



North Wales Service User & Carer Involvement Strategy

“A framework to build on”

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Contents.

Introduction/background.

The Welsh Assembly Government (W.A.G.) is committed to encouraging service user and carer involvement in the planning, design and delivery of substance misuse services and maintains a close interest in developments in service user and carer involvement.

Section 11 of the Health and Social Care Act 2001 conferred a new statutory duty on the NHS in Wales to make arrangements with the aim of involving patients and the public in the planning and decision making processes of that body.

Section 11 applies to all NHS organisations, including national agencies, strategic health authorities and local trusts. It also applies to non-NHS service providers who provide services to patients through contracts and service level agreements or a commissioning partnership where the NHS is one of the partners.

In line with national strategic vision set out in the recent All Wales Substance Misuse Strategic Plan 2008-2011, it was recognised that all those involved in the planning, design, delivery and monitoring of substance misuse services across Wales need to work in true partnership with service users and carers to achieve effective, appropriate and needs led services.

Until quite recently people who misused drugs, or were at risk of drug misuse were rarely involved in helping to develop the health and welfare services that they needed. Many substance misusers did not recognise that they had anything to offer to the development of substance misuse policy and practice at every level. Indeed people who misuse drugs are often seen as having very little to offer governments, services and the community. In reality nothing could be further from the truth.

Funding has been secured from the Welsh Assembly Government and Substance Misuse Action Teams for further work to be undertaken by Word on the Street (WOTS) in North Wales (09/10), including the preparation of a Service User/Carer Involvement Strategy with monitoring undertaken by a sub-group of the North Wales Substance Misuse Commissioning Group, the joint strategic planning group across North Wales.

This document will guide service users, carers, providers and commissioners (within the statutory, voluntary and independent sectors and within the Criminal Justice System where appropriate) in determining how best to develop user/carers involvement. It draws on good practice in the drugs, mental health and wider health care fields from across the U.K. It should equally be useful to people interested in developing service user/carers involvement within those fields.

Throughout this document the term “service user “ not only refers to current drug/alcohol users and ex-drug/alcohol users who have experienced significant problems attributed to their use of substances, it also includes all those affected by substance misuse such as the family, carers and friends of users. For convenience and simplicity, the collective term “Service User” (S.U.) will be used throughout the document.

National and Local Policy Context

For many years the benefits of service user participation in substance misuse services in Wales have been widely recognised. Developments, however, have been ad-hoc depending on local circumstances. Good practice is evident, although much more work is needed to build on what has been achieved. There are many factors that highlight the need for seamless provision of substance misuse services. Enabling service users and carers to have a powerful voice will lead to more effective service planning, management and improved services.

Empowerment of service users and is a key principle of the North Wales Substance Misuse Forum and the Welsh Assembly Government. The aim is: ***‘to encourage the full and genuine participation of service users and carers in all aspects of substance misuse services, including planning and commissioning.’***

However, there is a significant variation in the way the different counties are developing service user involvement. The absence of a North Wales Service User Involvement policy makes it likely that opportunities for meaningful service user engagement will be missed and it is also more likely that there will be little co-ordination between the six counties.

Rationale

The active participation of people who have used substance misuse services can bring knowledge and experience to contribute to the design, planning, delivery and evaluation of services at a local, regional and national level.

This document provides a framework for user involvement. However, all service providers to drug/alcohol users and their carers have a responsibility to involve service users in the planning and evaluation of their services. The strategy and action plan sets out priorities and actions in relation to service user involvement in North Wales for the next three years.

This document is about service users being involved in the on-going systems and procedures of services. This is different from being involved in individual care planning and reviews of care plans.

Key Strategic Aims

The primary aims of this strategy are to;

1. Increase effective service user involvement in services accessed by drug and alcohol users in North Wales.
2. To ensure that service user involvement is meaningful and not tokenistic.

3. Maintain effective user involvement in strategic planning, delivery and review of services.
4. To ensure that service users are given the correct amount of support and guidance.
5. Improve health and social care for service users.
6. Promote harm reduction to service users and service providers.

