

## **Examples of Bad Practice in Consultation**

*1/ The group I support is responsible for a code of professional conduct for ward rounds and similar meetings. It has been local Trust policy for a while, very imperfectly implemented. A bright young manager decided to re-write and update the code to make it more applicable to the Care Programme Approach and to put the revised code onto the Trust web-site. On the web-site he wanted it said that all the user groups across the Trust had been consulted on the code and were equally responsible for it. He thought that if he mentioned the ten years that my group had struggled to win a place for the code, the other groups might get jealous ! He didn't see that taking our true history away from the people in my group would have been a totalitarian act, and immensely damaging to everyone. Here was a new version of "Nurse Knows What's Good for You." When I protested in strong terms, a senior manager rang my supervisor and said : "We're having trouble with Rogan."*

*2/ The local Trust appears to favour Open Forums for services users in all the localities it covers. The locality managers seem to have no choice in the matter and feel obliged to hold them. The resultant Forum is stuffed full of managers who've been told to be there (although the service user "guests" are not forewarned of their presence). The managers sit in their rows, looking awkward, out of place and, from a user perspective, rather intimidating. The atmosphere is both fraught and frigid, as bad as the classic ward round (which the Trust has seeking to make less intimidating for the past several years). The Forum's agenda has been set by the locality manager who selects topics he thinks the users ought to know. Often the professionals present greatly outnumber the service users. The Trust Chair is there, taking notes, without having been introduced and without her presence, or her note-taking having been explained. She leaves early, also without explanation. The meeting is open and several people present are in a very disturbed state and clearly paranoid. The Chair's behaviour could have meant anything to them. If this were the eighteenth century and she visiting Bedlam, she would not have behaved much differently. But this is User Consultation in the twenty-first century and User Consultation is a Top-down Directive in a Command-Style Service. The managers do not feel empowered to talk to the Chair about her behaviour...*

*3/ The local senior manager attends, at our request, a locality-wide user meeting, on territory we have chosen and like. The agenda is ours, planned carefully in advance. The meeting's chair is held by the user groups. The senior manager knows that this is our preferred approach to consulting with the local Trust and the structure has actually been fought for quite intensely over several years (it entailed real fights with the local PCT Commissioner who was afraid she'd lose brownie points with the Strategic Health Authority for not having user reps in the local LIT – another horrendous bureaucratic number full of tension, falsity, paperwork and detailed specialist concerns. In the end the Strategic Health Authority accepted our user model for the LIT's user consultation - but these tiny victories are won at a certain personal cost – they are exhausting and leave scars and lead to a sense of utter futility).*

*At the beginning of this meeting, the senior manager paces up and down the room (everyone else is seated) pleading with the group to supply him with someone to act as user rep on the Trust's Employment Steering Group. It is chaired by the Trust Chair who likes to have one user rep from each of the areas covered by the Trust. And gets displeased if one isn't there. "I know that attending professional meetings is not how you like to work," says the poor unhappy manager. "But it really creates a problem for me if no one from this area turns up. Won't you send someone, just for me?"*

*4/ A user support worker was invited to a presentation on proposed new services for older people with mental health problems ; the presentation was highly technical and the worker left the event feeling no wiser - and even rather painfully inadequate. But the person who gave the presentation could say : "I involved service users in my presentation. Give me a star."*

*5/ Various service users were invited to the launch of a research project. A succession of highly cerebral presentations filled the afternoon, each with its power-point set of figures and graphs. The room was warm, the language impenetrable, and the string of presentations similar. All the service users were on various levels of medication and soon fell asleep (though they were not the only ones asleep). They received various negative looks, though no one said a thing. There's no little boy here foolish enough to shout, "This silly emperor is walking the corridors, the committee rooms and the conference halls stark naked." Instead, the research body which ran the event says : "we involved service users in our launch. Give us a star."*

*6/ The same research body helped to fund a website to be run by service-users, so that important developments in research could be disseminated in clear lay language that would encourage ground level interest and participation. But the imaginative user-inspired title for the users' own website proved unacceptable and the executive committee imposed an acronym invented by its chair who was a psychiatrist and was famous for his acronyms. A junior employee of the research body took over the web-site and at the public launch said "We want this to be a really genuine user web-site" [Give us a star].*

*7/ The staff team of a psychiatric centre based in the community were distraught. A senior manager had come to consult with the local service user community. She had told them that the popular locum centre manager was likely to be replaced soon by another manager due to return from maternity leave. The senior manager had said nothing of this to the locum manager herself or to the staff team. No stars are awarded for consulting with staff.*

*8/ Not so long ago, a user support worker somewhere in this country committed suicide. She was known to several people prominent in the national user movement.*

*As is common with holders of this kind of post, the worker herself had had experience of mental ill-health.*

*Not long before she killed herself, she was seen to be in profound and implacable conflict*

*with another user, a loner not supported by colleagues nor part of any formalised user group as such, who knew the system well enough to keep making complaints about her.*

*This situation cannot have helped her in her last few months. As people unused to power, and unable to deal with it, and being given a lot of space in which to flounder and hurt each other, continued their dance which ended in a suicide, local managers kept on opening their doors to the complaining loner, because a/ they felt that this constituted good consultation with users and b/ they probably felt they were in no position to refuse. But, to a degree none can now measure, this can only have increased the anxiety and sense of isolation of the support worker.*

*Soon after the death, someone of courage and integrity emerged to alert the local services that the loner who had pursued her had been found guilty in the past of sexually abusing young people with learning difficulties and was not trusted by fellow-service users, who knew of his activities. They were asking, why do the managers keep speaking to this man ? He doesn't speak for us.*

These are all true and recent stories. Concerning this last and most difficult one, I suggest that the best use we can make of it, perhaps the only good we can make of it, is not to seek to blame anyone in particular for its happening, but to learn from it so that everything possible is done across the services to ensure that service user consultation is made as safe as possible for the people who engage in it. And I have to say that it is my absolute conviction that as things stand, conditions are no safer for people than they were then, and the pressures on managers to take short cuts are even greater.