture really hasn’t it, to make it work. I think the council employs about 6,000 people and there is not much point in having two or three committed community development workers if the [rest] aren’t signed up to it.*

When asked what they would like to see in good practice guidance, they emphasised examples of good practice, rather than an exact model or prescriptive template. They also wanted contacts – people that they could talk to who had already been through the process, and who could help them to avoid any major pitfalls.
Of those who considered their performance to be less good, it was clear that they were not doing as much consultation as the higher-rating respondents – in some cases they had no formal consultation procedures at all, or only one type of approach. They showed uncertainty about how to proceed and had doubts about the public’s interest in taking part in consultation. The reasons that they gave for not succeeding in improving their consultation performance were:

- lack of time;
- lack of resources;
- lack of staff expertise;
- lack of perceived priority and commitment; and
- a feeling that it is not really necessary.

*Ordinary folk don’t want to get involved. That is a fact of life.*

In order to improve their standards, they felt that they needed more examples of good practice and success, and knowledge about where to find information. They also cited the need for more resources, and were concerned about ways of avoiding consultation fatigue.

The main difference between the two groups was their level of experience of consultation techniques. The best performers were using far wider ranges of techniques and were committed to ongoing consultation, apparently creating a cycle of increased confidence in outcomes, leading in turn to ongoing commitment to consultation processes. The other group had less experience of consultation and less confidence in its benefits. There were distinct similarities in what both groups wanted from good practice guidance, with the emphasis on examples of good practice and information about the pitfalls to avoid.

**What do voluntary organisations think about consultation?**

Earlier this year, we invited voluntary organisations to take part in a survey on public sector consultation. A small group of 34 completed our questionnaire. Their experiences highlight the issues affecting consultees approached by local public service providers. As voluntary organisations, they also have ongoing experience of being consulted that allows them to make comparisons and draw conclusions about the overall standard of consultation. However, the number taking part in the survey is too few for us to use them for qualitative analysis of the views of the voluntary sector. Also, the results should not be taken as representative of the views of consultees as a whole, including service users and the general public.

All of the 34 organisations had taken part in a number of local consultations in the previous year, including local government, health and criminal justice related consultations. Most had been invited to take part in about 14 consultations and most had replied to nearly all of the requests that they had received.
Overall, they were not very impressed with the quality of the consultations that they had taken part in. Only two organisations considered the overall quality from any of the service providers they were involved with to be ‘very good’, while ten organisations gave ‘very poor’ ratings to at least one service provider. The majority gave ‘fairly good’ or ‘fairly poor’ ratings, with the overall quality of local government consultations considered slightly better than those in health trusts. Health trusts were also considered to be doing less well in terms of the frequency of consultations, with only seven voluntary organisations saying that local health had ‘got it about right’ in contrast with 13 for local government and 13 for police/criminal justice. The main problem with the frequency of consultation from health authorities and trusts, and from criminal justice agencies, was that they were not consulting often enough, while with local government it was slightly more likely that they were consulting too much rather than too little, though the numbers are rather too small to draw firm conclusions about this.

We asked about the methods of consultation they considered to be most effective. As a whole, qualitative approaches seemed to be preferred, with focus groups, meetings and short-term working groups rated higher than quantitative surveys. However, with small numbers responding, these results need to be treated with caution, as they would also be influenced by the varying amount of experience each organisation had of each method.

When asked about the most important factors for improving the quality of the consultation process, most respondents – about three-quarters – emphasised that consultation needed to take place earlier in the process, while a similar proportion wanted to see consultation outcomes having a more genuine influence on decisions. About one-half were concerned that consultees should be given more information about outcomes. However, there was less concern about the practical aspects of consultation, like payment of fees and expenses to participants and getting a representative sample.

This was also reflected in the general comments of the organisations, which largely focused on planning and the strategic approach to consultation. A number of respondents were concerned about being used as ‘consultancy fodder’, feeling that they were only invited to take part in short-term, large-scale consultations that were irrelevant or meaningless:

*Consultation as an event is far less satisfactory and meaningful for service users and carers than ongoing meaningful involvement.*

On the other hand, some were concerned that developing ongoing consultation processes was risky too:

*We have to be careful not to create professional consultees.*
Overall there was a feeling that much current consultation is carried out too quickly, with inadequate time but also inadequate overall strategic planning:

None of the bodies we wish to help with their consultations have an overall vision, strategy or arranged plan for consultation. It is something they increasingly wish to do and think they do better and better but they haven’t taken proper stock. There is a need for public bodies to each have a trained leader of consultation – someone capable of the oversight of a meaningful and satisfying programme.

The general picture provided by these 34 voluntary organisations was that they are being asked to participate regularly in consultation processes. While they are often content with the methods used in individual consultations, they are not impressed with the overall planning or strategic approach to consultation and they are frustrated by lack of feedback or evidence to show that their views have had a genuine influence.
Appendix 3

References

Further Reading


Audit Commission, Directions in Diversity – Current Opinions and Good Practice, Audit Commission, 2002.


Department of Health, *Involving patients and the public in healthcare*:
www.doh.gov.uk/involvingpatients

www.modern.nhs.uk/improvementguides/reading/involving_patients.pdf


Improvement and Development Agency website: www.idea.gov.uk

**Advisory Group**

The Commission is very grateful to the members of the advisory group for their advice during preparation of this guide. They were:

Robin Clarke, *Institute for Public Policy and Research*.

Clara Mackay, *Patients Forum*.

Kai Rudat, *Office for Public Management*.

Professor Brian Edwards, *Nottinghamshire Healthcare NHS Trust*. 
**Listen Up! Effective Community Consultation**

Listen Up! examines the problems of consultation and looks at how some innovative authorities are responding to the challenge. This report recommends how authorities can strengthen their consultation programmes, develop new skills, and improve joint consultation arrangements with their partners. It also suggests how authorities should use modern communication technologies alongside the best of traditional consultation techniques.


**Directions in Diversity – Current Opinion and Good Practice**

This report looks at current opinion and ideas around the implementation of diversity in public services organisations. It describes the drivers for change, and some of the ways in which providers can increase and sustain the diversity of the workforce and improve access to, and treatment within, public services.


**Performance Breakthroughs – Improving performance in Public Sector Organisations**

This new report looks at practical ways in which organisations can effectively manage and improve their performance. It has been written to help managers learn what works in performance management, why it works and how to best implement it, and to address some of the most difficult problems that organisations typically encounter.

Accompanying this report is a wall-chart designed to help organisations assess and improve the way they manage their performance.


**Recruitment and retention: A public service workforce for the 21st century**

This new report explores the recruitment and retention problems amongst public service providers. It highlights the key reasons potential, current and ex-public sector workers join or leave a public sector job. It also shares good practice and learning by highlighting successful local recruitment and retention initiatives from around the country.

Accompanying this report is a pocket guide book presenting headline results from our research and identifying successful local recruitment and retention initiatives.


Connecting with users and citizens is available in a number of formats, from a concise simple briefing to a searchable document on our website.

This Management Paper is aimed at those with a high to very high interest in the subject and includes full details of the study including the background, discussions and case studies. Further printed copies are available priced at £25.

In addition you can order:

**Briefing:** the key findings covering four pages – a 15-minute read for those with limited time and a medium to high interest in the subject area. Stock code: GXB2908. Free.

To order a printed copy of all the above please contact Audit Commission Publications, PO Box 99, Wetherby, LS23 7JA, 0800 502030.

All of these formats are available on our website at www.audit-commission.gov.uk. Our website also contains a searchable version of this report.