Wiltshire Council
Where everybody matters

Wiltshire Council

Health and Social Care

User Voice Consultation

Title: Wiltshire Council Health and Social Care User Voice Survey

Summary: This document contains a summary of the public consultation work undertaken by Wiltshire Council regarding service users experience of engagement with the Council. By 'engagement' we mean providing service users the opportunity to have input into adult care work such as policy changes, strategies and service development by, for example, completing surveys, attending workshops, and formal meetings on the adult health and social care services they receive

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1. Introduction

1.1 This report summarises responses to Wiltshire Council's adult health and social care user voice consultation and includes responses from the four organisations, detailed within paragraph 2.1 of this document, that provide service users with opportunities to engage and comment on services the Council provides.

1.2 Wiltshire Council recognises the importance of engaging with its service users and partners to shape the services the Council provides and the results of this consultation will be fed into future service specifications to ensure that the views of service users, their family and carers are heard.

2. Background

2.1 Wiltshire Council currently funds three User Led Organisations (ULOs):

- Wiltshire Centre for Independent Living (WCIL)
- Wiltshire People First (WPF)
- Wiltshire and Swindon Users' Network (WSUN)

And Evolving Communities CIC (Healthwatch Wiltshire), to provide the Council's customers with a variety of opportunities to have input into adult care work for example, by consulting on specific adult care commissioning work, including evaluations of tenders. The four organisations are currently commissioned to provide:

- Peer support
- Input into staff recruitment and training
- Support to run the Learning Disability Partnership Board
- Support to run the Autism Partnership Board
- Support with consultations

In addition, some also provide:

- Advocacy
- Community development activities
- Social activities for service users

2.2. Contracts for these Providers come to an end in 2018 and as such the Council is currently reviewing its commissioning intentions, procurement model and total budget for user engagement and co-production within adult care.

2.3 Commissioners have been working with the organisations detailed in paragraph 2.1 to co-produce services using a range of methods; such as consultation, workshops, user testing and helping with tender evaluations, so that services reflect what the people who use them want.

2.4 It is recognised that further work needs to be undertaken by commissioners before full co-production is achieved. The Think Local Act Personal (TLAP) ladder of co-production (www.thinklocalactpersonal.org.uk) details a series of steps towards co-production in health and social care.

2.5 The Council is keen to ensure that the ethos of co-production is protected and developed within any future service specification(s) for service user engagement.

3. Consultation strategy

3.1 Wiltshire Council has a duty to consult under the 1999 Local Government Act. Through consultation, Wiltshire Council enables people to put forward ideas, options and opinions to help shape decisions about local service priorities, improvements and possible changes in the area where they live.

3.2 The aims of the Wiltshire Health and Social Care User Voice Survey are as follows:

- To seek views on how the Council engages with people who use adult health and social care services.
- To ascertain how service users would like to engage with the Council and the organisations it commissions to undertake these functions in the future
- To understand the types of support service users, require to enable them to share their views on the services they access
- To determine how the Council and service users can better work together to co-produce services

3.3 The consultation, in the form of a questionnaire, was open for a 7-week period (24 June to 14 August 2017) in line with corporate recommendations

3.4 Both online and paper copies of the questionnaire were used as the main feedback mechanisms. The rationale for using a questionnaire was that the Council could;

- Enable as many service users as possible to complete the consultation by providing a 7week period to complete the questionnaire, rather than holding events on set dates
- Gather individual responses
- Reach people who are spread across a largely rural county
- Allow service users to give their views anonymously

3.5 The questionnaire was advertised on Wiltshire Council's consultation portal (www.consult.wiltshire.gov.uk/) and in the following publications:

- Wiltshire Centre for Independent Living newsletter
- Age UK Wiltshire website
- Winsley Community website
- Malmesbury & villages website
- Bradford on Avon Our Community website
- Wiltshire Centre for Independent Living Website

in addition, a letter detailing how the consultation could be accessed and an electronic copy of the Easy Read questionnaire was sent to the following teams and organisations to disseminate:

- Wiltshire People First

- Evolving Communities CIC (Healthwatch)
- Wiltshire Centre for Independent Living
- Community Engagement Team (Wiltshire Council)
- Wiltshire Care Partnership
- Mental Health Inclusion (Wiltshire Council)
- Joint Commissioning Team (Wiltshire Council)
- Age Concern (Wiltshire)
- Wiltshire & Swindon Users Network
- Adult Care Operations (Wiltshire Council)
- North and East Wiltshire Area Group
- South Wiltshire Area Group
- West Wiltshire, Yatton Keynell and Devizes Area Group

3.6 Both the Easy Read and Standard questionnaires were available in paper copy on request from the Council

The questionnaire

3.4 The questionnaire contained 12 questions. The deadline for questionnaire returns (14 August 2017) and a return address for questionnaires were included on hard copies of both the Easy Read and standard questions. Copies of both the standard and Easy Read version of the questionnaire are included within Annex 1 (Wiltshire Council Health and Social Care User Voice Survey) of this report.

3.5 It should be noted that the following amendments were made to the Easy Read questionnaire, following comments from a Provider on the 4 July 2017

- **Question 5** – Response changed from 'support at an event from a care/support worker' to 'bringing your own care/support worker with you'
- **Question 11** – question changed from 'Do you consider yourself to be disabled to what is your primary need'. The response options were also altered, from those supplied by Wiltshire Council, on both the Easy Read and standard questionnaire.

58 questionnaires (31 standard questionnaires and 27 Easy Read paper copies) were completed prior to the alterations being made and the responses have been separated accordingly for transparency within this report.

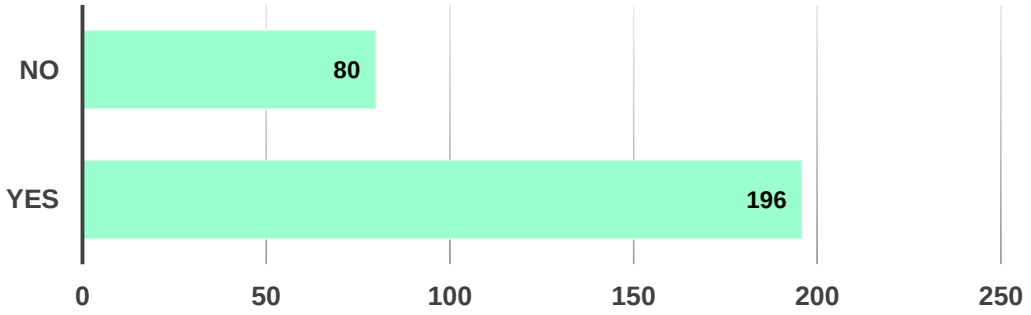
4. Questionnaire Reponses

4.1 The Council received a total of 276 completed questionnaires, and in additionone focus group report, representing the views and opinions of an additional 31 people[1] (Annex 13) and a summary of responses (Annex 12)

4.2 23% of questionnaires were completed online via Wiltshire Council's online consultation portal, with the remaining 77% being filled in on paper

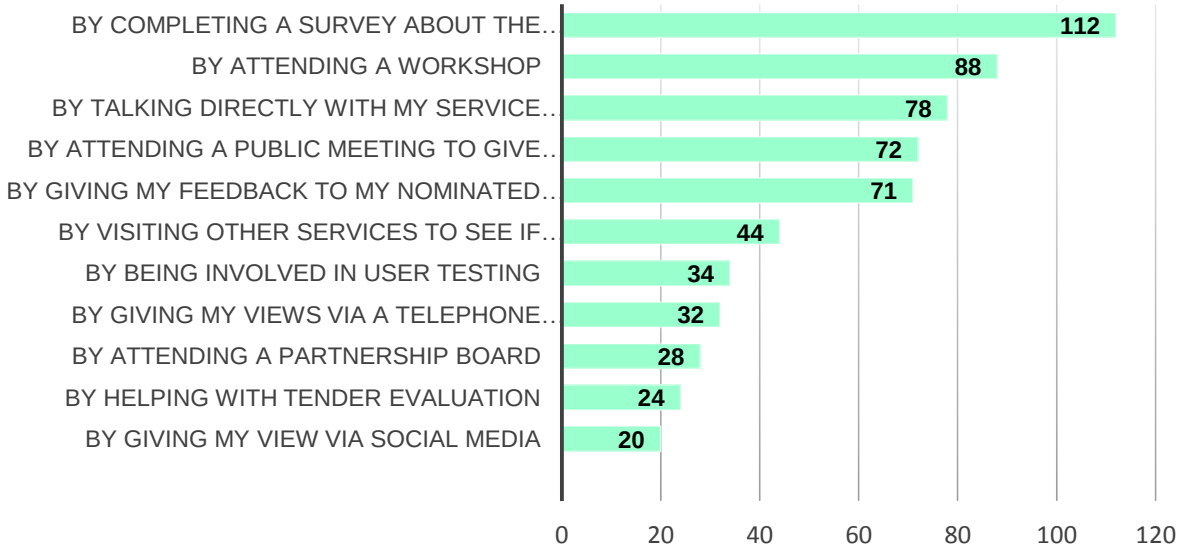
[1] Where figures have been provided in the report these have been included in the graphs. Responses detailing the number of tables in agreement and percentages have not been able to be included as it is not evident how many people were sat at a table and how many people the percentages indicated. A full copy of the WSUN report is included in Annex 13 of this report

4.3 The first question asked ‘Have you ever been given the opportunity to comment in a structured way on the services you receive?’



It is encouraging that 71% (196 people) of respondents have had the opportunity to comment in a structured way in some form on the services they receive/d, with only 29% (80 people) not having had the opportunity
Respondents that ticked ‘no’ on the online form, were automatically directed to question 3

4.4 The second question ‘which of the following methods of giving your views on the services you are receiving have you used?’ Please tick all that apply



On average, it is calculated that respondents can be seen to have used at least three of the methods detailed within the above graph to give their views.

The top five methods being

1. Completing a survey
2. Attending a workshop
3. Talking directly with my service provider
4. Attending a public meeting
5. Giving my feedback via my nominated

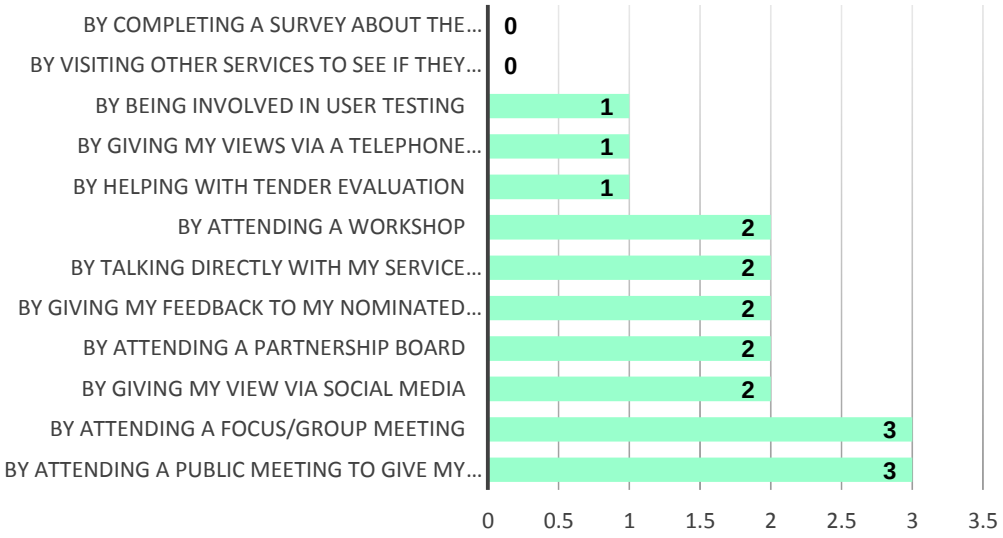
In addition, respondents stated that they had used a variety of other methods such as;

- Being involved in patient participation groups

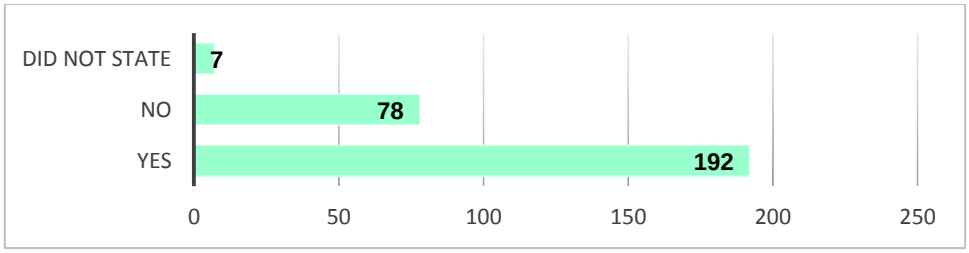
- Attending forums
- Talking to friends and family
- Meeting with Councillors

A full list of other methods respondents have used to give their own views is detailed within Annex 2 of this report

It should be noted that 8 respondents, whom stated that they had not been given the opportunity to comment on the services they receive in question one went on to tick responses to question 2, when completing the survey on paper, despite the form directing them to question 3. These figures have not been included in the graph on page 9 of this report but are detailed below. One organisation stated that some service users did not know what was meant by the term 'structured' in question one, so had ticked 'no'.



4.5 Question 3- Would you like to have the opportunity from time to time to comment in a structured way (via a survey/feedback form or face to face conversation) about the service/s you receive? If no, please explain why

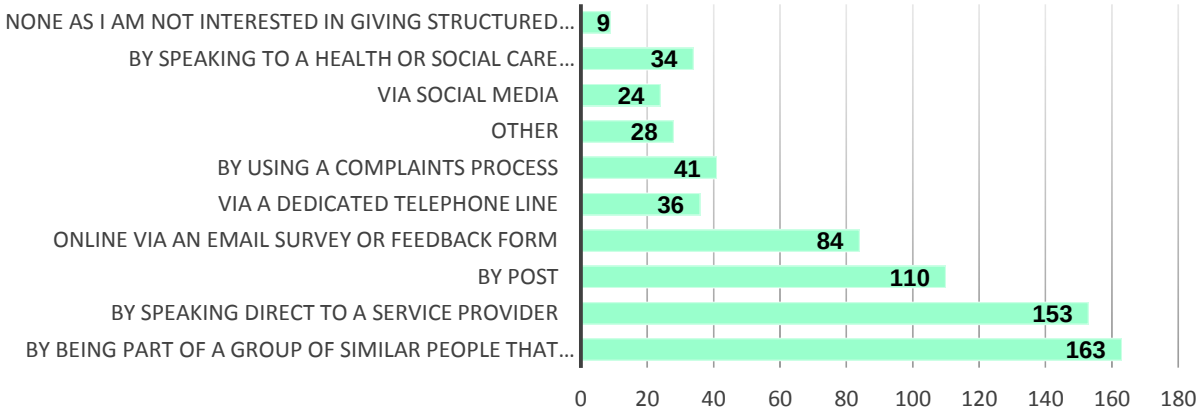


192 respondents (70%) stated that they would like to have the opportunity to comment on the services they receive in some form. This figure is marginally lower in comparison to those that stated that they had been given the opportunity to comment on the services they received in question one.

