Beyond the ‘tick box’

Getting feedback from people who require support, their families and staff is important for assessing and improving a service, but the data needs to be valuable. Eve Kuhr Hersov and Sarah Maguire detail how one provider enhanced its annual user survey.

Listening to the views of people who require support and their staff and families provides evidence and insight that can lead to real change to a service, to the benefit of everyone.

But all too often service providers consult people via mechanisms like annual user surveys, which tend to end up being ‘tick box’ exercises that just fulfil a regulatory requirement and don’t provide real insights into how a service is viewed by people who use it.

Choice Support, a charity that provides support services to people with learning disabilities, mental health needs, physical disabilities and homeless people, used to run annual surveys like this. While the surveys were valued internally, the information gained from them had limited impact as a tool for change.

So the charity decided to change its approach. To that end it has worked with an independent consultant, Eve Kuhr Hersov, to develop methods of consultation to capture the voice, ideas and knowledge of individuals receiving support and the range of people who care for and about them.

Now, the consultation goes beyond box-ticking and the information it yields highlights good practice, identifies concerns and evidences trends that influence future plans; all factors that are beneficial to cost efficiency and quality of life for staff, families and people using the services.

A responsive process
Initially, Choice Support’s new annual user survey had three strands; a paper-based user-friendly questionnaire, regional meetings or forum discussions, and meeting people in their homes. After a year, this consultation process was expanded to include contacting families of people receiving support. This was carried out via telephone interviews, email, a survey and face-to-face meetings.

The paper-based questionnaire focused on gathering information around chosen themes. The other parts of the consultation listened to a wider range of issues voiced by people being supported, their families and Choice Support personnel including support workers, managers, administrative officers and trustees.

This responsive style meant that ideas and themes could be developed and followed up to help clarify specific needs within the organisation and in different regions. For instance, one significant development that grew out of the 2011 survey was designing a programme that employs family carers in the future monitoring of services. This is modelled on the established ‘Quality checkers’ programme that employ people who use services.

Each year a comprehensive report about the annual survey consultation has been produced, along with detailed regional summaries that serve as a framework for planning. Hersov also meets with managers, staff, trustees and people who use services to discuss the findings and to focus upon next steps. This collaborative and inclusive approach ensures that every year the survey is meaningful and fosters active and thoughtful participation; all of which contribute to securing valid and accurate results.

Thoughts and reflections
Themes
In the first year the annual survey identified five themes that gave a comprehensive overview of the lives and priorities of people receiving support and their relationship to the communities in which they lived:

- Changes in people’s lives
- Lifestyle and activity
- Community and neighbourhood
- Voluntary and paid work
- Support.
The results from the first year influenced the themes developed in the second year, which explored the following concepts:

**Your life and your community**
- What people look forward to, why they look forward to it and how often it happens
- Who are the people they know in the community, who comes to visit and whether they want more visits or contact
- Whether they are interested in having a volunteer involved in their life
- How often people go out, whether they want to go out more, what stops them going out and if there is a change from last year.

**Your support**
- Whether their support has changed and how they felt about any changes
- What they feel is the most important help they receive
- What they think would improve support.

**Happiness**
- Where and when are you happiest.

In the second year, the new questionnaire gathered more specific information about mobility, best individual communication methods and age. This addition had been discussed and endorsed by people using services and generated data that flagged up clear issues of concern. For instance, it highlighted that many individuals receiving services were becoming increasingly frail and dependent on visitors for their social stimulation; yet their most valued social contact was often with family members who were also growing increasingly frail and less able to visit.

**Outcomes**
Consulting with a range of people, including those with different roles and relationships and utilising a variety of methods to collect information boosted participation in the survey process. In addition, the consultation was personalised because of the emphasis given to the voice of people who use services through quoting their words in written reports and at meetings. This humanised the data and enabled people to more effectively ‘connect’ with it, understand the issues and influence staff practice.

Taking an interactive approach and continuing with the same independent consultant for a second year strengthened relationships, familiarity and trust, which meant that nuances and patterns were more easily drawn from the responses. Having met people at meetings and in their homes, and also having met managers, staff and families, and read through questionnaires the consultant developed clear impressions of morale, skills and communication in various service locations and regions and was then able to make service and region-specific recommendations. This feedback was not statistical but came ‘from the heart,’ and as such was challenging but honest in its delivery.

Managers found this approach refreshing – it was direct but not threatening and helped them formulate tangible plans. Hersov had already ‘translated’ how people were feeling and made it easy for managers to think in concrete rather than abstract terms about the issues that needed to be addressed. Sometimes this was simply being able to tell people about resources being used elsewhere or sharing good practice ideas.

Sharing information saves time, decreases isolation and doubt, boosts morale and can have positive cost benefits. For example, a single comment on a questionnaire created increased opportunity for leisure and integration while at the same time providing tremendous cost savings. In one region where many people were on a waiting list for swimming sessions at a special needs school that charged £40 per person for each session, it was discovered that a privately-operated local gym was suitable for people in wheelchairs and had an accessible swimming pool. This potentially offered a month of leisure activity for the same money that previously purchased a single session.

**Including family and the voice of staff**
One key outcome from including family members in the consultation was the degree of confusion experienced by families in regard to their understanding of how care packages are funded and who decides the type and amount of care provided. This chimes with the finding that many families are frustrated by local authority bureaucracy and are sensitive about their relationships with professionals.

Families mentioned that they often want to speak to staff but feel concerned about how their questions are perceived. Other families worry that they might appear to have ‘favourites’ among care personnel. Sharing these family viewpoints with Choice Support managers and staff highlighted the need to establish good mutual communication with families, paying close attention to the style and frequency of contact desired. Families have clear preferences about receiving emails, photos or having regular telephone contact and many find it easier to hear from a specific member of staff. Every family is reassured when they feel well informed and consulted; both of which convey respect.

Choice Support personnel also often provide a ‘voice’ for people with complex needs and including staff quotes in the consultation process recognises their important contribution. Gathering the collective thoughts of family and paid carers provides essential information that is a guide to obtaining the best outcomes for people who communicate without words.

**Summary thoughts**
Developing a responsive and inclusive consultation process that emphasises communication and co-operation and utilises a variety of methods to collect information helps organisations to operate and plan efficiently. This is achieved by recognising trends and identifying needs. But building effective relationships between everyone involved is paramount. Including everyone and listening to them boosts morale and participation. It also helps to develop and reinforce good practice and increases the accuracy of recommendations and plans for improving the lives of people who use services.

Ultimately, effective relationships are a ‘win-win’ strategy; they reduce stress and promote trust, all of which result in time and cost efficiencies that are a positive outcome for everyone.

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