Strategic Objectives

The primary objectives of this strategy are to:

1. Provide a strategic framework for user involvement in North Wales.
2. Promote user involvement and users' rights to individual users and their carers
3. Encourage drug service providers, and related services accessed by drug users, to adopt user involvement mechanisms
4. Ensure access to independent advocacy services for users and their carers
5. Support peer-led intervention and initiatives aimed at users.

What is service user involvement?

Service User involvement is about involving substance misuse service users in the drug and alcohol treatment system. Involvement can work on many levels ranging from suggestion boxes and feedback questionnaires to services that are run by service users.

Above all genuine involvement requires;

- Service User independence and ownership of the methods of involvement.
- Support to facilitate service user involvement.
- The potential for decisions to be genuinely affected by the involvement.

People have different interests and skills and should be able to tailor their requirements to these. There should be scope for example to become a service user representative, sit on strategic groups, read summaries and respond to documents, design leaflets, manage projects, create consultation tools, carry out surveys, analyse feedback, train staff, carry out peer education and chair meetings - among many other things.

On an individual level service users should be consulted about their care plan and treatment options.

Service user groups are another area of involvement and on a strategic level there can be service user representatives who represent the interests of service user groups and individuals in the planning, development and monitoring of commissioned treatment services.

Why is service user involvement important?

Service User involvement provides an opportunity for current, ex and potential users of substance misuse services to be involved and consulted in their own treatment and in how treatment services are run in their area.

Service users can offer a valuable insight and understanding of substance misuse services based upon their own experiences. This experience and understanding is unlikely to be shared by health and social care professionals and so provides a different perspective on the suitability and effectiveness of services.

Working alongside Commissionaires and Service Providers, service user expertise will improve the future delivery and operation of services.

Service User involvement is widely regarded as good practice:

- Service User involvement is a legal requirement
- It provides better information on which to base commissioning decisions and results in better quality services and better outcomes for service users
- It increases service users skills and confidence and can help recovery
- It is cost effective
- It helps develop a skilled potential substance misuse workforce
- It is an ethical right

Involving service users in the planning, delivery and development of drug and alcohol services can benefit other service users, service providers and staff. Service providers and staff can learn from service user's individual experiences of drug and alcohol services. This will ensure that service development is relevant to service user needs. Service users can assist and support service providers in identifying what is working well, where the gaps are and what changes are necessary.

Service user involvement ensures service users feel empowered to bring about change and improvements in the service areas that concern them the most. It will ensure that they feel valued by service providers and therefore improve their own self esteem. It will ensure that they feel more in control of their individual situation.

Service user involvement demonstrates respect between staff and the service users involved. It encourages partnership working and is a move towards developing and achieving more service user-led services.

Benefits to Service Users

- Involvement provides individuals with a forum in which to raise issues and concerns in a appropriate manner and encourages active participation in treatment decisions.
- It contributes to the development of open and transparent working relationships where individuals are valued and listened to.
- At an individual level, meaningful involvement allows active participation in treatment decisions and prevents individuals from becoming passive recipients of services.

- It provides individuals with opportunities to share their knowledge and expertise of what works and what does not work.
- It creates opportunities for service users to influence service delivery and service planning at both local and national levels.
- Where effective, service user involvement can increase and maintain self-esteem and self-confidence and support their progression through recovery and rehabilitation.

Benefits to Service Providers

- They can learn more about the experiences of users and carers and encourage the development of closer working relationships between service users and staff.
- They can use these experiences to change current provision or develop additional services to meet the needs identified by its service users.
- They can encourage service users to express their views and use their energy and experience to make long-term improvements to service.
- They are able to use the information from service users to evidence outcome measures and report to stakeholders.
- It enables the development of transparent and open services and decision making processes.
- Effective service user involvement creates a working environment where both staff and service users feel comfortable about expressing personal opinion- both positive and negative.

Benefits to Service Commissioners

- They will be able to ensure that service provision meets the needs of the local population.
- Information from user involvement aids the identification of gaps in service delivery.
- It informs and contributes to service reviews.
- It improves commissioners' abilities to influence the national debate by having better local information.

Methods of involving Service Users

There is no absolute blue print for involving service users and the precise methods used will depend on the type of service and the needs of the service users. Equally, none of these methods are mutually exclusive and more than one could be used effectively at any one time.