Respondents who ticked that they would not wish to have the opportunity to comment on the services they received cited a number of reasons for not wanting to take part;

- I have no issues at this time
- I like to limit the information that I receive
- It sometimes feels like it wouldn't make a difference
- I have too much to do already sorry! I've been doing user involvement events for years and find it exhausting
- I'm worn out with keep saying the same things to different people and nothing changing, except the staff the whole council, government agenda is to keep us all to tired to question them and there's no where to influence because the government doesn't listen
- I just don't want to
- Sometimes, depends on how my mental health is

4.6 Question 4 - If you wanted to give your view in future which of the following would you find it easiest to do? Please tick all that apply



Respondents stated that they would find it easiest to give their views by either:

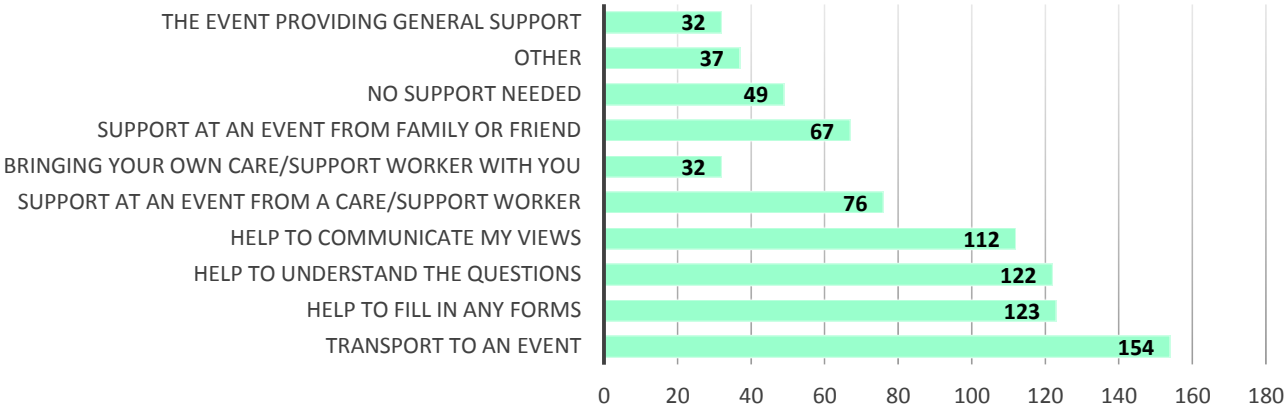
1. Being part of a group of people that provides a group response
2. Speaking direct to a service provider
3. Post
4. Online via an email survey or feedback form

On average respondents picked 3 different methods of how they would like to give their views.

The least favoured method for respondents to give their views in the future was via social media.

Annex 3 details other ways respondents stated they would wish to give their views in the future.

4.7 Question 5 - What kind of support would help you give your view if you felt you wanted to?



Prior to the alteration to the Easy Read version of the questionnaire, as detailed in paragraph 3.5 of this report, 18 people stated that 'support at an event from a care/support worker' would help them to give their view. This figure has been included in the above graph under the relevant heading.

Only 19% of respondents indicated that they would not require any type of support to give their views.

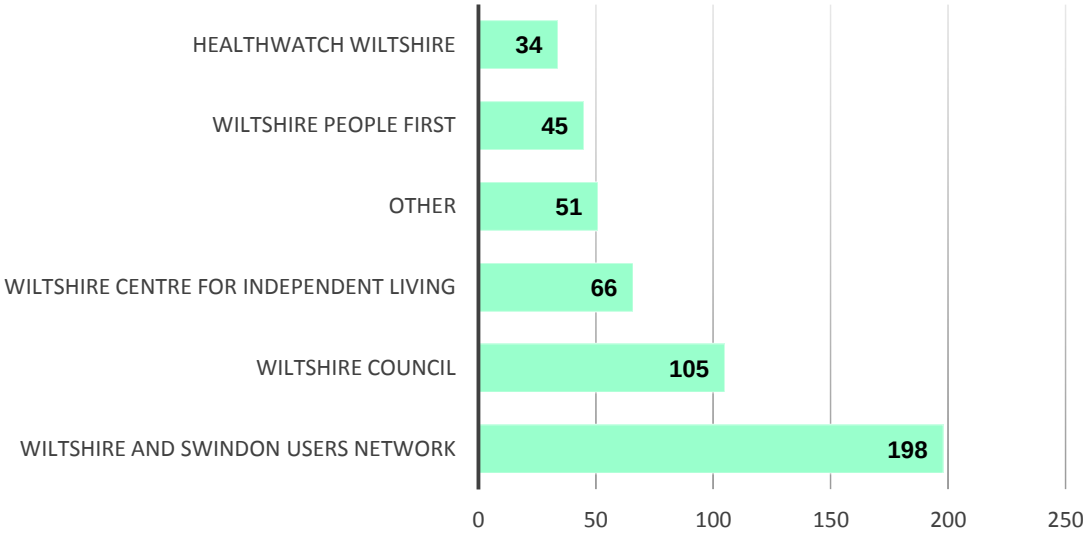
The most popular forms of support required can be seen to be:

1. Transport to an event (19%)
2. Help to fill in any forms (16%)
3. Help to understand the questions (15%)
4. Help to communicate my views (14%)
5. Support at an event from a care/support worker (or) Bringing your own care/support worker with you (14%)

On average, respondents felt that they would require between 4-5 forms of support to enable them to give their view.

The 'other' types of support respondents stated are within Annex 4 of this report

4.8 Question 6 - There are organisations that help people get involved in engagement/consultations about adult social care and health work and services. Which organisations have you worked with or received support from in the last two years? Please tick all that apply



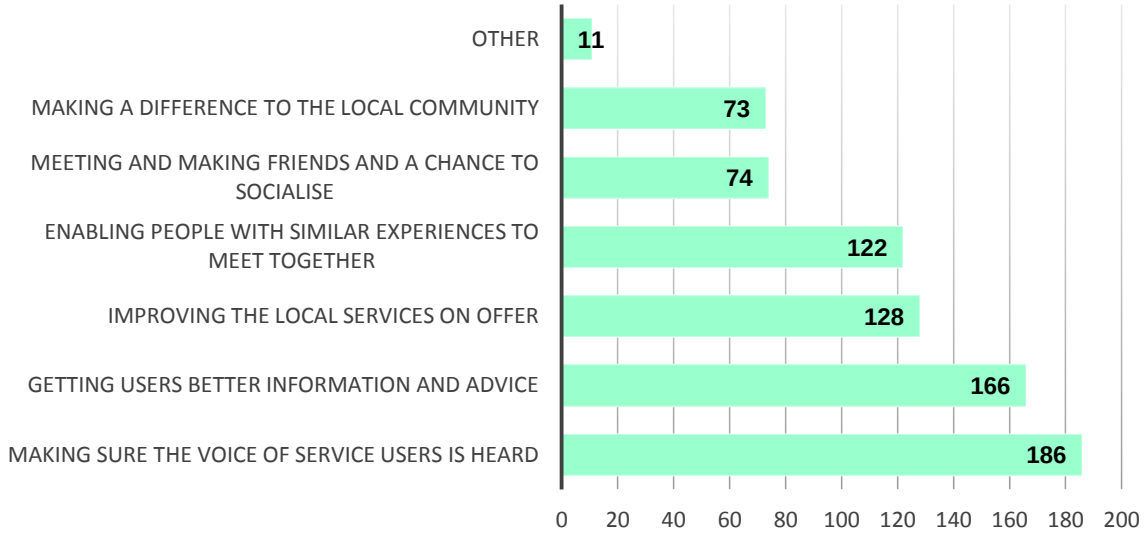
A high number of respondents can be seen to have worked with or received support from the ULOs and Wiltshire Council over the past two years. It should be noted that the membership is numbers of the ULOs vary due to the client groups they work with and support. Therefore, some ULOs would have naturally had more contact with respondents than others. For example, the ULOs currently have the following number of active members:

WSUN	WPF	WCIL
650	142	100

It should also be taken into consideration that the questionnaire does not ask how many times respondents have interacted with the organisations in the above graph over the course of the last two years. It was evident from some respondent's responses, that being asked to complete the 'User Voice Consultation' by a ULO was their very first interaction with one.

It was evident from questionnaire results that respondents have also worked with/received support from a wide range of other organisations such as Age UK, Doorway, Avon and Wiltshire Partnership, Headway, and Carers support Wiltshire. A full list of these organisations detailed within Annex 5

4.9 Thinking of those organisations above who help people get involved in their services, what do you value as the most important aspect of their work? Please tick up to 3 choices



Respondents valued making sure the voice of service users is heard; getting better information and advice; improving the local services on offer and enabling people with similar experiences to meet together as the most import aspects of the different organisations work.

A small number of respondents detailed additional things they valued (Annex 6)

It should be noted although respondents were asked to choose only three options many ticked more than three when filling in the questionnaire on paper.

4.10 If there is one thing you could change about how you make your views known, what would it be?

Respondents listed a number of recurring themes that they would change about how they make views known, these were:

- **Feedback**
  - Feedback is given to service users at the end of consultation exercises
  - Service users don't have to repeat their feedback to different organisations
  - Reassurance that service users are giving feedback correctly

- **Listened to**
  - That service users are listened to

- **Being heard**
  - That service users are heard

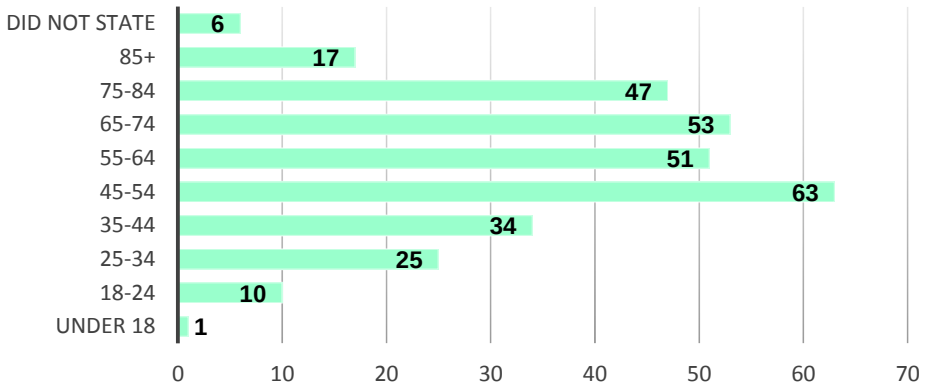
- **Valued**
  - Service user's involvement is valued

- **Confidence**
  - Service users would like to have the confidence to speak out and take part

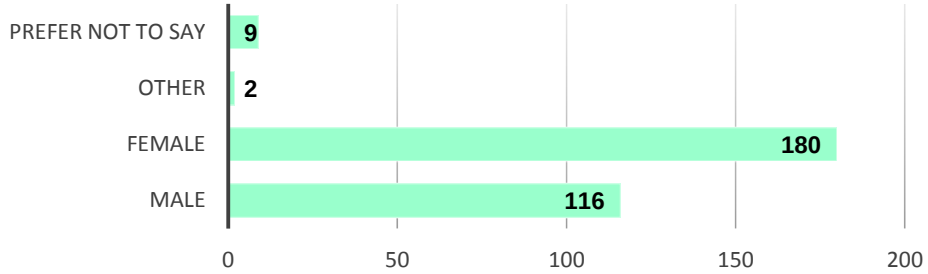
A full list of respondent's comments is within Annex 7 of this report.

4.11 The questionnaires were completed by a broad cross section of Wiltshire residents as evidenced in the graphs in paragraphs 4.11 to 4.14 of this report.

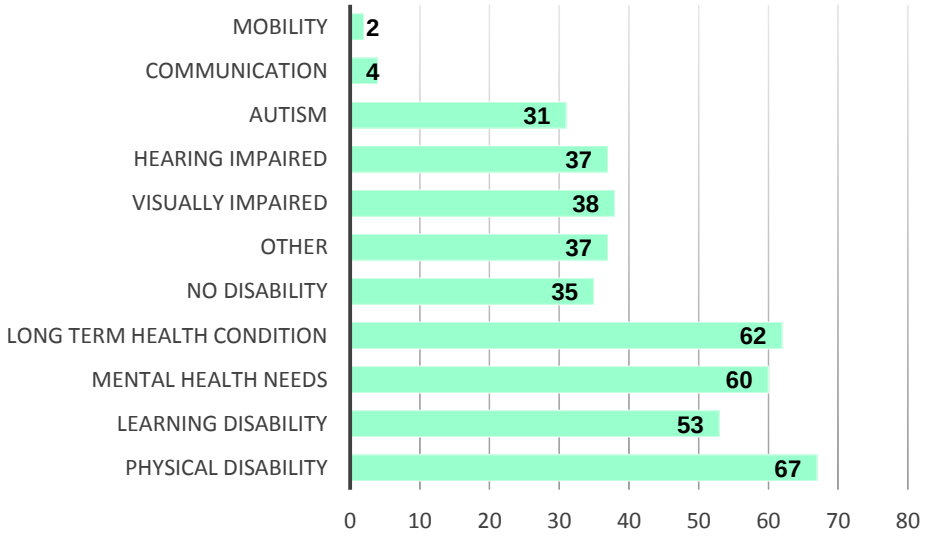
What is your age?



4.12 Are you?



4.13 Do you consider yourself to be disabled? What is your primary need? Please tick all that apply

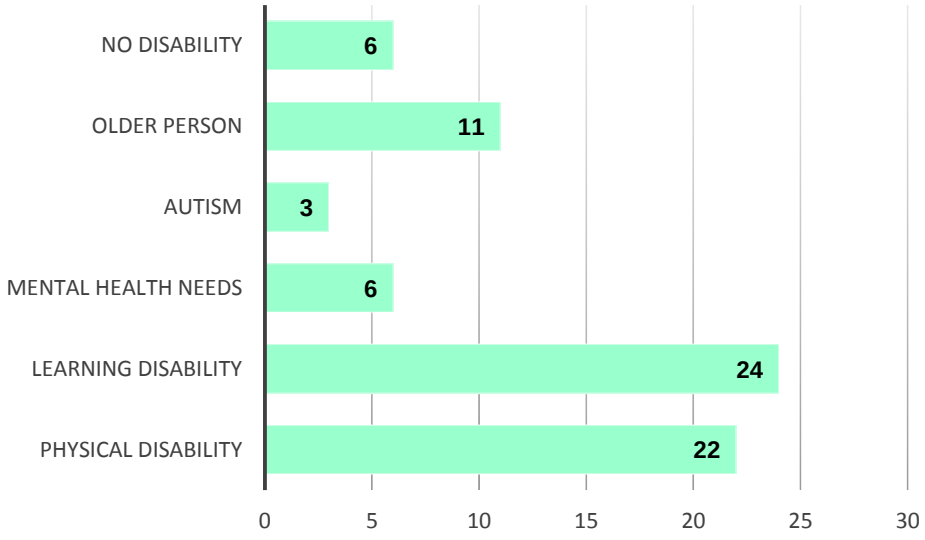


Under other, respondents listed the following conditions:

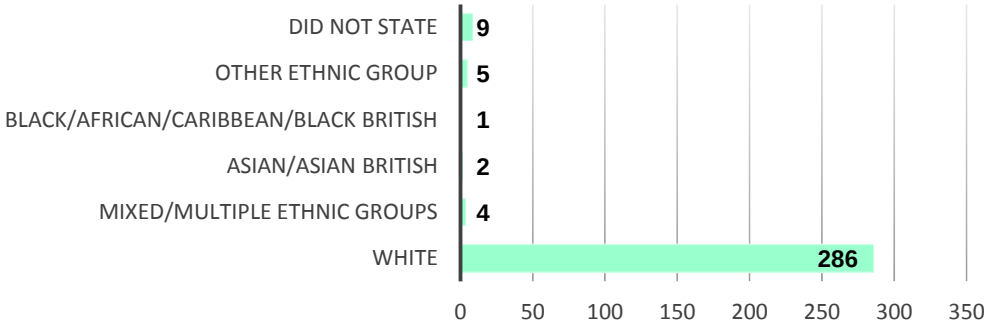
- Unable to walk without assistance and chair
- Diabetes
- Diabetes type two
- Heart condition

- COPD
- Epilepsy
- Asthma
- Obesity
- Arthritis
- Son with Asperger's
- Dementia Multiple sclerosis
- Stroke
- Frail
- Alcohol issues
- Downs syndrome
- Osteoarthritis
- Epstein Barr Virus
- Head injury
- Hiatus hernia
- Drug issues
- Risk of falling
- No disability, however, been waiting 7 months for a hip operation. I have difficulty in walking – Salisbury Hospital have gone from 3 months to 10-12 months waiting list
- **Under 'Mobility'** Wheelchair user

Please note, that the graph below shows the options respondents ticked prior to the alterations being made as detailed within paragraph 3.5 of this report.



