

Welcome to the team...

Consulting and involving service users in the activities of drug and alcohol services is now a statutory expectation under the NHS and Social Act 2001 – but is it possible to do it meaningfully? Jaye Foster, Karen Tyrell, Vanessa Cropper and Neil Hunt look at two services that took the challenge, and uncover a number of benefits that justify the effort.

The NTA requires agencies to become more accountable to service users and carers through a variety of mechanisms such as involvement in planning services, satisfaction surveys and complaints processes. However, there appears to be no guidance concerning service user involvement in the recruitment of the staff that work in drug services. For example, the NTA document, *Staff development toolkit for drug and alcohol residential services*, describes standard practice relating to the recruitment of staff, but does not address service user involvement in the process.

Anecdotally, service users may have been involved in the recruitment of staff within a variety of drug services for some time. However, there is little discussion of the way this is managed, the benefits it produces and the challenges that occur, in a way that

helps define and share good practice.

Looking at staff recruitment within two different-sized organisations gave a useful insight to how user involvement can work. The smaller of the two, the Healthy Options Team (HOT), is part of East London and City Mental Health NHS Trust and employs around 12 staff to provide low threshold, harm reduction services such as needle exchange. The other organisation, KCA, is a non-statutory service employing about 200 staff across Kent, Medway and parts of South London, to provide a range of interventions including needle exchange, day programmes, counselling and community prescribing.

Service user involvement has been a core value within HOT's development and practice since its inception in the early 1990s. Towards the end of the 1990s the service began involving service users within staff recruitment. Initially this happened sporadically, as it

was not always possible to find people who were willing or confident to fulfil this role. Gradually a process for preparing people evolved to include only people who could commit to at least half a day's preparation and training. Training addressed the following aspects of the interview process:

- Confidentiality and equal opportunities.
- Understanding the job description and person specification.
- Developing role play scenarios to assess candidates.
- Generating interview questions in accordance with service users' priorities (as opposed to those of paid staff).
- How to introduce themselves to candidates at interview. Early experience showed that service users could sometimes be quite perplexed about how to present

themselves within what was an altogether different role to the one they are more familiar with – as recipients of services.

- Asking interview questions and probing for information.
- The use of internal scoring forms for rating applicants.

Even with the benefit of the training and preparation, it was evident that service users sometimes felt nervous and inhibited within the interview role. Nevertheless, they asked questions that may not have been considered so readily by professionals and were able to contribute a service user's perspective within the final evaluation of candidates. In particular, they paid close attention to applicants' ability to develop good rapport – a core skill within low threshold services. Having a service user on the panels allowed some direct evaluation of how

Benefits to the participating service users

The acquisition of new skills

Participation gave service users an improved insight into the way job applicants are short-listed, what happens in the interview process and the way that potential employees are assessed and evaluated. This has direct relevance to the needs of those people who will later be applying for education or employment places.

Raising self esteem and self efficacy

The process offered opportunities for service users to draw upon their life experiences and use largely unacknowledged knowledge and skills. In cases where people had consistent involvement, their confidence and role security seemed to grow perceptibly.

Increased service 'ownership'

Participants appeared to feel valued and to appreciate an opportunity to have a genuine influence on a key element of the delivery of services. The process seemed to have symbolic importance to all concerned. Through their discussions with other current and prospective service users, this seems likely to have a wider impact on the way that services are perceived by the people for whom they are provided.

Benefits to the service

Communicating a service user orientation to staff and service users

The introduction of these practices gave a practical and tangible way to involve service users that meaningfully reinforced organisational commitments to user involvement, that are made within more abstract mission and value statements. It helped create an additional environment where the service user voice can contribute in a valid way.

Recruiting the right people

The process enabled services to draw on the rich stock of knowledge and experience within drug users' lives. Involving service users appeared to improve the quality of decision-making and was especially helpful for evaluating crucial competencies around interacting with service users. We noted that applicants with strong academic qualifications were not always the ones who could best relate to service users.