Clearly the effectiveness of service user involvement is not simply about choosing appropriate methods. A critical element is about **HOW** they are implemented. Consideration should always be given to any proposed method's relevance, usefulness and potential for providing a satisfactory outcome.

For each method of involvement the following assumptions are being made. Each of these steps will be vital for effective implementation of any chosen method.

1. From the outset, written or verbal information should be developed with the involvement of service users.
2. Any written document and verbal instructions should be piloted with a representative group of those individuals being asked to participate to ensure understanding, ease of use and appropriateness.
3. Sensitivity regarding the timing of methods should be a consideration. For example, asking services users to complete surveys immediately after they have been asked to leave a service may affect results.
4. Communication with those involved and those affected should be maintained on an ongoing basis. Written information should be displayed in a prominent place to ensure that service users are aware of what is going on.
5. Results, from the method used; need to be communicated in a readily understood and clear manner. If any changes to the service are proposed, it should be made clear that this is as a result of “service user involvement” and not attributed to other reasons.

Involvement in what?

Service user involvement covers a range of activities, from consulting with providers, through to working in partnership with them to develop projects or services, right up to service users leading projects, service or organisations. Other means of involvement could be;

- Peer mentoring/advocacy/support
- Running self help groups or service user groups
- Being involved in the production of newsletters
- Being involved in the development of websites
- Being involved in the planning of new services
- Peer-led training for other service users, carers and service providers
- Speaking on behalf of services, service users or groups
- Being involved in the production and participation of presentations/speeches
- Being involved in governance (E.g. As a trustee, sitting on committees/groups locally and/or nationally)
- Volunteering in services to help develop and establish working relationships between service users and members of staff
- Buddying schemes between service users, and also between staff and service users
- Evaluating and monitoring services (E.g. research, audits and questionnaires)
- Recruitment and selection of staff (substance misuse services).

Involvement of who?

Given that the definition of Service User extends to all those affected by substance misuse, consideration should be given by all service providers as to how they wish to involve family members, carers and friends.

All service providers should adopt the practice of asking all clients during the initial assessment process who they want to be involved and whether any information should be shared with family members/carers/friends.

This decision should be recorded and updated during the time the client remains with the service.

Different methods of involvement will suit different groups of service users depending of the service they access, their level of engagement and many other factors.

Service Users may also have different motivations and aims. Research (Greater London Alcohol and Drug Alliance) identified two distinct types of service users who were involved;

- **Advocates:** who primarily aimed to improve treatment services
- **Activists:** who were committed to affecting broader systematic change by building on the user-led “involvement movement”

They found that people tended to be comfortable in only one of these roles and said that expecting people to straddle both led to frustration, recommending that people and task were matched at the outset of a project according to their skills (GLADA 2005)

Involvement of all

Members of minority groups can have different needs and are often underrepresented in treatment services. For service user involvement to be truly valuable, women, members of BME communities, lesbian, gay and bisexual people, people with disabilities or mental health problems, people in the criminal justice system, homeless people and those who do not access treatment, should have the opportunity to have their views heard.

Ways of doing this can include:

- Closed (for example women-only) groups or consultation sessions
- Consultation events and conferences (with the offer of support, accompaniment and travel expenses; chaired and run by service users)
- Service users from BME groups consulting within their communities
- Visiting, for example, hostels, soup kitchens or parks, to consult with the non-engaged
- The distribution of flyers through non-specialist agencies (e.g. homelessness or benefits agencies).

Additional ways of involvement (particularly those not actively involved in established user groups)

It is recognised that many people using substance misuse services or caring for someone who does, do not want to be involved in structured activity on an ongoing basis or be actively involved in any of the established service user groups and may have limited awareness regarding involvement

activities. There is a need to provide as many opportunities as possible for people to be involved in a variety of ways.

- All service delivery locations should have a well advertised “Suggestions and Concerns Box”, with information available on the current opportunities for involvement.
- Service user newsletter available at service delivery points
- Various opportunities for people to be involved in specific activities (e.g. interviewing, quality assurance processes etc) should be widely advertised (e.g. user groups, service delivery points, newsletters).
- annual North Wales service user conference
- Quarterly open meeting to inform and consult with service users.
- Service users to be given an opportunity to complete exit questionnaires and/or testimonials when they are discharged from the services.