4.14 What is your ethnic group?



4.15 A small number of respondents commented on questions 9-12, stating that they would like a greater choice of responses. The comments and suggested response fields, have been passed onto the relevant team within Wiltshire Council who design these questions/responses.

4.16 Whilst completing a paper copy of the questionnaire respondents wrote several additional comments:

- Four respondents commented that they did not find the Easy Read version of the questionnaire easy to understand

- One respondent stated 'I liked the survey to give my own view on things it made me feel included'

5. Provider responses

5.1 Current provider's detailed within paragraph 2.1 of this report submitted responses detailing their thoughts on the future service provision of service user engagement, responses are listed in full within annexes 8 – 11.

Annex 1 – Wiltshire Council Health and Social Care User Voice Survey

Wiltshire Council

Wiltshire Council Adult Health and Social Care User Voice Consultation

We want to get the views of people who use adult social care and health services about whether they have been given the opportunity to develop and comment on the services they receive. This might be by completing surveys, having a telephone interview or attending a meeting.

Getting involved in your service

Q1 Have you ever been given the opportunity to comment in a structured way on the services you receive?
- ☐ Yes
- ☐ No – go to question 3

Q2 Which of the following methods of giving your views on the services you are receiving have you used? Please tick all that apply.
- ☐ By attending a Partnership Board (e.g. The Autism Forum or Learning Disability Partnership Board)
- ☐ By completing a survey about the services I receive
- ☐ By attending a group meeting (a group that meets to focus on getting feedback on a particular issue)
- ☐ By being involved in 'user testing' e.g. getting in-depth at something like a process to see if it works for you
- ☐ By giving my views via a telephone interview
- ☐ By attending a workshop (a group that meets to look at solutions for a particular issue)
- ☐ By attending a public meeting to give my views
- ☐ By dealing with Tender evaluation
- ☐ By giving my view via social media (this means twitter or facebook or something similar)
- ☐ By visiting other services to see if they are working well for the people they support
- ☐ By talking directly with my service provider
- ☐ By giving feedback to my care manager/care worker

Other (please specify)

Q3 Would you like to have the opportunity from time to time to comment in a structured way (via a survey/feedback form or face to face conversation) about the services you receive?
- ☐ Yes
- ☐ No

If no, please explain why

Q4 If you wanted to give your view in future which of the following would you find the easiest to do? Please tick all that apply.
- ☐ Online via an email survey or feedback form
- ☐ Via social media
- ☐ Via a dedicated telephone line
- ☐ By post
- ☐ By speaking direct to a service provider
- ☐ By using a complaints process
- ☐ By being part of a group of similar people that provides a group response
- ☐ None as I am not interested in giving structured feedback in this way
- ☐ Other

If other please specify

Q5 What kind of support would help you give your view if you felt you wanted to? Please tick all that apply.
- ☐ No support needed
- ☐ Transport to an event
- ☐ Support at an event from a family or friend
- ☐ Support at an event from a carer/support worker
- ☐ Help to understand the questions
- ☐ Help to fill in any forms
- ☐ Help to communicate my views
- ☐ Other

If other, please specify

Organisations that can help

Q6 There are organisations that help people get involved in engagement/consultations about adult social care and health work and services. Which organisations have you worked with or received support from in the last two years? Please tick all that apply

- ☐ Healthwatch Wiltshire
- ☐ Wiltshire and Swindon Users Network
- ☐ Wiltshire People First
- ☐ Wiltshire Centre for Independent Living
- ☐ Wiltshire Council
- ☐ Other

If other, please specify

Q7 Thinking of those organisations above who help people get involved in their services, what do you value as the most important aspect of their work? Please tick up to three of these only.

- ☐ Making sure the voice of service users is heard
- ☐ Improving the local services on offer
- ☐ Getting users better information and advice
- ☐ Enabling people with similar experiences to meet together
- ☐ Meeting and making friends and a chance to socialise
- ☐ Making a difference to the local community
- ☐ Other

If other, please specify

Q8 If there is one thing you could change about how you make your views known, what would it be?

About you

Q9 What is your age?

- ☐ under 15
- ☐ 16-24
- ☐ 25-34
- ☐ 35-44
- ☐ 45-54
- ☐ 55-64
- ☐ 65-74
- ☐ 75-84
- ☐ 85+

Q10 Are you?

- ☐ Male
- ☐ Female
- ☐ Other
- ☐ Prefer not to say

Q11 Do you consider yourself to be disabled? Please tick all that apply.

- ☐ No disability
- ☐ Physical disability
- ☐ Learning disability
- ☐ Mental health needs
- ☐ Other
- ☐ Autism
- ☐ Hearing impaired
- ☐ Visually impaired
- ☐ Long term health condition

If other, please specify

Q12 What is your ethnic group?

- ☐ White
- ☐ Mixed/multiple ethnic groups
- ☐ Asian/Asian British
- ☐ Black/African/Caribbean/Black British
- ☐ Other ethnic group

Thank you for taking part in this survey. All your answers will be treated in the strictest confidence. Your views will help us shape services and the way in which we encourage service users to give their feedback on services and issues that affect them. Please return your completed questionnaire by **Monday 14 August 2017**

Wiltshire Council
Adult Health and Social Care User Voice consultation

Wiltshire Council
Where everybody matters

Wiltshire Council Adult Health and Social Care User Voice consultation

	This is an easy read version of a document called **Adult Health and Social care user voice consultation**. Please tick the box under the question which you feel matches your answer the best.
	A consultation is a chance for you to tell us what you think of our ideas, this might be about documents or services
	We might have asked you to fill in a form, speak to someone on the telephone or you might have come to a meeting

Question 1.
Have you ever been given the chance to say what you think about the services you receive? If No, please go to question 3

Yes	No

1

Please return your completed questionnaire to:

Jessica Chapman
Community Commissioner
Adult Care and Housing Strategy and Commissioning
Community Commissioning Team
Wiltshire Council
1st floor, County Hall
Bythesea Road
Trowbridge
BA14 8JN

10

PROOF
PROOF

Vision	Autism
Learning Disability	Mental Health
Communication	Other
No disability	

Question 12.
What is your ethnic group? Please tick

White	Mixed/multiple ethnic groups

Asian/Asian British	Black/African/Caribbean/Black British	Other ethnic group

Question 2.
Which of the following ways have you given your views on the services you are receiving, or have you used? Please tick all that apply.

By attending a Partnership Board e.g. The Autism Forum or Learning Disability Partnership Board	By completing a survey about the services I receive	By attending a focus group meeting (a group that meets to focus on getting feedback on a particular issue)
By being involved in 'user testing' (this means looking in depth at something like a website or a process to see if it works for you)	By giving my views via a telephone interview	By attending a workshop (a group that meets to look at solutions for a particular issue)
By attending a public meeting to give my views	By helping with Tender evaluation (this means looking at bids for services which providers have written when they want to win a contract with the council or Clinical Commissioning Group)	By giving my view via social media (this means Twitter or Facebook or something similar)

By visiting other services to see if they are working well for the people they support	By talking direct with my service provider	By giving feedback to my nominated support worker

Question 3.
Would you like to have the chance from time to time to give feedback in a structured way (via a survey/feedback form or face to face conversation) about the service you receive? Please tick a box below.

Yes	No

Question 4.
If you wanted to give your view in future, which way would be easiest for you? Please tick all that apply.

None as I am not interested in giving structured feedback in this way	Online via an email survey or feedback form

Question 9.
What is your age? Please tick the box below

- ☐ under 18
- ☐ 18-24
- ☐ 25-34
- ☐ 35-44
- ☐ 45-54
- ☐ 55-64
- ☐ 65-74
- ☐ 75-84
- ☐ 85+

Question 10.
Are you? Please tick a box below

Male	Female
Other	Prefer not to say

Question 11.
What is your primary need? Please tick all that apply

Mobility	Hearing

PROOF PROOF

Getting users better information and advice

Enabling people with similar experiences to meet

Meeting and making friends and a chance to socialise

Making a difference to the local community

Other

Question 8.
If you could change one thing about how you make your views known, what would it be? Please write your answer below

Via social media

By post

By speaking to a health or social care professional

By speaking direct to the service provider

By using a complaints process

By being part of a group of similar people that provides a group response

Other

Question 5.
What kind of support would help you give your view if you felt you wanted to? Please tick all that apply

No support needed

Transport to an event

Support from family or friend

Bringing your own Care/Support worker with you

The event providing general support

Help to understand the questions

Help to fill in any forms

Help to communicate my views

Other

Question 6.
There are organisations that help people get involved and tell us what they think about adult social care and health work and services.
Which organisations below have you worked with, or received support from in the last two years? Please tick all that apply.

Healthwatch Wiltshire

Wiltshire and Swindon Users Network

Wiltshire People First

Wiltshire Centre for Independent Living

Wiltshire Council

Other

Question 7.
Thinking of those organisations above who help people get involved in their services, what do you think is the most important part of their work? Please tick up to three choices below only.

Making sure the voice of service users is heard

Improving the local services on offer

PROOF PROOF

Annex 2 - Which of the following methods of giving your views on the services you are receiving have you used? – Comments

- Regular updates via WSUN and invited to things I have an interest and views on
- By contacting Wiltshire and Swindon Users Network
- AWP, Care forum (Wiltshire) Quality Standards
- Being involved in my patient participation group
- By attending forums and events organised by the Wiltshire Swindon Users network such as world mental health day
- Patient participation
- The Tisbury Memory Group always asks my views
- Have run own campaign in local area and awareness events
- Autism forum
- To the WOSUN meetings
- I live in supported accommodation project that is time limited
- By talking with my family and friends and for them to give my views
- Generally, I keep well due to my input and key worker
- By listening to my family and friends
- The development worker from Wiltshire and Swindon Network has come to my homeless drop in centre
- Councillor Claire Perry – public meeting
- By WSUN visiting our mental health support group
- By sharing information with my family
- By taking part in a community event
- Patient participation group
- Councillor – Claire Perry – public meeting

Annex 3 - If you wanted to give your view in future which of the following would you find it easiest to do? - Comments

- By direct contact to the head of department
- Being able to take the forms home so my carer can help me fill it in. To use paper forms rather than the internet
- By meeting with others to feedback my views and listening to others
- Locally in my community
- WSUN helps by facilitating, however, even when users have valid views the red tape to get things changed or addressed is just getting worse and worse
- By contacting Wiltshire and Swindon Users Network
- By giving feedback to the professionals that support me and my mind group
- By attending regular meetings with help
- By talking with people such as CQC
- Like I did today at my library to the Wiltshire and Swindon user's representative
- Discussing things at Doorway
- Questionnaires
- Have son to help
- Reason by post is to avoid confusion of all other contact points
- By giving feedback to WSUN and Rethink
- By quality assurance outcomes and registered care monitoring
- By meeting someone collecting views and giving out information on a stand in the library like WSUN did today
- Regular forums and meetings such as Tisbury Memory Group
- Face to face in-depth interviews
- By attending my library where I completed this questionnaire and met the WSUN worker
- Very well served by all my carers
- By organisations coming out to meet and inform me
- By housing providers having meetings and community organisations having events and opportunities to meet
- Staff talking to each other and staff in each house
- Attending a seniors forum
- Attending a seniors forum
- At my tenants meeting
- By attending the Trowbridge community hub
- To get information to help care for my mother
- By things being advertised on local boards, parish magazines and community hubs
- Singing groups that offer support/fun
- By going to my house meeting
- I get help at doorway
- At my work placement at Palmer Garden Centre
- By WSUN workers or Mill race
- By having people visit my day centre
- Supporter
- Face to face
- 1-2-1 privately
- Email

Annex 4 - What kind of support would help you give your view if you felt you wanted to? - Comments

- One to one support
- Accessible information and information in advance
- Also someone at the group to help me
- As I am homeless I need someone to bring the information and opportunities to me
- Assistance at the event from someone who can help me
- By the meeting being facilitated
- Citizens advice help me
- Expenses important
- Funds to pay me to get to an event or pay me to attend
- Having a venue that has easy access and disabled facilities
- Help at an event
- Help when I arrive at and during a meeting
- I need to be encouraged and supported to give my views
- I would need support from someone who is knowledgeable, but not family nor a carer
- I as x's mother completed most forms for him but his brothers are also involved
- I'm a PA
- In the past expenses claim forms were available at every event, now they are regularly forgotten. I can't not claim as the benefits have been cut and I can't afford not to be reimbursed for involvement
- Reassurance
- Someone employed at any group/forum to give support
- Someone I know from Doorways to attend
- Someone to be at the meeting to help me
- Very well served by all my carers
- Talking with my peers
- Talking with my peers
- Monitoring of my mothers care
- Help to set up a stand to demonstrate my community involvement
- Information beforehand
- Independent support from Wiltshire People First
- Talk face to face with Wiltshire Council about crossing
- I use a screen reader to read computer
- Help from Wiltshire People First self-advocate supporter

Annex 5 - There are organisations that help people get involved in engagement/consultations about adult social care and health work and services. Which organisations have you worked with or received support from in the last two years? – Comments

- Adcroft surgery older people's group **(2)**
- ADP **(1)**
- Age UK **(5)**
- Alzheimer's support **(1)**
- Area Board **(1)**
- Avon and Wiltshire Partnership **(4)**
- AWP forum **(2)**
- British Red Cross **(1)**
- Care agency **(1)**
- Carers support **(2)**
- Carers support Wiltshire **(3)**
- Carers Wiltshire **(1)**
- Church **(1)**
- Doorway **(7)**
- Family **(1)**
- Family, church and personal people **(1)**
- Friends link **(1)**
- Go Practice **(1)**
- Got lots of promise from Healthwatch, but never let me know results of complaints
- GP **(1)**
- Guide dogs for the blind **(1)**
- Headway **(4)**
- Help to live at home **(2)**
- Help when bag and bus pass stolen **(1)**
- Local Councillor **(1)**
- Melksham seniors **(2)**
- Melksham seniors signing for the brain group **(1)**
- Mencap **(1)**
- Mill Race day centre **(2)**
- MIND **(4)**
- Mon/Wed club **(1)**
- My care home **(1)**
- My housing provider **(2)**
- My local MP **(1)**
- NHS mental health trust **(1)**
- Older people's services **(1)**
- Public speaking **(1)**
- Rethink **(2)**
- Startability services **(1)**
- Support workers at home **(1)**
- The Library **(1)**
- Together working for wellbeing **(1)**

Annex 6 - Thinking of those organisations above who help people get involved in their services, what do you value as the most important aspect of their work? - Comments

- Peer support
- Having someone there to help with personal care, assisting to the toilet longer timescale
- Treating me as an individual
- Getting user better information and advice – if only
- Hearing voices is great but most of us need to know we are not just using our energy for no reason, we do it to help things ourselves and others, a vain hope in these difficult times
- WSUN provide transport and a support worker to enable me to take part and give my views at an event. No other organisation provides this service, without this service my voice would not be heard
- Wiltshire and Swindon
- Link adult and children's services
- Would like people to be sympathetic
- None
- The Wiltshire & Swindon Users helped set up and fund the Memory Group I attend with my son who I care for
- Some organisations are too diverse and distant! They don't really connect with service users they have a professional opinion on service user issues because its quicker and easier
- Generally good
- Link adult and children's services
- Active clubs for older people
- Helping me find a job
- Reducing isolation
- Promoting services which can help an elderly relative
- Making sure the care provided is ok
- Progressing a complaint
- Knowing what's going on
- Chances for people to know who to talk to and get involved in community if needed

Annex 7 – If there was one thing you could change about how you make your views known, what would it be?