Complementing the service's 'social reintegration' goals

Social reintegration is a broad aim of drug services. Involvement in staff recruitment provided an immediate and authentic setting, in which it was possible to help equip service users with relevant skills. The 'real life' nature of the role sometimes seemed to offer some advantages over simulated, skills-development activities and can complement these.

applicants interacted. Besides direct involvement within the interview process, in three cases applicants were asked to spend time in a drop-in setting with a group of service users who assessed their engagement skills and gave structured feedback to the interview panel. This group activity seemed to have some advantages, as it largely circumvented some of the anxieties felt by service users within the more formal interview setting.

During 2003, drawing on the experience and protocols of HOT, service users from KCA's day programme were asked if they would be interested to participate in staff recruitment. Three agreed and the local service manager then arranged an information-sharing session followed by similar training to that offered by HOT, which led to the gradual introduction of service user involvement within staff recruitment.

Service users were included in the process of shortlisting candidates, where possible. The application forms were anonymised to service users and staff alike, as part of KCA's equal opportunities policy. Service users took part in the formal interview process and were sometimes involved in role-plays that particularly assessed applicants' interactional skills. They were then involved in the decision-making process after the interviews.

Where necessary, on the day of the interviews, service users were assisted with special arrangements for picking up their methadone and the times of interviews were scheduled to facilitate this. Whenever possible, interviews were held at the service centre they attended to facilitate their involvement. For each recruitment episode, participants were paid £15, plus all travel expenses.

Before the interviews, candidates were informed that service users would be on the interview panel. One candidate commented that they found this reassuring because of the message it conveyed and said that, in the

event, they did not know who was a service user.

Before drawing conclusions about the benefits of this process, it is important to note that we are largely describing our impressions and observations of a process in which we have ourselves been involved, with the limitations and potential biases that this implies. In future, it would clearly be desirable for more independent research to investigate the benefits (and any drawbacks) of this practice in order to identify ways in which it might be improved.

The most important thing we learned, is that including the users of drug services within staff recruitment is possible. The fact that drug users are a highly stigmatised and often disenfranchised population need not be an impediment to meaningful involvement in staff recruitment within agencies that have a genuine commitment to making this happen. Besides this fundamental point, we think that a number of overlapping benefits to service users and services can be identified, which are shown below.

Our contrasting experiences, between a relatively small service and a larger organisation, are informative about the way that best practice might need to vary according to setting. Despite prior training and rehearsal, people who were only involved once in the formal interviewing process, did not develop the same degree of confidence and role-security that we observed in the setting where people could be involved in a series of interviews. There are probably no hard and fast rules, but small organisations, or those with low staff turnover, may not generate enough opportunities for people to consolidate preparation and training and properly benefit from the process. In these circumstances, considered and planned use of group discussions with service users during recruitment may be a better way for them to be involved.

Implementing this process was not always easy. Considerable effort was

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required on the part of both services and service users to develop and undertake this work to what were judged to be safe and proper standards. Although it has seemed worthwhile, it is also clear to us that, if done improperly, there are risks to both service users and drug services. For this reason, organisations that cannot commit the time and resources to doing this carefully may do better not to try it at all.

Nevertheless, our experience suggests that involving the users of drug services in staff recruitment is both possible and worthwhile. Despite this, it seems important to recognise that even where there is a clear desire to do so, this may not always be possible. Within KCA, an organisational target has now been set to involve service users in 50 per cent of appointments. Given the statutory requirement to involve service users within drug services and the corresponding vagueness about how best this should be achieved, it may be that area could

be considered as a possible performance indicator for services that should be adopted more widely.

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What we learned from user involvement in recruitment

- Involving the users of drug services in staff recruitment is feasible and appears to offer a number of potential benefits for service users and treatment agencies.
- A considerable investment of time and effort is required initially. However, direct costs are low.
- Practical factors, such as an urgent need to recruit staff rapidly and keep services operating, may make it difficult to involve service users on all occasions.
- Methods for involving service users need to be tailored to local circumstances and the size of the organisation.
- Involving service users in staff recruitment can complement the wider development of user involvement activities.
- The involvement of service users may be a practical and meaningful performance indicators for user involvement in drug services.