The possibility of experience tracking (recording monthly service user experience logs) to be explored with service user groups and if considered appropriate to include this in the action plan.

Consideration needs to be given to developing a reliable mechanism for collecting & disseminating information. This will better inform the planning, design, delivery and monitoring of substance misuse services across North Wales.

Formal complaints procedures also provide opportunities for individuals not linked into the formal structures to highlight areas of concern.

Information

Access to up to date information is central to the meaningful involvement of service users in both discussing their own care, and in making a contribution to the overall substance misuse services.;

- Any information provided should be jargon free, relevant, and accommodate the language preferences of the area.
- Service users should be involved in the production of the material.
- Service users should have timely access to comprehensive, clear, appropriate and helpful information, in a range of appropriate formats and languages.

Induction

Service Users who are interested in becoming involved should have the opportunity to see a role description, discuss the role and identify their areas of interest and skills in relation to it. Although it is important that service users make a commitment it is also important that **they** have control over the extent of their involvement.

Service users should receive an induction covering for example:

- The aims and processes of service user involvement
- Their own role
- The commissioning process, local structures, and funding streams and mechanisms
- National and local strategies and plans
- Analysis of personal and professional support and training needs
- Payment and expenses arrangements
- Information on available training
- Support and supervision
- Details of practical support facilities (e.g. phones, photocopiers, meeting rooms and administrative help)
- Jargon buster

Service users joining committees should also receive, for example:

- Information on the committee's aims and objective, terms of reference, and membership
- Induction meeting with Chair.
- Details of minutes, reports, policies, procedures and other documents.
- Contact list of team members and key personnel.
- Schedules of meetings.
- Information, location, timing and venues for meetings will be accessible.
- Remuneration for involvement will be agreed, set and reviewed regularly.

All service users who are already involved or who are about to become involved will, as a minimum, be provided with the Service User Involvement Handbook and the Protocol for Involvement (still to be developed)

A formal mechanism for inducting service users into an 'involvement role' needs to be established.

Training

'It is unrealistic to expect individuals or small groups suddenly to develop the capability to make complex decisions and become involved in major projects. They need training – or better still the opportunity to learn formally and informally, to develop confidence, and trust in each other'.

(Wilcox, 1994)

An important element of enabling service users to be involved with confidence and appropriate skills is the provision of training. There is a need to develop more widespread provision of training for service users.

Service users should be offered the training and support which is necessary to enable them to be involved, peoples` skills and abilities should not be assumed. Good quality training should be provided where it is needed, for example on;

- Meetings and communications including chairing and minute taking
- Public speaking and presentation skills
- Using computers
- Diversity

- Basic skills (English and numeracy)
- Research skills
- Monitoring and evaluation
- Facilitating groups
- Delivering training
- Consulting with other service users

Any training currently available to paid staff that would benefit service users undertaking an involvement role needs to be made available to service users.

There is also a need to develop an annual training programme for service users in an ‘involvement role’. This programme will address general issues of involvement as well as providing training in specific activities e.g. using computers, facilitating group meetings.

Support

Service users who are engaged in involvement must have support to assist them. Adequate support and assistance should be provided to service users and service user groups.

This may be achieved by creating appropriate paid posts within county areas where individual and group representation work is happening.

It is essential that service users also have access to regular supervision. Involvement can be challenging, and may bring up issues that need to be discussed and explored. This can help ensure that involvement does not affect health and wellbeing.

Remuneration

The basic principle underpinning meaningful involvement is that no service user who is asked to become involved in the business of substance misuse services should be out of pocket as a result. When involving service users in the planning, monitoring or reviewing of services, all out of pocket costs have to be reimbursed (including costs relating to preparation and follow up work).

Service users should also decide how (and whether) they wish to be paid.

Payment to service users for their work must not jeopardize any welfare benefits for which individuals may be eligible.

An alternative to “cash” payments could be for service users to receive a consultancy rate, for example, a days` training for a days` involvement. This may be rewarded with a package of training and personal development aimed at helping them get into paid employment. There could also be links with “Time-banking” and the North Wales Service User Bursary.