- To be able to speak to someone face to face
- Meet the Council face to face, go out to more meetings with more people
- All fine
- Speaking up group at Wiltshire People First help me to give my views on things that are important to me
- I would like to speak out
- I cannot think of anything that I would like to change
- My view is I want to get the right services for disabled people. I think there should be a service by where you can make your views on social work known
- I want to get out more, I use Shine and Gateway, but would like to attend more groups
- By having support worker
- To be listened to
- More meetings
- Having enough time to fill the form in. Speakers do not speak jargon in meetings and presentations
- I like coming to Wiltshire People First and letting them help me give my views
- Wiltshire People First need more money to do more meetings. Wiltshire People First is an important group
- I'd like to rap my views
- Have more paid jobs
- Speaking up about crossing on Malmesbury Road, Chippenham. **Go to** meeting at Council office in Chippenham. Listened to
- Be a part of parliament
- I think a letter of writing is good addressed to the service department, phone calls sometimes cause confusion in resolving views or issues letters need to be in easy read
- Having feedback from the council so I might get involved again
- Evidence that the Council REALLY DOES TAKE NOTICE of the information given.
- Being listened to as a service user by people from the actual service/
- Longer time scale and then feedback no other space so why no vision impairment box and an older person does not necessarily have a disability that is discrimination
- More workshops and forums and help to get there abd when I am there
- An organisation that is suitable for my individual needs and cater for various disabilities and offer assistance
- I prefer support at Wiltshire People First to support me at meetings and to help me understand. It's good to have a 1-2-1 it makes it easier
- More communication
- That authorities would listen and taken things on board.
- Improved joined up Health & Social Care systems to monitor and review users satisfaction with the services provided
- I don't know
- "My voice isn't very loud". Having someone to help me say what I think about things
- Ensure that all online surveys and consultations are available in paper format and as word docs - some people cannot use the internet and screen readers for visually impaired work best with word documents
- Sending a SAE requiring a Response or Reply

- Feedback
- For the forms to be easy to understand – this one is a bit confusing
- If users were involved in setting any surveys so they do not patronise and feed back is given at end if survey.
- More local meetings
- Arrange a few meetings outside normal working hours eg in the evening or at the weekend
- Be actively listened to!
- That increasingly the only way to contact any organisation is via the internet
- To be heard!
- I would like to have a better use of phones than I have at present.
- Being regularly consulted
- Being assured of a reply/response
- That service users involvement is valued. We often see, hear, feel and experience things differently than those paid to provide services. If heard and feedback constructive it can make a huge difference to everyones experience of the world / event / whatever
- Improve services
- To speed up waiting time for changing care agency and not go on a long waiting list
- That it makes changes if needed
- Having clearer / listened to, lines of communication within AWP. Mire simple action / get on instead of verbal non delivery on the more simplier issues
- That all people even with mental health needs are included
- That I felt confident to do it be heard and make a difference
- Knowing about all the opportunities on offer and how to access them
- That I get a chance to see how my views have been recorded before they are shared
- That I am giving feedback correctly to others?
- Care agencies that listen community hospitals
- That you didn't have to repeat your same feedback to every organisation
- That someone listens and uses the feedback to make change
- More groups and support like the Tisbury Memory group
- That it's acted upon
- That I don't have to tell lots of organisations the same thing (no joined up thinking) or info sharing
- That I'm listened to
- Knowing that things like the care and support directory exists
- That there are so many different organisations needing the funds and fear that good ones e.g. WSUN will be lost, it would be awful as they know what they are doing and support people properly
- Socialise, see friends in Bristol
- Simpler information to help me understand better
- I sent an email to Healthwatch Wiltshire but had no reply. Organisations should reply to service users
- Not have to repeat self again and again with views and not getting feedback or changes made
- No changes please
- I would like to keep the support I receive unchanged as I have trust in the employees of WSUN and value their input
- Increase the funding to helping organisation

- This question is too vague. Better designed questionnaires/surveys would be a good start
- Improved communication
- More frequent meetings for forums
- Getting idea to identify more over social events or NHS issues maybe. Something to benefit other
- Listen to the voice of the users. those in my care will know me best
- Lay it out as a plan. Work out what I was told. Help put it into action
- Nothing
- I'm happy with everything here
- Enabling all who need it to get help
- That my views and needs were acted on
- Not having to fill in forms and someone to listen and record my views
- Having stands and people to feedback to like today in the library or public places like GPs or community centres
- Having more confidence to do it
- Meeting others that understand and have similar needs and information that helps me live safely and independently
- People who generally who know me know I am getting in much before I do appreciate
- Don't know
- Talking to the right people and being heard and helped
- Being heard, helped and encouraged
- To be interviewed by someone
- To meet and discuss with others that have similar needs
- Not to be homeless or no fixed abode and for people to listen to what my needs really are
- None
- If symbols and pictures were used
- To much information on the internet and lots of elderly people don't have access or understand, so public meetings and one to one feedback is essential
- Regular forum meetings as regular places
- The online survey on autism last year didn't have room for elaboration / explanation
- More information before any meeting to consider the issue
- For WC to meet up with and listen to service users to hear how best to support them - not just do a 'tick box' exercise that means nothing!
- Have more information about what is happening in our community
- From a speaker in our group on a regular basis, to update us on changes
- Get our information from a speaker about particular areas of concern
- I would like one point of reference - co-ordinator. Regular meetings - people come to us to explain in our group
- The opportunities I have at the moment work for me
- It would be good if someone could attend places like the Greathons, Leonard Cheshire Disability to explain what services help the residents
- To speak up about mental health and reduce stigma
- I would want more confidence and courage to speak out. I am completely blind and can't tell the response of other people from their body language which makes things more difficult
- To be asked more often of my opinions on everything
- Transportation to be given the opportunity to meet people and air my views
- No air conditioning in any venue used, its awful and very painful to those of us with fibromyalegia and other sensitivities / conditions, but that aside, I don’t ever want to just be involved on computer

or online that would be dire! Social media would be the death of communication not better at all, it's easy and bite sized – not meaningful at all, except if you want to moan and get everyone else to moan too

- I have experience of getting my views as a carer known and using them to help others and staff in MH services to engage with carers and feel that this has started to make a difference. I am frustrated however that in my personal journey with epilepsy and gastro consultants and GPs. I experience doctors who do not communicate and it is hard to join this up or find a way in despite accessing system through formal and informal streams. A cycle of admissions and ambulances improved now by a specialist nurse. This needs to be much easier and communication much better/easier
- Never being afraid to say how things are good or bad. Meeting and sharing things that can help improve and change a situation that causes stress. Giving feedback to enable change and access support, providing the opportunity to have an independent voice
- Be more diplomatic like I used to be
- Views are all well and good, but unless acted upon they're of little use
- Feedback from the Council
- Only ask us for our views if it's a genuine request
- Real time surveys that show me how other people are responding
- Change Area Board meetings so there is more input from the public
- Regular local area groups to talk about local issues
- More choice about ways to respond, not just on the website
- We assume everyone can read and write
- Make us equal partners in the process
- No jargon
- Bring back wardens who listened and helped me when I needed and was lonely
- Just ask me – communicate
- A big bus to go around in to advertise
- Listening to people's views and making your views clear
- I wish there could be more face to face contact
- Get involved in how services are run
- That people listen and don't laugh at me
- That every town has similar support groups available
- They are listened to
- Less social interactions as I have anxiety. If I need to attend them have additional support in place
- We could have smaller unit meetings where everyone can talk, similar to the one we had at the Civic Hall in Salisbury
- We could have smaller unit meetings where everyone can talk, similar to the one we had at the Civic Hall in Salisbury
- Things were easier to understand
- That there were more meetings
- Wiltshire Councillors should be a more visable entity in the community of the county
- Yes, when valid points are raised at members management make efforts in implementing … so far I have not seen any evidence of this
- Knowing what's going on
- That information was easy to access
- That I only have to tell one person
- That all local services are promoted locally
- How to get a job
- That I'm listened to
- Making sure the care provided is ok
- That the feedback is used to make improvements
- That I knew where to take my views and could meet other older people

- That all services worked together, didn't duplicate or ask the same questions over and over again
- Not being called a user
- That I'm asked
- Reducing isolation
- That its listened to
- That services work together more
- That services don't duplicate
- That I could
- Whenever I contact Wiltshire Council they always have to call me back which is not always convenient. I would like to deal with the issue at the time

Appendix 8

Healthwatch Wiltshire is pleased to be invited to contribute ideas for consideration by the Council and NHS Wiltshire CCG in developing its commissioning plans for health and care involvement and engagement over the forthcoming years. We hope the following is helpful.

Experience of Health and Social Care

The health and social care environment is increasingly moving towards a joined-up system be that through partnership or integration. This is evident in Wiltshire with the recent 'statement of intent on integration' by the Wiltshire Health and Wellbeing Board.[2] This policy is born out of the experience of individuals relating to the system where for them boundaries are not real or relevant. Patients, service users, and unpaid carers want an experience of a seamless service which is personalised. They are first and foremost citizens who use or have contact with services. As health and social care services relate more closely, all citizens will be service users because we all relate to the NHS at certain points in our lives.

However, it has to be recognised that as a result of a disability or diagnosis some of us will need more facilitation or support to interact with those making personal, service or strategic decisions with us or about us. Where we have these needs we will also have the generic experience that other individuals have (e.g. using the dentist or the pharmacist). These generic experiences are not necessarily related to age, disability, or diagnosis. For example, increasingly children and young people have views about their contact with health, social care and community services. Whilst older people may have more contact with services their experience is often similar and their concerns the same (for example, transition/transfers between services and accessing services including transport and waiting times).

Engagement

A significant percentage of the population have the opportunity to engage with health and social care services but the investment that individuals wish to make in engaging with the decision-making processes varies very significantly. The introduction of local Healthwatch recognises this in providing a service that is committed to promoting and facilitating the engagement of the public with the decision makers in Health and Social Care. Whilst local Healthwatch has an important role in facilitating involvement it does not deliver all the involvement and engagement required by local people and the health and care system. There are clearly benefits of local Healthwatch collaborating with other agencies which deliver engagement as this can help ensure the engagement outcomes feed into the statutory role afforded to Healthwatch through the legislation.

Opportunities for all citizens to engage and be involved

Healthwatch Wiltshire recognises that we are all users of services and everyone has a right to have their voice heard in relation to both the specialist and generalist services we use today or in the future. We identify, through our work to date, the following:

[2] http://cms.wiltshire.gov.uk/(S(wm5gga55b130f045qoanjja5))/ieListDocuments.aspx?CId=1163&MId=11084&Ver=4

1. Individuals who presently experience good health and wellbeing and access services that provide prevention and promote good health.

   These individuals report themselves as caring about health and social care but are not particularly invested in committing time to engaging but will respond when targeted on their areas of special interest using methods which are convenient.

2. Individuals who have a disability or diagnosis that brings them into regular contact with services.

   These individuals seek quality information to assist them in managing their health and care needs. They often report being interested in community services and seek support from the voluntary sector.

   Their experience of using services will vary but these individuals are often willing to engage and will chose varying ways to do this from IT contact to volunteering.

3. Individuals who have significant disability or illness.

   These individuals have very significant levels of contact with health and social care services and are often dependent on them to achieve their life goals safely or effectively.

   Many have strong views about the services they regularly use and the ways they are delivered. They can require very significant levels of support to engage effectively but have the commitment and passion to inform the effective development and delivery of services.

Individuals can and will move between these three 'tiers' at different times of their lives or may choose to engage in specialist or generalist areas as appropriate.

A network approach to engagement

The Healthwatch Wiltshire service has a statutory responsibility for the whole community but has always recognised that for some circumstances and for some individuals highly specialised support is required to maximise their opportunity for engagement. In these circumstances we have worked with agencies that have these skills and networks (for example, specialist agencies and user led organisations for people with learning difficulties, disabilities, young people, and also transgender people). We have also sought to provide individuals the opportunity to engage alongside other members of the community on the more general issues that may interest them.

One size does not fit all people all of the time and we commend to you the idea of a network approach to engagement where individuals can move around and be engaged or consulted with when and how they chose with a menu of generalist or specialist support.

This model has the potential to be very effective and provides for a mixed economy of engagement. We know that there are a number of agencies that would be interested in developing such a network working with the local Healthwatch service. We recommend you consider such a model being aware that the current contract for the local Healthwatch service comes to an end in March 2018 and although Evolving Communities[3] hope to be present in Wiltshire we are aware we may not be part of such a network.

[3] The Healthwatch Wiltshire service is commissioned by Wiltshire Council and delivered by a local organisation called Evolving Communities

Appendix nine – Wiltshire Centre for Independent Living

Wiltshire CIL's vision of User Led Empowerment and User Engagement in the future

Introduction:

Wiltshire Centre for Independent Living (CIL) is a user led organisation (ULO). This is defined as having a minimum of three quarters of its Board of Directors as people who use services and aim to have half its staff and volunteers as people who use services. We have developed our thoughts of a practical vision for Wiltshire which will protect 'the important functions of involvement and engagement and provide best value for the council, reducing duplication'. We are committed to working with commissioners to achieve this.

