

# PSUIG Service User involvement award 2013



SLAM TRUSTWIDE  
INVOLVEMENT GROUP:  
OPERATIONS

TWIG Ops (The Trustwide Involvement Group: Operations) was delighted to be invited for a third year to consider applications for PSUIG's annual psychology service user involvement award.

Firstly, thank you to the people - project leads or nominators, who took the time to submit applications to the panel; who in doing so, chose to engage with a Trust-wide service-user review of their work.

Despite significant advances in user involvement in SLaM in recent years, this year again we found real variance in the quality of applications, and we found that applications often conflated "consultation" with "involvement", in part or in whole. Overall, we felt that the quality of the applications had dropped significantly from the last two years.

We received 5 applications; all from the Psychosis CAG, which was disappointing.

Many of the projects were in their early stages, so there was little evaluation in many at the time of application. However there also was a lack of a plan of how they would evaluate. We would urge all applicants to carry out good evaluation of their project in due course.

Where evaluation had been carried out, it would have been helpful to have seen some of the findings in the applications.

We marked against 4 prescribed criteria:

- the extent to which the project contributed to service improvement
- the degree to which service users were involved in all aspects of the project
- the method and robustness of methodology by which the project was evaluated, and
- the degree of innovation of the project and the degree to which service users were involved in a creative way.

We marked each application out of 10 against each of these 4 criteria. We awarded overall marks of between 1 (an all-time low) and 33.

Confidential detailed feedback from the panel to each application is available via Matt Richardson or Emma Harding. A copy of this report is available on the TWIG Ops blog: <http://slamtwigops.wordpress.com/>.

FYI the panel demographics were as follows:

People = 6, comprising Service user / ex-service user = 6, Gender = 3 F / M 3, BME = 2 Carer = 3, SLAM staff = 2. Although TWIG Ops has now been disbanded, all the non-staff panel members were members of TWIG Ops until its dissolution last month.

We highly commend one application: the project to evaluate the Northover Recovery Group.

What struck us about this application was:

- The Group is a key part of the local service
- The language used is recovery-focussed
- Service users seemed to have an equal voice and status as the staff
- Service users were involved from the design of the evaluation questions to collecting the data, to evaluating the findings and making recommendations

We also commend the quality of the written application to the panel, which was concise, clear, and not over-stated.

We were unclear about some aspects of the project: there was no information about the form that the evaluation took: for example was there a written report? Were service users involved in this stage? Were the findings shared with people using and providing the service, service managers etc? How will the progress on implementing the recommendations be managed and audited?

The panel was split about how this project could be improved further: some of the panel recommend that the service consider using (and paying) ex-users of the service to co-facilitate the group with a member of staff; others of the panel would like to see it completely peer-led, with appropriate support and supervision from staff.

Unusually, we are awarding this year's PSUIG Involvement award to a project which is using a methodology which is opposed by many service users. The criteria for this award, set out above, is about service user **Involvement** and this application was exemplary in involving service users at all stages of the project, and in a very meaningful way.

What struck us about the winning application was:

- Trialling any new "treatment" is risky, so it was twice risky to fully involve service users in design, delivery and evaluation of the intervention. In fact, partnership working was a key element of the trial. We think this was very brave and demonstrates a significant belief in and hope for service users by staff, as well as a real understanding of what we mean by "Involvement", i.e. respecting, valuing and utilising lived experience.
- The project provided a good level of structured support to service users co-delivering the intervention.
- In addition to the evaluation required by an RCT, the project conducted qualitative interviews with both the peer workers and the people who received the intervention, and we consider this to be thoughtful and thorough. The panel noted however, that the project could have used a service user organisation to conduct this additional evaluation.
- We particularly note that this qualitative evaluation brought to light the fact that those receiving the treatment frequently felt that it was **more** useful to them for being co-delivered by service users, and we think this is a key learning point for the Trust, as well as being real endorsement of the trial's methodology.
- In addition, the qualitative evaluation highlighted the therapeutic value to the service user co-facilitators, which contributed to their own recovery, and this is a core principle underlying involvement.
- The academic journal article is being co-written with one of the service user team.

We are delighted to award the 2013 Psychology Service User Involvement award to the ACT for Recovery Project, led by Emma O'Donoghue from the Lambeth Promoting Recovery Care Pathway.

D, Garry, Mark, Matthew, Penelope and Vanessa