Any implications on benefits should be clarified and communicated. Detailed guidance on paying service users for involvement can be found in ;

“Reward and recognition, the principles and practice of service user payment and reimbursement in health and social care”. (Dept of Health 2006)

There will be a need to develop a system to manage the following:

- Payment of out of pocket expenses, travel and subsistence.
- Remuneration of service users involved in specific pieces of work.
- Support, advice and information in relation to benefits and finance.
- Details of payments, expenses, regulations in relation to benefits etc; should be provided to each service user through induction training.

Service User Representation

Peer Mentoring/Advocacy

Peer mentoring / advocacy is only available to service users in some counties of North Wales, there is no single point of contact. Following a directive from the Welsh Assembly,

“Work will be undertaken to build a network of advocacy and peer mentoring groups in North Wales ,..... with a central advice and support point” (Karen Eveleigh)

Wots and the re-established North Wales Service User Forum will now work in partnership with the intention of establishing a cross county advocacy service that will;

- Empower service users to make informed decisions about their support and treatment and take greater control over their lives.
- represent the views of service users (as if they were their own views) in both formal and informal settings as and when requested by the service user;
- support service users in representing their own views in both formal and informal settings as and when requested by the service user;
- support service users in seeking resolutions to issues which concern them;
- protect service users who are particularly vulnerable for reasons of their illness or lack of capacity to make informed choices;
- Provide information about other sources of help and support in the community.
- to have a sustainable service in terms of securing ongoing revenue funding
- promote substance misuse advocacy as an integral part of service provision and to be resourced as such

Developing a mentoring system can be very effective for the on-going development of services. Some people respond better to information from someone who has lived the experience and has first hand knowledge of the issues that they are facing.

However, it is important that mentoring/advocacy is part of a coherent strategy that has preparatory and follow up work built in.

There is a need to establish;

- single point of contact
- Standard pro-forma and literature.
- Training programme for service users interested in delivering advocacy/mentoring.

It is recognised that service users who are involved in this development work may, in the course of this work ,be exposed to particular pressures and stresses. Sometimes in the course of this work, service users may find themselves needing to promote views with which other parties disagree, or consider issues which raise painful or personal issues.

It is imperative that all service users involved in mentoring/advocacy have, if needed, pathways to access professional support for “work-related” emotional issues.

Service user involvement in planning

“Services users clearly have unique experiences, skills and abilities that enable them to provide ‘expert advice’ in this field. Substance misuse strategies and services are likely to be more effective if they are developed and delivered with the direct involvement of the people who use them we seek to promote the benefits of involving service users in the development of policy, and in the design, planning, delivery and evaluation of substance misuse services, at all levels” (W.A.G. ,Service User Involvement Framework)

Service users should be involved in any arena where services are planned, designed, delivered and monitored.

- There is a need to develop mechanisms that involve service users in the formal structures which are responsible for the planning, development and monitoring of services.

Monitoring and Audit

“The use of inspection and audit processes within the substance misuse field has increased in recent years. Services are increasingly required to demonstrate to external organizations the contribution they make and the outcomes they achieve. In the vast majority of inspection and audit systems the voice of the service user must be heard and evidence of service user involvement demonstrated. For residential services operating within a “therapeutic community setting” service users are involved as active members of the Team that reviews the service as part of a “peer review system” with other similar services”. (Quality Standards)

Involvement of service users in monitoring and audit demonstrates a commitment to make continuous improvements to services. It also allows service users to highlight specific areas where improvements can be made. There is also a need to;

- have a programme of audits that reliably demonstrate how services are performing against standards set at both national and local levels
- Have monitoring and audit procedures that will ensure the handling of positive and negative comments to improve services, such as representation and complaints procedures.
- ensure that service users have appropriate training to evaluate services
- Establish a database of service users willing to be involved in monitoring and audit.

In order for this to happen, service users need to have the following:

- Clearly agreed roles and responsibilities for those service users who undertake involvement activities;
- Provision of resources for training, monitoring and evaluation.