Following the Government Cabinet Paper about the "Life Chances of Disabled People" (2005) and the role of user led organisations within local authority areas, Wiltshire CIL was formed in June that year by service users. CIL worked towards enabling people to achieve full support to independent living and in 2012 won the contract for providing Direct Payment support.

Centres for Independent Living exist worldwide in 99 countries as the formal structure of generic disabled people's organisations, supporting people to achieve their aspirations in Independent Living and acting as a collective voice on issues affecting them. Independent Living is an approach to life and there is no reason why people cannot exercise independence, choice and control to their personal maximum ability wherever they are and whatever services they might use if they have access to the support they need. ULOs share an understanding of Independent Living which provides marginalised people with the support they need to lead the lives they wish within the community as citizens equal to others.

Value of User Involvement and Engagement:

User involvement and engagement benefits health and social care commissioners, providers, people who use services and the whole community in the following ways:

Health and social care commissioners:

- User expertise informs appropriate commissioning specifications using the Expert by Experience approach to design appropriate interventions and support
- Creates efficiencies for contracts by identifying the most appropriate strategies
- Gives feedback on the practical operation of the contracts and informs new contracts to ensure effectiveness, including cost efficiencies

Health and social care providers:

- Appropriate services are delivered by listening to peoples' experience of effective service provision
- Workforce attitude is influenced and changed through training delivered by experienced service users'
- Service user regular feedback provides useful monitoring to improve services

People who use services:

- People who use services influence commissioners and providers by contributing their personal knowledge to improve or change services
- People who use services are treated as co-producers using their own expertise to work with providers

- People who use services feel valued by their involvement, gain confidence and feel empowered in all aspects of their lives

Communities in which we live:

- The confidence people gain as service users enables them to contribute and participate in local activities and services
- Inclusion brings a more diverse and coherent community spirit, reducing numbers of marginalised citizens
- Local planners and providers easily engage with people who use services to involve them in local activities and benefit from their expertise

A Vision of Coproduction in Wiltshire:

Since the opportunity for User Involvement in Health and Social Care was first enshrined in the NHS and Community Care Act in 1991, the concept has developed nationally and locally and a model of good practice has been implemented building on experience nationally. A recent pattern of good practice collated through the organisation 'Think Local Act Personal' is the basis for this Wiltshire vision (see appendix 1) incorporating 25 years of learning.

Wiltshire CIL considers the rungs of long-term user consultation, engagement, co-design and coproduction are most effective within the role of a user led organisation, by involving all those who use long term services and are marginalised by society. In the roles of consultation, informing and educating, user led organisations ensure long term service users are reached, engaged and the voice of disabled people is captured and represented at local level through the provision of extra support and understanding in the proven model of 'expert by experience' peer support. We do not have a role in coercion!

Examples of how a user led organisation is beneficial using the expertise of long term service user involvement and available to commissioners and the whole community is demonstrated under the following headings:

Educating and Informing:

Generally, people who use services have access to methods of educating and informing within the community. However, people who are marginalised by society do not have the same access to all available opportunities. They may have short term memory or visually impairment requiring easy read version of documents or are socially isolated and not receive relevant information to make informed decisions. A user led organisation has expertise to make this accessible to everyone and are trusted by their membership to be inclusive and independent, this can be further implemented using social media and communication formats that need resources to do.

Consultation:

This is often the chief means of user involvement and engagement however; it does not draw fully on the expertise of service users and is often done in ways which exclude more marginalised long term service users. People who use services often feel too much has been decided without involving them if they only get invited to contribute at this level of involvement.

At the same time as consultation exercises for local citizens, a ULO can run consultations for people who use services according to their needs e.g. facilitating meetings with interpreters, paying and organising transport costs for people to attend, using appropriate visual prompts and running meetings in an inclusive, accessible manner for those with particular communication needs, collecting views on a one to one basis etc. Consultation has to encompass a range of

alternative activities to give people the widest possible choice. This needs people and resources to carry out effectively.

Engagement and Co-design:
Commissioners can work better and more effectively with a ULO to decide policy decisions involving users from the start. It is only when they have sufficient opportunity to meet regularly and contribute their experience that documents are appropriate to meet communities' inclusive needs because of the influence service users have had on them.

At committee level people who use services rarely engage on their own behalf but those affiliated to the ULO have the opportunity of meeting and being supported by others using similar services to bring forward valuable knowledge and gain more expertise and confidence to bring issues and concerns to the table. This needs resources for skilled facilitation and users' participation costs are met.

Coproduction:
This is a particularly valuable process to use for informed pieces of work, when new policies and design of services are introduced or when a new vision is in its infancy and being developed. A ULO can put commissioners in touch with two or more people who use services with relevant experience (never one which can be an isolating experience!) to join this group from the start and work as equals in coproduction. They can be supported in an ongoing way from a wider experienced group within the ULO membership.

Characteristics of Wiltshire CIL model of User Involvement:
Wiltshire CIL has outlined above a vision of the types of user involvement which is a function of a ULO model. It has drawn on the value of particular methods and systems which can help in this process.

Working with local formal structures as well as county wide:
Wiltshire has developed a pattern of local area boards for people to engage with. People who use services are well able to be involved in this process but few do so at present because little work has been done in reaching out to marginalised citizens and using methods appropriate for their participation. Pilot work has showed this to be possible and a ULO could work with community engagement managers to train them and share joint events to involve service users.

Using Social Media:
Social media is an avenue to be further explored in engaging people. Some long-term users do not use social media but there are a number that do, as Wiltshire CIL has found out through the on-line PA register it developed in securing jobs for employers in receipt of direct payments. Some people unable to leave their homes use social media as a means of engagement. It is a useful tool for providing information, collecting people's views and encouraging them to engage with each other to discuss issues in closed forums. Further development of this would increase the numbers of those able to participate but it is also recognised that this is not widely available or appropriate for many disabled and older people who need engagement through the alternative routes mentioned.

Community development methodology:
To achieve the best outcomes for all citizens, user involvement needs to be developed in communities, engaging with existing plans and activities and building on service users' strengths and assets. Wiltshire CIL has a proven track record of this way of work through our support planning and asset based community development. We have linked with partner organisations locally and train on the concept of community assets.

Links with national policy and organisations:

In order to participate fully, people who use services need information and support from national bodies as well as local. Often the issues which affect their lives e.g. welfare reform, are decided by national policy in addition to local services. It is therefore important they have the opportunity to gain information holistically and influence it as they wish. Wiltshire CIL is affiliated to Disability Rights UK, members of the Kings Fund alumni network, the Leadership for Empowered and Healthy Communities network, In Control, Think Local, Act Personal and has robust links with other centres for independent living. We are often at the forefront of relevant national reports for the use of disabled people. Such links provide service users with a full understanding of policy and its relevance to local consultations when involved from the outset.

Linking with Self Determination and Independent Living:
The effective involvement of service users is only possible if they have the resources to lead independent lives in the community and are able to develop their own vision of their role within it. Whilst the provider contract for Direct Payment support is a separate piece of work, through Wiltshire CIL people who use services will be working with an organisation who understands the importance of this and of using their own assets and self-determination to lead a full and active life in the community. Wiltshire CIL believes that people should have a life, not just a service.

Equality and Diversity:
All policies need to include methods of reaching more marginalised citizens, often excluded, and Wiltshire CIL is committed to recognising and including the involvement of such citizens in all our work.

Conclusion:

We have sought to show that a variety of user involvement and engagement in Wiltshire can be achieved by developing a variety of methods of involvement from the ladder of coproduction and delivered by a local user-led organisation with a philosophy of self-determination, independent living and community development. This sits alongside the more general citizen consultation required by government through Healthwatch, and Wiltshire CIL has a track record of working in partnership with Healthwatch Wiltshire using our expertise, skills and experience.

Clare Evans, MBE
Chair of Wiltshire Centre for Independent Living

Geraldine Bentley
Chief Executive Officer

July 2017

See Appendix 1 – TLAP Ladder of Co-Production

CO-PRODUCTION: It's a long-term relationship!

Co-production

Co-production is an equal relationship between people who use services and the people responsible for services. They work together, from design to delivery, sharing strategic decision-making about policies as well as decisions about the best way to deliver services.

Co-design

People who use services are involved in designing services, based on their experiences and ideas. They have genuine influence but have not been involved in 'seeing it through'.

Engagement

Compared to the consultation step below, people who use services are given more opportunities to express their views and may be able to influence some decisions, but this depends on what the people responsible for services will allow.

Consultation

People who use services may be asked to fill in surveys or attend meetings; however this step may be considered tokenistic if they do not have the power to influence or affect change.

Informing

The people responsible for services inform people about the services and explain how they work. This may include telling people what decisions have been made and why.

Educating

The people who use services are helped to understand the service design and delivery so that they gain relevant knowledge about it. That is all that is done at this stage.

Coercion

This is the bottom rung of the ladder. People who use services attend an event about services as passive recipients. Their views are not considered important and are not taken into account.

National Co-production Advisory Group NCAG

think local act personal

CO-PRODUCTION: It's a long-term relationship

What is the ladder of participation?

The ladder describes a series of steps towards co-production in health and social care. It supports greater understanding of the various stages of access and inclusion before full co-production is achieved.

Co-production operates at many levels: strategic, service design and development and individual.

TLAP's ladder of co-production is used to describe co-production at strategic commissioning level, but it can be adapted to any of the other levels as well.

What is TLAP?

Think Local Act Personal (TLAP) is a national partnership of over 50 organisations working together with people who use services, carers and family members to transform health and care through personalisation and community-based support.

What is NCAG?

The National Co-production Advisory Group (NCAG) is a team of people who use services, carers and families. Members work with the TLAP partnership to make sure that TLAP's work is fully co-produced. They also offer other organisations support with co-production.

Other documents available include:

TOP TEN TIPS FOR CO-PRODUCTION
www.thinklocalactpersonal.org.uk/Latest/Top-Ten-Tips-for-Co-production-One-page-profile-and-Easy-Read-version

PEOPLE NOT PROCESS – CO-PRODUCTION IN COMMISSIONING
www.thinklocalactpersonal.org.uk/co-production-in-commissioning-tool

Appendix ten – Wiltshire People First

Wiltshire People 1st

Speaking Up for Ourselves - Promoting the Rights and Inclusion of People with Learning Disabilities in Wiltshire

About Wiltshire People 1st

Wiltshire People 1st is a user-led self-advocacy organisation that promotes the rights and inclusion of young people and adults with learning disabilities, autism and those with communication needs, across the county.

We do this in a number of ways including running monthly Speaking Up Groups, Young People's Groups, supporting members to take part in consultations, facillitating their attendence in Council and other agencies' meetings, information and training workshops, conferences etc. We co-produce the LD Partnership Board.

To enhance our members' quality of life, with small grants from Comic Relief and the Lottery have we run creative art and dance sessions which our members greatly enjoy. In 2014 we received funding from the Heritage Lottery for our Oral History Project 'Our Lives, Our History'.

The Management Committee of people with learning disabilities works closely with the Director to plan and steer the work, including staffing and finance. A small team of experienced part-time advocacy project workers provides a full range of support services including organising meetings, arranging transport and making information available in easy read accessible formats.

WPF Members are aged from 16 to 65+ and many also have visual and mobility impairments or do not use words to communicate. To support our members' specific communication needs and enable them to participate effectively, we use a range of methods including Makaton signing, easy read information, picture passports, art/graphic facillitation and other media including video, newsletters and website.

In June this year, Wiltshire People 1st celebrated its 21st birthday with a special event at the Trowbridge Rugby Cub.

Our core work is funded by Wiltshire Council. In the past we also received funding from the PCT and the LD Development Funds.

Lack of accessible, easy to understand information makes it difficult for people to express themselves and get their voices heard, as does lack of the independent advocacy and support needed to access services and make decisions.

Independent self-advocacy as provided by Wiltshire People 1st is an important way for people with a learning disability to have more choice and control in their lives.

The government would like everybody with a learning disability who wants advocacy to have access to it, including local user-led self-advocacy.

Wiltshire People 1st

User Engagement Review

The Council and CCG are considering options for the provision of user-led organisations and user engagement in the future. This is in the context of the need to protect the important functions of involvement and engagement but also to ensure efficiency and best value for the Council, and to reduce any potential duplication. We would therefore like to hear from the Boards of all 4 organisations about any thoughts/ideas for the future.

Response - the Future of User Engagement in Wiltshire?

Our understanding of what we are being invited to address:

How should the Council/CCG fund user engagement that provides best value and meets the support needs of all sections of the the community including disabled people? What is the value of user led organisations (ULOs) and how do they help with these aims?

Listed below are a number of ideas that have been suggested by our Management Committee and from the conversation with Commissioners. For each of these options we set out potential advantages and disadvantages from our perspective.

1. Commissioners continue to pump prime core functions, through *grant funding*, the existing local ULOs to support their development and consider enabling these ULOs to apply for tenders to local services under a certain value.

   The Council/CCG benefits from the wealth of knowledge and expertise built up by the 3 ULOs and demonstrates its commitment to coproduction, enacting the public sector duty of the Equality Act and helps meet the intentions of the Care Act 2014 and Transforming Care agendas etc. With clearly defined commissioning strategies in place, any potential for overlap in UE can be addressed by the council through service agreements.

   Service users/disabled people have confidence in their own organisations, through the continued funding of their ULOs they are seen to be valued, the expertise and work they do is respected, strengthening relationships with the Council and its partners, through co-production etc. Co-production enables ULOs to be viewed as critical friends, providing constructive feedback to council for service improvements.

2 Putting all or some of the UE functions of existing ULOs out to public tender, thereby inviting interest from national providers or large non user-led charities.

   The successful bidder may not be local, will lack the knowledge of the area, or expertise and will take time to deliver. Moreover new providers will need to earn the trust and confidence of local disabled people, particularly people with learning disability who, in the large majority, do not like change and tend to

work with people they know well. The changeover of the general advocacy contract to the new provider illustrates this point.

3 Simplifying things by funding only one User Led Organisation and streamlining the commissioning of UE generally.

This option denies people choice, limits opportunities, reduces expertise and knowledge in specific issues or impairment needs; has potential to create conflict with other ULOs who may no longer be funded by the LA but will, in all likelihood, still be on the scene working in the background providing a limited service and challenge on behalf of their members.

If there is a clear policy and commissioning strategy in place that has been co-produced with users, it could be argued that there is no need to do away with the valuable resources that currently exist but, working together, they can be reshaped and redefined so the LA and CCG are able to fulfil their duties efficiently.

4 HWW to take on all UE activities and/or sub-contracting specialist participation from ULOs.

This option may streamline UE and make it contractually more manageable for commissioners but it will not be user-led. HWW have always respected the specialist work WPF does and we have a good record in working together on a number of initiatives, where we support our members to give their views and feed into the strategic remit of HW. This avoids any duplication and is mutually of value.

We suggest that the Council considers the social value of current and future provision, by acknowledging that good procurement is not just about price but meeting the needs of the local community and social objectives.

Wiltshire has a strong history of user engagement and has shown its commitment through the funding of three user-led organisations. By the very nature of being user-led, each of the three organisations fulfils elements of the user involvement/ engagement function. This is not to say that there is necessarily duplication in engagement activities, but that current provision offers a choice to those who need a service to which they can relate or best addresses their specific needs.

