

Area: Regional Service User Network

Evidence of practice

(narrative of previous model based on PMR data, uptake of service etc.)

Northern Ireland model for service user involvement

The following model was proposed by and agreed on by service users in a series of workshops across Northern Ireland during 2011-2012, aimed at identifying service users' needs:

- Establishment of a steering group with local service user representation to oversee the development of the model.
- Development of five local networks (coterminous with Trusts and DACTs) coordinated by a Network Support Service. The local networks would feed into one regional network.
- The specific services provided by the network support service will be agreed by the steering group, but would be likely to include the following:
 - Organise local network meetings;
 - Support new service user groups in the area;
 - Support service users to represent their own views and the views of other service users on relevant groups (e.g. Drug and Alcohol Coordination Teams; Naloxone Steering Group; Substitute Prescribing Steering Group; Bamford Drug and Alcohol Subgroup);
 - Provide information to service user groups (e.g. on relevant consultations or fundraising opportunities);
 - Provide support and advice around fundraising (not including actual fundraising activity);
 - Provide support and advice to services working in the substance misuse field on developing service user participation;
 - Coordination of training provision.

Overview of main areas from commissioning framework previous evidence review *(insert links to PHA D&A commissioning framework)*

Service user involvement

A national project carried out by the Joseph Rowntree Foundation with 126 service users found that service users highlighted two activities as central to making user involvement work. These are:

1. People being able to mutually support each other and work together to change things.
2. Having their experience, views and ideas heard.

Making user involvement work: supporting service user networking and knowledge. Joseph Rowntree Report 2006

<http://www.jrf.org.uk/publications/making-user-involvement-work-supporting-service-user-networking-and-knowledge>

Recovery from drug and alcohol dependence: an overview of the evidence. ACMD Advisory Council on the Misuse of Drugs. December 2012

<http://www.homeoffice.gov.uk/publications/agencies-public-bodies/acmd1/acmdrecovery>

Overview of new evidence base review *(key recommendations for consideration)*

PHE. Service user involvement. A guide for drug and alcohol commissioners, providers and service users (2015)

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/669061/Service-user-involvement-a-guide-for-drug-and-alcohol-commissioners-providers-and-service-users.pdf

D&A Evidence Scoping Template

Supports the current model of SUI and also discusses service user led projects, such as Peer Mentoring and Peer Advocacy.

Evidencing genuine co-production in the third sector. A Scottish Third Sector Research Forum evidence paper. May 2017

http://www.evaluationsupportscotland.org.uk/media/uploads/tsrf/evidencing_successful_co-production_in_the_third_sector_-_final.pdf

Stresses the importance of co-production

Guide to service user involvement and co-production. Clinks. March 2016

<https://www.clinks.org/publication/guide-service-user-involvement-and-co-production>

Stresses the importance of co-production

Substance Misuse Treatment Framework (SMTF) Service User Involvement. Welsh Government. July 2014

<https://gov.wales/sites/default/files/publications/2019-02/substance-misuse-treatment-framework-service-user-involvement.pdf>

Stresses the importance of co-production and recommends that staff in substance misuse services undergo training on what constitutes service user involvement, how it can be achieved and the importance of diversity and respect.

Systems, Not Structures - Changing Health and Social Care. DoHNI October 2016

<https://www.health-ni.gov.uk/sites/default/files/publications/health/expert-panel-full-report.pdf>

Stresses the importance of co-production, emphasises the difference between co-production and participation.

Personal and Public Involvement (PPI) and its impact PHA/PCC January 2017

<https://www.publichealth.hscni.net/publications/personal-and-public-involvement-ppi-and-its-impact>

Stresses the importance of evaluation and of training for HSC staff.

Any identified gaps

The current service user involvement approach is well supported by the evidence, but has not yet reached the stage of co-production or co-delivery of services. The service is currently beginning to work on these issues, but has no KPI's relating to this.

Future approach to reflect the evidence base

(e.g. Changes in evidence base / key recommendations / evidence of impact)

Recommend that KPIs are introduced around co-delivery of services (e.g. volunteering opportunities) and that the service is encouraged to develop work around co-production.

KPIs could include:

- development of a service user pathway so there is a clear focus on roles, processes, opportunities, resources, support requirements and individual exit strategy;
- the development of volunteering opportunities; this would put more of a focus on activity and involvement of some service users instead of providing representation at meetings;
- development of case studies, both written and videos, to support the promotion of the role / involvement of service users with service providers.