Recruitment and selection of staff

The involvement of service users on substance misuse services recruitment panels is recognized as essential and this aspect of service user involvement needs to be developed. There is no current system in place to train, monitor and develop service users to participate fully in the recruitment process.

There is a need to implement a targeted approach to the involvement of service users in the recruitment and selection of staff.

- A credible and reliable process for monitoring involvement in interviews to be put in place.
- A rolling programme of training for service users to enable further participation in recruitment to be developed.
- A database of service users willing to be involved in recruitment processes will be established.

Initial information will be used as a baseline against which further progress will be monitored annually.

Training of staff

Training on its own cannot do everything and is no substitute for working in a culture that embraces the principles of empowerment. Involving service users can be difficult for staff as they seek to overcome their personal preconceptions and concerns. Training provides an opportunity to explore these issues and dilemmas in a safe environment.

Service users have invaluable experience and expertise to share with professionals. There are some issues, such as the effects and experience of stigma, barriers and living with substance misuse difficulties, where service users are best placed to provide training to workers.

Historically service users have not been involved in staff training even on an ad-hoc basis, and currently there is no policy on specific training in service user involvement for employees.

A targeted approach is required;

- Service user involvement to be a core component of all induction training.
- Service users to be involved in staff training (both induction and on-going).
- Students on placement with substance misuse agencies to be encouraged to make contact with user groups and become familiar with the principles of user involvement.
- Service users to have a place on any multi agency training strategy groups.
- In consultation with all partners, a process for identifying appropriate service user involvement in staff training to be established.
- Service users to be routinely involved as speakers / workshop leaders at conferences etc.
- An open mechanism to exist for deciding how to effectively and efficiently deploy those service users who are trained and equipped to take part in the delivery of training.
- Service users to be supported to access appropriate training and ongoing support to enable them to become meaningfully involved in staff training.
- Service users and to have input into management training programmes

- Funding made available to cover all costs incurred by service users in the delivery of training including consideration of remuneration to service users for their time and expertise.

Service users as employees of substance misuse services

There is a need to improve opportunities for those wishing to work in the health and social care fields. Employment of people who have used or currently use services is central to changing organisational culture and creating a better work place.

In addition to the reduction of stigma and discrimination brought about by this kind of participation, empathy and understanding could also come from staff members who may have themselves experienced substance misuse issues in their private lives.

It is for these reasons that employment of service users is included within this strategy

There should be a commitment to the principle that no person will be unfairly discriminated against in terms of their employment, personal development, training and promotion on the basis of substance misuse difficulties.

- Currently there is no policy on employing people with substance misuse problems other than what would be covered by a general equal opportunities policy.
- The culture of substance misuse service (and other services/employers) needs to change to make it more acceptable for employees to be more open about their experiences and to enable them to link in with support mechanisms.
- There is a need to explore the opportunity for the development of a specific service user employment programme to actively encourage substance misuse service users to apply for positions.

Monitoring systems should be introduced to record percentage of employees with previous substance misuse problems.

Working with service users and from outside the area & increasing local capacity

It is recognised that there is an opportunity to benefit from service user experience outside North Wales; this may be achieved by;

- Actively seeking opportunities to share good practice across North Wales and beyond. This sharing of experiences will promote good practice, raise public awareness, reduce the impact of stigma and help to develop training opportunities.
- Enhancing support and providing opportunities to create links and alliances with service users in substance misuse services across Wales.

CHALLENGES

Barriers

There are a number of obstacles that must be considered when developing effective service user participation. All partners are fully committed to addressing and overcoming all of these, some of which are mentioned below:

- Whilst it is acknowledged that there is evidence of change, a culture still exists where service users are perceived as passive and workers are thought to have all the knowledge, expertise, authority and power.
- Workers can believe they have consulted service users when they have not. For true consultation to take place, service users must have all relevant information, and their views must be listened to, taken into account and responded to. A common complaint from service users is that they are often not given enough time for true consultation.
- Meetings can often be organised in ways that do not take into account the needs of service users involved – all meetings should be ‘user proofed’.
- Using jargon and abbreviations can be confusing.
- Effective involvement should not just mean ‘attendance at meetings’.
- Service providers can inappropriately get into the habit of relying on the same service users for contributions.
- Aspirations for user involvement often do not match practical commitments – there is often insufficient funding to cover meaningful service user involvement.
- Insufficient training for service users to perform the tasks required e.g. interviewing.
- Lack of empathy and understanding of service provider personnel regarding voluntary commitments of service users.
- Insufficient training for staff in effective service user involvement.