Wiltshire People 1st represents a particularly disadvantaged group of people, who historically have been excluded by society more than any other, and denied a voice. We believe that all people with a learning disability are people first, with the right to have their voices heard, to lead their lives like any other with the same opportunities and responsibilities and to be treated with dignity and respect.

3

The skills and knowledge of Wiltshire People 1st self-advocacy are founded on the core principle that people with learning disabilities are entitled to the same aspirations and life chances as other citizens. Our strength comes from the lived experience of our members and the trust built up over twenty years, providing a unique service to and with our users/members.

We advocate that the core functions of WPF should continue to be funded, to enable people with learning disabilities to play a key part in the user engagement process and to achieve the things that are important to them: housing, good health care, employment, getting out and about doing meaningful things in the day and being part of their local communities.

Self-advocacy and communication support is vital to meaningful UE. Without the skilled support and trust that WPF provides, people with learning disabilities will be further disadvantaged.

The Role of DPULOs

The government recognizes that Disabled People's User Led Organisations (DPULOs) have an important role to play in giving disabled people a stronger voice in the local community, providing peer support in health and social care, employment and volunteering. It puts an obligation on local authorities to fund one or more ULOs in each area. (2004)

The benefits of supporting ULOs through commissioning have been acknowledged:

- ULOs are a key component in delivering personalisation and transforming care outcomes,
- strong ULOs help commissioners tackle inequality, build social capital, contribute to prevention,
- because they are rooted in the local community they are responsive to the needs of that community and accountable to them,
- ULOs share common values of choice, involvement and human rights
- the essential features of a ULO are that it is run and controlled by service users, promotes the social model and independent living, and provides peer support,
- commissioners can help ULOs by creating a level playing field and making their processes more accessible.

Other models

Wiltshire is not alone in having more than one ULO.

Hampshire has funded several large, well established ULOs that have long associations with the local authority and health and social care providers, where the different organisations work together to provide a forum for disabled voices to be heard and influence policy and service provision. This model encourages wider participation and avoids potential for duplication.

Devon also has a number of user-led organisations whose CEOs work closely with other VCS (not user-led) groups under an umbrella or consortium arrangement, whereby key ULOs receive core funding to ensure capacity, but are able to bid for tenders and other commissioned work which comes via the consortia board.

This model offers potential to share expertise and some back office functions as well as widening engagement opportunities. However, this requires a willingness to work together for the benefit of the wider population, and takes time and commitment of stakeholders to develop.

In summary . . .

In line with government policy and in order to develop services more appropriate to the real needs of people who have been most disadvantaged and are generally invisible in soicety, over the past two decades Wiltshire has had a proud record of listening to users, through the development of local, independent user-led organisations. With our base in the lived experience of people with learning disabilities, WPF has developed a wealth of expertise in providing services that are responsive to the communication and support needs of users.

Our members in line with People 1st national, feel that only an organisation led by people with learning disabilities, that focuses on the issues important to them, rather than the wider constituency of disabled people, can express their needs and ensure that services are delivered in an appropriate manner.

"Being part of Wiltshire People 1st has helped me to speak up and given me confidence. It has helped me with reading and learning new things like how to do research for our history project and the talks we have each month, like how to keeping healthy and being safe....Coming to the meetings has helped me get out and about and I have enjoyed meeting new staff and people over the years who support me to speak up or help me to do things for myself" (L a member of WPF)

"J always enjoys going to the Wiltshire People 1st speaking up group. We appreciate him being taken and returned home and it gives us some time to ourselves.Wiltshire People 1st are always helpful and reliable, and their magazine helps us all, as J has no speech".

(parent carer).

"In recent years Angie and her team have worked hard to support a really innovative and important initiative training our social work students. It has led to members of Wiltshire People First undertaking assessments of our first year students interpersonal skills. It is probably one of the only examples of a project where service users get to undertake an assessment of social workers!

It is a good example of how the service empowers its members, through training and support they have really boosted their members confidence to undertake this role and this has also developed their self-esteem. Wiltshire People First are a local user-led organisation that really brings people together and encourages and supports their members personal development. I fully support the work they do and urge you to continue to support their work and secure their funding". (Dr Justin Rogers, lecturer, University of Bath).

WPF recognises that the Council has a duty to provide services efficiently, but other LAs have demonstrated that this can be done through more than one local user-led organisation. Wiltshire People 1st emphasizes the importance of maintaining its funding so that it can continue to provide the valued and much needed services to our members and others. We feel it would be a retrograde step to lose the independence, trust and expertise that WPF have built up through dedication and commitment to listening and working with/for members.

We currently enjoy good working relationships with other ULOs in Wiltshire and are happy to work more closely together, but we are convinced that the needs and voices of people with learning disabilities are distinct and must not be lost in future provision.

Angie Carmichael, Director Wiltshire People 1st
on behalf of the Management Committee

angie@wiltshirepeople1st.org.uk

Appendix eleven – Wiltshire and Swindon Users Network

Wiltshire and Swindon Users' Network

Independent Living Centre

St George's Road

Semington

nr Trowbridge

Wiltshire BA14 6JQ

31st July 2017

Adult Health and Social Care User Voice Consultation

Thank you for the opportunity to be part of discussions around protecting the important functions of involvement and engagement with service users, while ensuring efficiency and avoiding duplication in the coming years, through a user led organisation.

We believe that over these past 25 years WSUN has proved to be proactive within the community and a conduit for the voices of people who use both health and social care services, to be heard. Through co-production with our commissioners and other organisations in Wiltshire, we have been committed to ensuring that service users are part of the conception, design and steering of policies that affect them. This is based on the belief that those who receive a service or who are the focus of a strategy are best placed to help design it and need to be involved at the very beginning of the process.

We have recognised the restraint on budgets and the need to be cost effective and over the last three years have reduced our costs across our contracts and returned funds to both the Council and Clinical Commissioning Group. One way of achieving this has been by finding free resources. Some examples of are, having meetings in community hubs, at local fire stations and staff outreaching to where people already meet e.g. luncheon clubs and more condition specific groups like stroke clubs.

We have also recognised the need to ensure the service we offer has not decreased and the voices of those we represent are still heard. This has been challenging at times, but by developing innovative ways of engaging with people, our membership has both increased and changed. One way we have achieved this is by our Outreach Workers going out into the communities, getting to know people and what is, or is not happening for them and enabling trust to be built up.

We continue to have a large membership across Wiltshire who identify as having physical or sensory impairments, mental health issues, learning disabilities, being on the autistic spectrum, long term conditions, complex needs and older people, many of whom are also living with these same conditions which may include Dementia. Many of these are in effect the most vulnerable residents of Wiltshire. We have also engaged with and continue to develop relationships with other vulnerable hard to reach groups, people who are homeless and those that are part of the river community. With all our members we believe in a holistic approach where it is not solely about the vulnerability or the condition itself. We believe in a person centred approach and support people around all aspects of their lives.

Our members and staff have been involved in looking at how we can assist communities to build "community resilience" These are people with identified needs, goals and aspirations and not necessarily geographical communities. Examples of these are our Memory Groups and Our Time to Talk Group which are independent and user led with peer support and backing from WSUN.

Our very experienced staff group engage with many of the most vulnerable and isolated residents, sometimes over a long period to establish trust. There is an increasingly skilled Management Committee which takes an active part in the work of WSUN. The Customer Reference Group is an excellent example of members providing peer support for vulnerable people, undertaking surveys for Wiltshire Council in Sheltered Housing schemes and in their own homes when domiciliary care is provided. As an independent organisation service users are able to be open and honest with us about the service they are receiving which can then be used to influence change. The WSUN Safeguarding Reference Group is another example of members sharing their experiences in order to improve outcomes for vulnerable people who may be at risk in Wiltshire.

WSUN recognises the need to avoid duplication but would argue that for our more vulnerable members, main stream approaches used for the public in general are not always suitable and their voices may not be heard.
We believe there is a distinction between the valuable work carried out by other organisations i.e. Healthwatch with the general public, and the more individual support we give to the most vulnerable and hard to reach Wiltshire residents; those that require the most support to be heard. We have always been happy to work with other groups and this last year worked with over 100 different organisations.

WSUN has produced a 3-year strategy which recognises that we need to seek additional funding to take our identified activities forward and to ensure that we, as a User Led Organisation will continue for the next 25 years. Core funding from the Wiltshire Council and the CCG would be invaluable to enable this to happen, enabling us to maintain our membership and bring additional funds in to support the work of the Council and Clinical Commissioning Group.

It has also been agreed by the Management Committee that we will be changing our operational name to Wiltshire Service Users Network as we no longer have funding from or input into Swindon Borough Council. This will be taken to our AGM to be ratified in October.

Enclosed with this letter is a copy of the summarised version of our 3-year strategy and a copy of our Annual Report 2016-17 which will give you more detail and which the Management Committee Members are happy for you to use.

Finally, we believe that bringing the most vulnerable into the forum is the value and expertise of WSUN and we will continue to do this as a User Led Organisation in the future in Wiltshire.

On behalf of all Members of the Management Committee.

Yours Sincerely

Diane Gooch
Chair, Wiltshire and Swindon User's Network

WSUN Three year strategy

Wiltshire and Swindon Users' Network (WSUN) was originally established in 1991, a service user, led not for profit organisation limited by guarantee. Its purpose continues to be the engagement with and empowerment of people individually and in groups, to actively participate in improving the services they require to maintain or improve the quality of their own lives. WSUN is proactive within the community, facilitating individual learning and helping people develop personal skills for acting as agents of change for both health and social care as well as other services they may receive.

WSUN will continue to develop and change to work with local individuals and organisations, providing a unique contribution as a partner. Together these partnership arrangements amongst agencies with differing responsibilities and skills, offer a real opportunity for improving the effectiveness and efficiency of services across Wiltshire. WSUN's programmes of work are primarily targeted on specific issues that are often related to isolated or difficult to engage service users.

This Strategy is designed to be a framework for thinking through and enacting activities and contributions that are unique, cost efficient and empowering to the service users and to those providing services. This will ensure that WSUN continues to provide important and useful service user contributions in partnership with other organisations, working together to achieve better outcomes for those people in need. Better organisational outcomes are also a likely result. These are outcomes that could not be achieved by any single agency working independently. This strategy is designed to provide guidance on how the work of WSUN can be clearly understood and managed, how it will be well coordinated and effective without duplication of effort or resources.

WSUN will always

- Work with a flexible *person-centred* approach
- Actively avoid duplication of effort or resource when engaging the public on health and social care matters

- Promote the development of the service users' voice in relation to service design and performance
- Develop and promote opportunities for influencing commissioning and practice predominantly but not exclusively in health and social care settings
- Develop peer support opportunities and self-advocacy in relation to services in Wiltshire/B&NES and surrounding areas
- Promote and support the unique monitoring and evaluation contribution of service users
- Directly engage and empower individuals and groups that are difficult to engage including:
    - People with mental health experiences
    - People with a physical disability
    - People on the autistic spectrum
    - People with sensory impairments
    - People with learning disabilities
    - People with long term conditions
    - Older people
    - People with complex needs
    - Others isolated by location or circumstances

WSUN will continue to support service users to play an active part in:

- Wiltshire Service User and Carer Safeguarding Reference Group
- Wiltshire Autism Forum
- Wiltshire Mental Health and Wellbeing Board

WSUN will continue to provide consultation events, workshops and focus groups to:

- Address issues raised by members
- Address issues raised by commissioners

Project	Objective	Outcome
Independent Travel Support Wiltshire and B&NES	The Wiltshire Independent Travel Support Project was developed by service users to help address the barriers to transport for people with disabilities. B&NES Travel Support was developed to provide travel support and information to young people in education who are identified by Bath and North East Somerset council as currently accessing provided transport.	• Individuals are able to travel independently on one important route, some service users are able to transfer this knowledge to other routes. • Skills gained can include planning a journey, road safety, telling the time, using money or a bus pass, personal safety, improved social interaction. • *Increased confidence and independence.* • Parents / guardians more accepting of the idea that travel support allows young people to gain confidence and independence and therefore there is less reliance on provided transport.

Mental Health First Aid	To provide young adults and those supporting them with one and two day workshops to:- • Identify, understand and help a person who may be developing a mental health issue. • Enable young adults to mentally prepare themselves for managing the stress of college/University, • Improve their life chances, build their self-esteem and prevent/reduce the need for medical intervention.. • Enable them to understand the signs leading into a mental health issue • Manage an issue when this happens • Support other people with mental health issues.	• Improved mental health resilience. • Reduced stigma surrounding mental health issues. • Greater confidence when requesting help for emerging mental health issue. • Increased confidence in supporting others. • Reduction of incidents of self-injury. • Greater awareness of anxiety and stress issues. • Practical skills to support someone experiencing panic attacks. • Reduced dependency on statutory services. • Reduction in the number of young people being registered as Not in Education, Employment or Full time Training (NEET) due to mental health issues.
Memory Groups	To set up, develop and establish Memory Loss Groups in specific communities across Wiltshire and the wider region. This is in order to provide a social venue, meeting on a regular basis for anyone in that community who has a form of memory loss or who cares for someone with a memory loss. To use as models the three already established groups in Wiltshire.	• Reduced social isolation • Peer support – people with memory loss and their carers can share their experiences and frustrations and support each other. • Signposting to other organisations • More active population – members supported by sports and other professionals to take part in sports sessions and dancing • Community links and greater community understanding • Increased volunteering opportunities

Action Research (Qualitative Research) 'Action Research' is a specific, systematic and disciplined investigation of an identified activity or service for the purpose of facilitating change. With action research, the researcher is an active participant in the change process, becoming an enabler, a facilitator. A communicator and an agent of the change required.	**Action Research (Qualitative Research)** To develop and undertake collection of data through: Easy to understand questionnaires that can be used as postal or on-line surveys to provide inexpensive access to important qualitative data that is easy to administer and analyse. Semi-Structured Interviews, as a well-established technique for accessing more complex qualitative data, also suitable for quantitative data collection. The printed questions are the same as the questions on the online survey. Acting as guides to the interviewer, who asks the questions as they are written, and then records the responses. These responses may be simple or are often more detailed responses that require further questions from the interviewer to clarify the initial response more fully.	• To provide independent, assured, consistent and benchmarkable local data on a particular service • To support transparency and accountability, enabling people to make better choices about their care or support • To help identify areas where outcomes can be improved in a very challenging financial climate • To provide a climate where Service users feel listened to and valued
Access Audits	To offer to businesses, community organisations, regional and national organisations a complete accessibility audit for any of their premises to ensure that they meet any disability access requirements and that they provide all the necessary requisites for people who have disabilities to access and function in those premises, be they visitors or employees. The audit takes the form of an accessibility survey of a client's current premises to inform how well the premises meet the needs of people with disabilities and to provide a list of suggestions to improve that accessibility OR The audit is on a larger scale with WSUN being involved in a new build project so that accessibility issues can be accommodated before premises are built.	

Monitoring of Services by the Customer Reference Group (CRG)	The CRG is made up of WSUN members who are users of services, tenants of sheltered housing, informal carers and retired health and social care professionals. Members of the CRG carry out independent monitoring of social care services in Wiltshire, these have included H2LAH domiciliary care service and sheltered housing schemes This is achieved by conducting individual telephone interviews with customers receiving these services, meeting with customers on an individual basis, talking to residents and tenants in groups and by offering customers the opportunity to complete their own monitoring forms.	• To provide independent, assured, consistent and benchmarkable local data on a particular service • To support transparency and accountability, enabling people to make better choices about their care. • To help identify areas where outcomes can be improved in a very challenging financial climate • To provide a climate where Service users feel listened to and valued
Creative Therapies (Proposed Project)	Participants, with the assistance of professional artists,through their own creativity, will build confidence, self esteem and raise aspirations for their futures. By working together as a group this will aid their recovery and develop their sense of wellbeing. Participants will benefit from peer support and by valuing each other's contributions at a level they are happy and comfortable with. The creative pieces produced will reflect their own experiences and they will be able to share these in a safe and supported environment. WSUN also plans to find volunteers from the service user group who will act mentors to others as the project develops. We will involve service users at every level of the project including assisting to curate the final exhibition enabling people to learn new skills and giving them a sense of ownership of the project.	• Improved mental health and wellbeing is associated with a range of better outcomes for people. These include improved physical health and life expectancy, better educational achievement, employment rates and reduced risky behaviours, such as smoking and alcohol misuse • Challenge the community's perception of mental health • Use art to increase the communities understanding and provide information about mental health

	We also aim to share participants developing work with the local community and hope to challenge people's attitudes and perceptions around mental health through utilising community spaces such as the Local campuses and libraries. Through the involvement with other organisations we would provide information to the community and promote the importance of good mental wellbeing as well as helping to tackle mental health stigma and discrimination. With one in four of us likely to experience mental health problems at some point in our lives, WSUN would like to use the Arts to stimulate discussion and increase mental health awareness and understanding.	

Annex 12 -

Summary of Responses to the Wiltshire Council Adult Health & Social Care User Voice Consultation

August 2017

Wiltshire People 1st was asked by the Council, to circulate a survey to its members and those with learning disabilities/difficulties, they were in contact with. Similar requests were made to other ULOs.

The timing over the summer holiday period and the nature of the consultation made it difficult for WPF to run a focus or Speaking Up Groups, as we would usually do, in order to facilitate the widest involvement and response to such consultations.

However, we endeavoured to provide support where possible. For example, we sent out the surveys with stamped addressed envelopes and offered assistance to those who requested it.

Seven people asked us to help them complete the survey over the telephone, they said that they did not understand the questions or were unable to read.

We enquired how people were getting on with the forms, some members told us that their care worker was helping them as they did not understand the questions.* *many members felt confused, they had difficulty distinguishing between personal care type support provided in their homes, to other forms of support relevant to the survey - assisting with consultations and meetings.*

One member told us that their care supporter had said she was not allowed to write additional comments on the form and had tippexed them out. She did not think that was right as she had important things she wanted to say.

8 members came into the office and we supported them in a small group to fill in the form. They also said they did not understand the questions and the survey was not in 'good easy read'.

In total, 38 adults with learning disabilities and or autism, returned the completed forms to Wiltshire People 1st or handed them in to us.

The completed surveys have been forwarded on to the Council to be included in their data collection and analysis.

Please note that there were two versions of the survey, the version we sent out to members was the first version, the second version had more questions/classifications. This needs to be accounted for in Councils final analysis.

This is confusing and could lead to bias. It is recommended that ULOs and people who use services coproduce consultation surveys and assist with easy read versions.

Here is a summary of the key responses.

1. **Have you ever been given the chance to say what you think about the services you receive?**

30 people ticked yes

5 ticked no

3 did not respond to this question

4 people commented that they had been able to give their views through attending meetings held by Wiltshire People 1st.

1 person commented that they had not had the opportunity to comment on the range of Wiltshire Council services, not just care.

2. **Which of the following ways have you given your views on the services you are receiving or have used?**

25 people ticked that they had given their views by completing a survey about the services they receive.

22 people commented that they would provide feed back to their nominated support worker (social care worker).

21 people ticked they had attended a focus group meeting.

19 people had attended a workshop to give their views on a particular issue.

18 people had expressed their views by talking directly with their service provider.

12 had attended a public meeting to give their views.

12 people had visited other services to see if they working well for the people they support, *8 of these through WPF Quality Checkers*.

9 people had attended a Partnership Board.

9 people had been involved in user testing. *Via WPF testing the YCYS website with HWW*

7 people had given their views via a telephone interview.

4 people had helped with a Tender evaluation.

1 person had given their views via social media.

15 of those people who replied, ticked that Wiltshire People 1st had helped them to understand or express their views.

3. **Would you like to have the chance from time to time to give feedback in a structured way (via a survey/feedback form or face to face conversation) about the service you receive?**

24 ticked that they would like to have a chance, *or already did*, give feedback in a structured way.

3 of the 24 who ticked yes, expressed a preference for face to face feedback.

6 people ticked they did not want to give structured feedback.

8 people did not respond to this question.

4. **If you wanted to give your view in the future, which way would be easiest for you?** People gave more than one answer.

28 people wanted to be part of a group of people, similar to themselves, to provide a group response.

24 people ticked by post.

18 ticked the easiest way would be to speak directly to the care service provider.

17 people ticked by speaking to a health or social care professional.

12 people ticked they would go online to complete an email survey or feedback form,

7 people would use a complaints process.

2 people would use social media.

5 people ticked other ways – of these

1 person ticked email, 2 people ticked face to face, 1 wanted a supporter while 1 commented that they would choose to use the Speaking Up Group and Management Committee meetings at Wiltshire People 1st.

4 people would not be interested in giving structured feedback in this way.

5 people ticked they would like the involvement of Wiltshire People 1st to help them give feedback.

5. **What kind of support would help you give your view if you felt you wanted to?**

34 people ticked that they needed help to fill in forms including 1 person who

24 people ticked that bringing their own Care/Support worker would help them give their views. However 1 of the 24 ticked they did not need support from a Care /Support worker as they had help from Wiltshire People 1st.

22 people ticked that they needed support to communicate their views.

21 people wanted support from family or a friend

13 people ticked they would like general support provided at the event including 1 person who ticked that they did not understand the questions sometimes and that Wiltshire People 1st help her.

5 people made comments about other types of support including 1 person who wanted a face to face conversation with Wiltshire Council.

1 person wantticked 1-2-1 support, 1 person needed a screen reader to read her computer.

1 person ticked that they needed no support.

2 people commented that they would benefit from help from a Wiltshire People 1st Advocacy Supporter.

6. **There are organisations that help people get involved and tell us what they think about adult social care and health work and services. Which organisations have you worked with or received support from in the last two years? Please all that apply.**

38 people ticked Wiltshire people 1st including 2 people who ticked they used Wiltshire People 1st the most and 1 person who ticked Wiltshire People 1st Speaking Up group.

21 people ticked Wiltshire Council. *(Some told WPF they ticked this box as WC paid for their care but had not been to council run meetings).*

6 people ticked Wiltshire and Swindon Users Network.

5 people ticked Healthwatch Wiltshire.

5 people ticked Wiltshire Centre for Independent Living.

6 people mentioned other organisations/ support such as family, Friends Link, Monday Wednesday Club, Shine, support workers at home, local MP and a care agency.

7. **Thinking of those organisations above who help people get involved in**

their services, what do you think is the most important part of their work? Please up to three choices below only.

34 people ticked that it was important that organisations make the voice of users heard including 2 people who ticked that the Wiltshire People 1st Speaking Up Groups help people make their voice heard the most.

25 people ticked that it was important to enable people to meet and make friends and provide a chance to socialise including one person who said she did this at Wiltshire people 1st meetings.

24 people felt that it was important that organisations enable people with similar experiences to meet.

20 people ticked that organisations should focus on getting users better information and advice.

15 people ticked that it was important that organisations focus on making a difference to the local community.

14 people ticked that it was important that organisations help to improve the local services on offer.

1 person ticked organisations should be providing a chance to get to know who to talk to and get involved in the local community if needed it.

8. **If you could change one thing about how you make your views known, what would it be?**

A wide variety of points made in response to this question.

2 people did not want any changes.

2 people wanted more symbols and pictures to be used and any official letters to be in an easy read format. proper easy read.

1 person wanted this actual consultation to beredone so that it was easier to understand as they felt the consultation was confusing.

1 person wanted more time to fill this form (WC user voice consultation) in and for speakers to use less jargon in meetings and presentations.

2 people wanted to be able to meet the Council including 1 person who wanted to be able to go to a meeting at the Council Office Chippenham to give her views on the crossing on Malmesbury Road, Chippenham.

1 person wanted a care support worker.

3 people wanted more meetings. 1 person added that she went to 2 (social/activity) groups but wanted to get out more and be able to attend more groups.

1 person wanted to be listened to.

1 person wanted to speak out.

1 person preferred writing a letter to a service department as a phone call could cause confusion.

1 person wanted to be a part of Parliament.

Another person wanted more paid jobs.

1 person commented that her voice is not loud and that she valued having someone to say what she thinks about things.

1 person wanted to be able to rap her views.

1 person commented,' My view is I want to get the right services for disabled people I think there should be a service by which you can make your views on social work known.'

There a range of comments about the work of Wiltshire People 1st. These included the following:

'I like coming to Wiltshire People 1st and letting them help me give my views.'

'I prefer Wiltshire People 1st to support me at meetings and to help me understand.'

'Wiltshire People 1st need more money to do more meetings. Wiltshire People 1st is an important group.'

9. What is your age?

38 people completed the form:

4 ticked 18-24 years old

10 ticked 25 -34 years old

5 ticked 35-44 years old

11 ticked 45- 54 years old

7 ticked 55-64 years old

1 ticked 65-74 years old

10. Are you male or female?

14 ticked male.

23 ticked female.

1 person did not respond to the question.

11. What is your primary need/disability?

6 people ticked that they have a physical disability or mobility issue.

2 people ticked they have a problem with their hearing.

4 people ticked that they have a problem with their vision.

4 people ticked that autism was their primary issue.

34 people ticked that a Learning Disability was their primary need.

3 ticked Mental Health.

2 ticked they had no disability, but known to use LD services.

1 person ticked they had a problem with their right hand.

1 person ticked she has Down's Syndrome.

Nobody ticked they had a communication problem. However this category was not on the original version of the consultation which we sent out and the majority of respondents completed, hence the result, please note - this neteds to be accounted for in the findings analysis.

3 people ticked that their primary needwas being an older person.

1 of the 3 ticked that they need people to explain things in a way that they could understand. However, this category was also not on the initial version of the consultation, see above, which was sent to Wiltshire People 1st for members to complete. This difference needs to be accounted for in the final analysis.

12. What is your ethnic group?

37 people ticked that they were White, 3 White British.

2 people of those people ticked Black/African/ Caribbean / Black British even though they had also ticked White.

This is a summary of the collated responses.

Please contact Angie Carmichael, Director, Wiltshire People 1st if you require further information - angie@wilthsirepeople1st.org.uk

Annex 13

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Adult Health and Social Care User Voice Consultation Focus Group Report

WILTSHIRE AND SWINDON USER'S NETWORK

July 2017

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Peer Review Focus Group – Engagement Report

Introduction

In June 2017 Wiltshire Council launched a consultation to examine the experiences of people who use adult health and social care services around engagement. The definition of 'engagement' provided by the Council is 'the opportunity to have input into adult care work such as policy changes, strategies and service development by, for example, completing surveys, attending workshops, and formal meetings'.

A number of contracts for User Led organisations will come to an end in 2018; Wiltshire and Swindon Users' Network, Wiltshire CIL and Wiltshire People First. In addition, HealthWatch Wiltshire's contract comes to an end in 2018. Wiltshire Council and the CCG have announced their intention to review commissioning intentions, procurement model and the total budget for user engagement and coproduction within adult care.

A consultation questionnaire was available on line from the 26th June until 14th August 2017.

The Management Committee of WSUN felt that it was important to offer members the opportunity to be able to comment on the consultation and a focus group event was arranged.

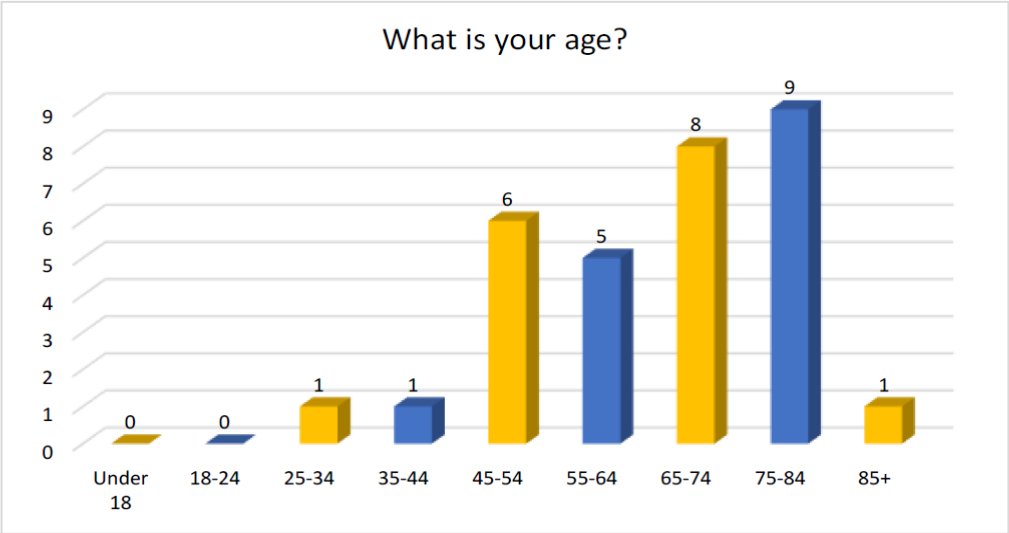
This report looks at the views of those service users who attended the focus group on 24th July 2017.

Engagement Method

The event took the form of a short presentation by Louise Rendle CEO WSUN. This was followed by round table discussions facilitated by WSUN's outreach workers.