ACTION PLAN

STRATEGY REFERENCE	TASK/ACTION	BY WHEN	BY WHO	RESOURCE COST
Communicating the strategy / awareness raising	Key actions to be developed by service provider in consultation with all partners			
Advocacy	advocates in community bases			
	advocates elsewhere??			
Service User involvement in planning structures	Clearly agreed roles and responsibilities for Service Users (involvement activities)			
	Meetings 'user proofed' – accessibility, timing etc			
	Current position will be reviewed & consolidated			
Identifying Service Users	Fair and transparent process for recruiting service users			
	System in place to monitor attendance of service users			
	Develop structure whereby existing groups can network together			

STRATEGY REFERENCE	TASK/ACTION	BY WHEN	BY WHO	RESOURCE COST
Recruitment & Selection	Create database of Service Users willing to be involved in recruitment			
	Set up reliable system for monitoring involvement in interviews			
	Initiate a rolling programme of training for service users to enable further participation in recruitment			
	Involve service users and carers in most appropriate manner in interviews of all potential partnership staff			
Monitoring, Audit & Research	Operate under an integrated performance management framework			
	Operate an integrated representation & complaints procedure			
	Create database of Service Users willing to be involved in monitoring & audit activities			
	Develop User Focused Monitoring			
	Service users to have a place on multi-agency training strategy groups			
	Establish system for identifying appropriate service user involvement in staff training			

STRATEGY REFERENCE	TASK/ACTION	BY WHEN	BY WHO	RESOURCE COST
Involvement in Training	Create system for deploying s-users equipped to take part in the delivery of training			
	Service users to be routinely involved as speakers/leaders at conferences etc			
	Ensure that at least one 'training for trainers' course is made available for s-users who wish to be involved in staff training			
	Service users to have input into management training programmes			
Service users as employees of substance misuse services	System in place to record % of employees with SM problems			
	Develop service user employment programme – to actively encourage SM service users to apply for positions			
Training of staff in service user involvement	Service user involvement a core component of all induction training			
	Staff required to attend an annual 'update' training session on service user involvement following induction			
Additional ways of involving service	All service delivery locations to have a well advertised suggestions & concerns box			

STRATEGY REFERENCE	TASK/ACTION	BY WHEN	BY WHO	RESOURCE COST
users Additional ways of involving Service users (cont.)	Wide advertising of specific activities for people to be involved with (interviewing, QA etc)			
	Service user newsletter to be available at all service delivery points			
	Open meetings to held annually to inform & consult with service users			
	All service users will be given the opportunity to complete exit questionnaires when discharged			
	Feasibility of 'experience tracking' explored – recording service user experiences in monthly log			
	Service user conference to be held every annually for service users in partnership area			
Working with service users from outside the area	Design and develop web-page			
	Create links & alliances with service user projects / workers across Wales			
	Service user involvement handbook to be provided to all s-users involved or potentially involved in partnership			

STRATEGY REFERENCE	TASK/ACTION	BY WHEN	BY WHO	RESOURCE COST
Induction	Mechanism established for inducting service users into involvement activities			
Training	Make available any staff training relevant to service users involved			
	Training programme established for service users in an 'involvement' role to include: recruitment & interviewing skills and monitoring & evaluation			
Information	On accessing services, service users and will be provided with an information pack to include: rights, advocacy services, complaints procedure, how to become involved in planning & monitoring of services			
Support				
	Mechanism for providing advice, de-briefing and emotional support will be established			
How Service users are recompensed	Checklist drawn up of out of pocket expenses			
	Involvement agreement			
	Investigate possibility of making payment to service users for their work			

STRATEGY REFERENCE	TASK/ACTION	BY WHEN	BY WHO	RESOURCE COST
	Review sustainability			
	Implement system for payment			
Monitoring and evaluation of the strategy	Ongoing monitoring of key actions by service provider & partners Annual review and report			