Attendance

31 People who use Health and Social Care services attended. Two enablers were provided for support with personal care.


What is your age?
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8
7
6
5
4
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2
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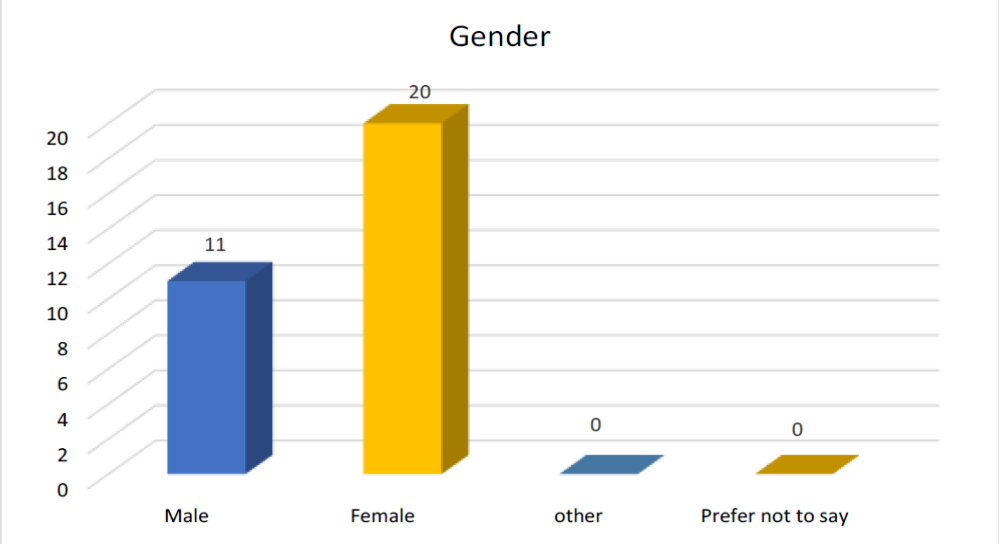
Under 18
18-24
25-34
35-44
45-54
55-64
65-74
75-84
85+


Gender
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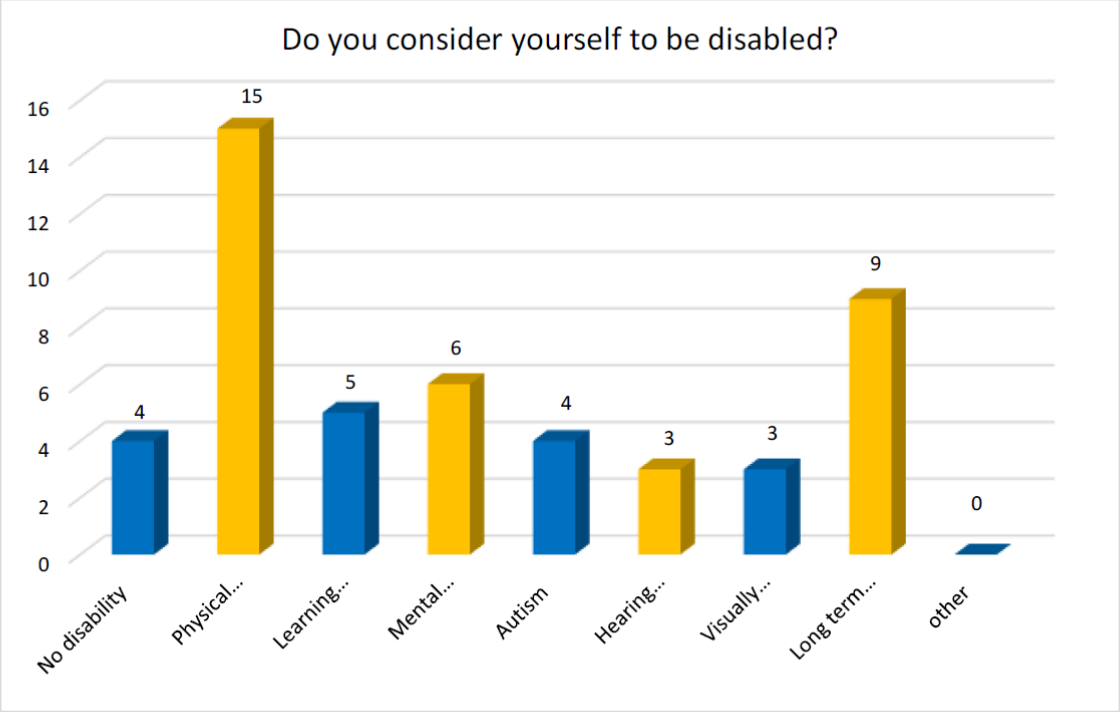

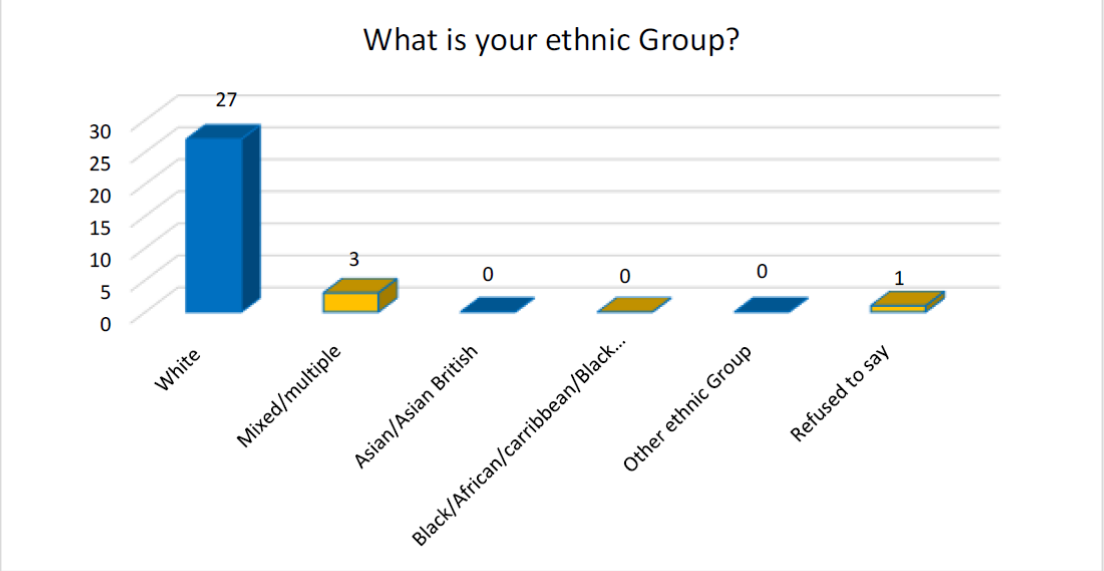

Participants often expressed their opinions in very clear terms, and these statements appear throughout this report in ***bold blue text***.

4

Participants were asked the following questions based on the on-line consultation document -

1. **Have you been given an opportunity to comment on services you receive?**

2. **In what ways have you been able to give your views about services you receive?**

3. **If No (Question 1) Would you like the opportunity from time to time to comment?**

4. **If you wanted to give feedback, what ways would you find the easiest?**

5. **What kind of support do you need to be able to give your views?**

6. **There are organisations that help people get involved and give their views. Which ones have you received support from in the last two years?**

7. **Thinking about those organisations who have helped you feed in your views, what are the most important aspects of their work?**

- **Making sure the voice of service users is heard**
- **Improving local services on offer**
- **Getting better information and advice**
- **Enabling people with similar experiences to meet together**
- **Meeting and making friends and a chance to socialise**
- **Making a difference to the local community**
- **Other**

5

8. **If there is one thing you would like to change about how you can feed in your views (make your views known), what would it be?**

In addition, participants were asked;

Thinking about WSUN specifically, what do you find valuable about being part of the membership?
Is there anything that could be improved?

What people said

1. **Have you been given an opportunity to comment on services you receive?**

   75% of people answered that 'yes' they had been given an opportunity, whilst 20% answered 'no' and 5% were unsure.

2. **In what ways have you been able to give your views about services you receive?**

   4 out of 5 tables said that they had completed questionnaires or surveys, in paper format (3 tables) or on-line (2 tables)– although people commented that they did not like the format of questionnaires as they were '***tick box exercises, that can be very leading' 'with no opportunity to expand on my answers'*** Some people commented that they did not have access to the internet or did not know how to use it.

   In total 3 tables spoke about attending consultation and information events;
   - 25th birthday wellbeing event (WSUN) x2 tables
   - World Café event (Mental health needs assessment) in Trowbridge (facilitated by WSUN) x2 tables
   - Fire service Wellbeing events

2 tables specifically mentioned using feedback forms at these events.

Peer Support Groups were also popular for feeding back;

- Our Time to Talk meeting (WSUN) x3 tables
- Amesbury Mental Health Group
- Memory Groups (WSUN)
- Local Mind groups

People sat on partnership boards and reference groups or were part of a specific group;

- Safeguarding Reference Group meeting (facilitated by WSUN)
- Autism forum (facilitated by WSUN)
- Community Care Forum
- Management Committee (WSUN) x 2 tables
- Customer Reference Group (WSUN) (Sheltered Housing) x2tables

Other ways in which participants had been engaged;

- Talking to Councillors
- As a member of an interview panel and tender
- Area Board x2 tables
- Patient participation Groups at GP surgeries
- Care providers linked to Housing support schemes
- Telephone interviews Re: H2L@H

3. **If No (Question 1) Would you like the opportunity from time to time to comment?**

The majority of people felt they would like to be able to comment on services.

4. **If you wanted to give feedback, what ways would you find the easiest?**

All 5 tables felt that group consultation, was the best way of being able to comment in a meaningful way. ***'Meetings like this are very good'***

Small focus groups were also popular especially if people were being consulted on a particular issue or topic.

Another service user would find it easier if it was 1:1 at home, as they struggle to get to meetings due to their long term condition and others said unless transport was provided they would not be able to get to meetings.

'Transport is an essential part for me, if you want me to be involved'

Two tables felt that face to face was the best method, ***'that way you are able to give more detail, get more information'*** and it was felt that feedback could be more ***'off the record'*** ***'independent'***. This worked well either at a consultation event or for structured interviews on a one to one basis.

Although some people spoke about postal or on-line questionnaires, the point was made again, that it was a ***'tick box exercise'.*** Service users also expressed the opinion that they felt that the people who designed the questionnaires, always seemed to assume that the public knew what they were talking about. ***'No jargon please'*** and again repeated that you couldn't add your own thoughts to tick boxes.

Participants discussed using websites/internet to feedback, although this was the most unpopular choice for many of the people (over 50% of those attending) due to lack of access & understanding, as well as the fact that ***'you do not get a***

response'. Service users asked if there was any way you could see how many other people had responded and what they were saying. ***'how do I know I am being listened to'***

2 people mentioned social media, although many service users expressed they did not use social media or were uncomfortable using it.

2 tables liked telephone interviews but only if they knew who the caller was. ***'No cold callers'***.

5. What kind of support do you need to be able to give your views?

People expressed the support they needed to attend a meeting, focus group or consultation included;

- Transport to events- 4 tables
- An enabler provided at the meeting to support with personal care and helping people to feel comfortable in their surroundings – 4 tables
- Accessible venues – 2 tables
- Timing of meetings; early mornings or later in the day, evenings are difficult for some people due to care packages and tiredness levels. Also accessible taxis are not available around school times.
- Plenty of notice in order that they can alert carers or family
- Skilled facilitators, to ensure that some people do not dominate and to support those people who are less confident.
- Clear speakers who don't use jargon.

- One table discussed that it was important that the attitudes of those involved in supporting people to give their views must facilitate and enable them. Also important was a long term relationship which helped ***'foster trust and confidence'*** and ***'a personal touch and understanding about my condition'***

Other areas that people felt were important were;

- Help to understand questions and the background behind the consultation or issue - 3 tables
- Help with form filling / help to write my feedback – 2 tables
- Easy to understand/ read information, with no jargon or 'Council speak' and help to interpret questions and language

6. **There are organisations that help people get involved and give their views. Which ones have you received support from in the last two years?**

WSUN including the Autism Forum - 27 people
Wiltshire Council including Area Boards - 5 people
Healthwatch - 1 person
Wiltshire CIL - 1 person

Others:
Patient Participation Group at GP's - 5 people
Age UK - 3 people
Housing providers - 2 people
Condition Specific Groups - 2 people
Wiltshire Mind - 1 person
Swan Advocacy - 1 person
Great Western Hospital Trust - 1 person
Wiltshire Carers - 1 person
Director of complaints RUH - 1 person

WSUN acknowledges that as this consultation / forum was arranged by WSUN, everyone who came were members or known to us. Therefore, we would expect a high response rate to question 6. However, people also commented that on the questionnaire there was no opportunity to say the frequency of contact with different organisations. For example, you may have been in contact with WSUN on 5 occasions and with another organisation once.

7. Thinking about those organisations who have helped you feed in your views, what are the most important aspects of their work? (Choose 3 of the following)

- **Making sure the voice of service users is heard**
- **Improving local services on offer**
- **Getting better information and advice**
- **Enabling people with similar experiences to meet together**
- **Meeting and making friends and a chance to socialise**
- **Making a difference to the local community**
- **Other**

All service users on all tables agreed that 'Making sure the voice of service users is heard' was the most important aspect.

4 out of the 5 tables felt that 'Getting better information and advice' was important.

4 out of the 5 tables felt that 'Making a difference to the local community' was important.

2 tables felt that 'Improving local services on offer' was one of the top three.

However, it must be noted that some people said that 'making a difference to the local community' and 'improving local services on offer' should be combined as one should follow the other.

8. **If there is one thing you would like to change about how you can feed in your views (make your views known), what would it be?**

All tables said they wanted feedback from the Council and the CCG. ***'feedback on our feedback' 'What are the outcomes following our involvement?' 'You said, we did!' 'A circle of change, if something doesn't change, why not?' 'A quick turnaround / response or even an acknowledgement'***

'Only ask us for our views if it's a genuine request'

'Real time surveys that show me how other people are responding'

'Change Area Board meetings so there is more input from the public'

'Regular local area groups to talk about local issues'

'More choice about ways to respond, not just on the website'

'We assume everyone can read and write!'

'Make us equal partners in the process'

'No jargon'

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Thinking about WSUN specifically, what do you find valuable about being part of the membership?

'A big advantage is their meetings and the transport being organised for us'

'WSUN is independent and can provide an independent voice for the most vulnerable service users'

'You know they are going to be there next month; they are consistently reliable'

'The knowledge and experience of WSUN is helpful'

'An independent, non-biased approach'

'WSUN enables people especially those with complex needs to feel comfortable and give their views'

'Very important that we are part of a membership organisation'

'Enables us to have information and therefore make informed choices'

'WSUN listens and we do not feel intimidated'

'WSUN is the whole package, invites, informs, facilitates, brings people together, has an open atmosphere, everyone welcomed and supported and above all people are treated equally'

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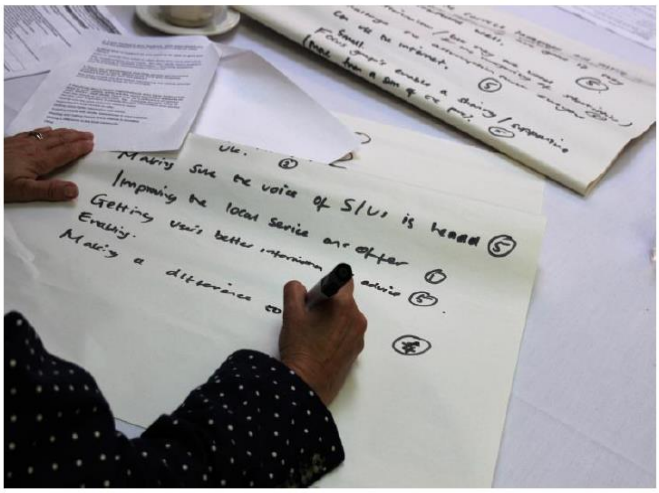
Is there anything that could be improved?

'More people should know about us (WSUN), members are the best people to do this!'

'WSUN needs to raise its profile, so more people can benefit'



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