



Strategy selector table

A wide range of strategies are available for involving consumers. When planning for consumer participation, organisations may select among these strategies according to the type of service provided, the dimension and degree of participation desired, the resources available, and other characteristics of the agency and consumer group.



No matter what strategy you choose, acknowledging input and providing feedback about the impact and value of each person's contribution is essential.

The table below lists 47 types of strategies for increasing consumer participation, organised into 10

sections: Organisational development, Information, Everyday practice, Research, Groups, Consumer groups, Deliberative processes, Employment, Consumer representation, and Consumer Control.

The 'Ref.' column indicates where further information may be available. The abbreviation IS# refers to Information Sheets in this Kit, with further detail on strengths, weaknesses, resource requirements and implementation tips. The abbreviation RG followed by a page number refers to the Resource Guide document *Improving health services through consumer participation: a resource guide*, available online at: <http://www.participateinhealth.org.au/clearinghouse/#1>.

A. Organisational development

Participation strategy	Degree of participation	Key attributes	Ref.
Input into needs assessment process	Info seeking / consultation	Input may be requested by organisation using any of the info-seeking or consultation strategies listed here. If part of a regular cyclical planning process, can use standing committees with consumer reps.	IS#13 RG p.65
Networking	Consultation / partnership	Informal relationship-building with people or organisations who have common interests or goals. Build links to consumer organisations and advocacy groups.	IS#13 RG p.90
Negotiated partnership	Consultation / partnership	Consumers and providers work together to develop a written agreement as a basis for future CP processes. May be initiated by consumers. Requires clarity of objectives and good communication skills.	IS#13 RG p.88
Partnership of consumers and providers	Partnership	Structured cyclical planning process with specified role for consumers in collaborative decision-making with providers. Process and outcomes are a shared responsibility. Usually the result of years of development of CP and a strong consumer focus and culture in the organisation.	IS#13 RG p.92
Consumer input into organisation / team policy	Consultation	Formal and informal methods. Includes consumer representatives, management committees, planning groups, planning processes, policy development process. Includes consumer advocacy as 'outsiders' to a policy development process.	IS#13 RG p.83
Consumer participation policy	Supports CP / consult'n / partnership	CP policies provide an organisational context to support greater consumer participation and guide the development of a CP Plan.	IS#13 RG p.78
Evaluation of services	Supports CP / info seeking / partnership	Consumers are involved in evaluation of services, as members of evaluation reference group, as interviewers, analysers and co-authors.	IS#11 RG p.31
Human resources development	Supports CP	Job design (include CP in position descriptions); recruitment (include consumers on interview panels); staff orientation and training to support consumer participation.	IS#13 RG p.27
Complaints handling	Info seeking / consultation	Actively engages consumers who have identified possible areas for service improvement. Requires easy to use complaints process and staff understanding of value of complaints. Response to consumer essential.	IS#13 RG p.50
Access and equity policies and processes	Consultation	Catalyst may be lack of use of services by particular groups of consumers. Consultation techniques may be used to include consumers in planning or resource allocation.	IS#13 RG p.82

Adapted from *Improving health services through consumer participation: a resource guide*. Dept of Public Health, Flinders Uni, & the S.A. Community Health Research Unit; A Consumer Focus Collaboration publication. <http://www.participateinhealth.org.au/clearinghouse/#1>.

B. Information

Participation strategy	Degree of participation	Key attributes	Ref.
Publications, media releases and displays	Supports CP	Written materials provide information on issues and how consumers can participate. Can also provide feedback on outcomes of participation.	RG p.23
Promotions	Info to support CP	Can be innovative and creative and can involve consumers in planning and implementation. May include consultation and/or partnership.	RG p.56

C. Everyday practice

Participation strategy	Degree of participation	Key attributes	Ref.
Customer service	Info giving and seeking	Include standard questions re: quality of service. Provide consumers with information about opportunities to participate.	IS#14
Information to consumers about services and options	Supports CP	Strengths-based approach. Written and oral information to consumers presented in an accessible and understandable way, explaining service choices and likely outcomes, with pathways for asking and getting answers to questions.	IS#14 RG p.25
Consumer friendly admin procedures	Supports CP	Review and reform administrative communication with consumers to encourage participation. Ensure papers are available before meetings and consumers are able to make comments after meetings.	IS#14 RG p.29
Responding to consumer initiatives	Info seeking / consultation	Clear policies, processes and skills to respond to inquiries or requests initiated by consumers.	IS#14 RG p.53
Consumer anecdotes / informal feedback	Info seeking / consultation	Recording, summarizing, analysing, reporting consumer comments into organizational decision making processes. Report back to consumers and organisation.	IS#14
Consumer charters	Supports CP	Written consumer rights and guarantees that specify service conditions and provide pathways for complaint and possible redress for consumers.	IS#14 RG p.26

D. Research

Participation strategy	Degree of participation	Key attributes	Ref.
Individual research	Info seeking	Different methods depending on approach: outcomes research, qualitative research, action research that overlap with consumer participation.	
Peer to peer methods	Info seeking	Consumer to consumer (or consumer consultant to consumer) methods of consultation minimise power imbalances, increase the richness of information gathered and add perceptive insights to analysis of findings.	RG p.33
Surveys	Info seeking	Gathers quantitative or qualitative data. Agenda set by organisation. Scope of information limited. Variations include snapshot, feedback and exit surveys.	IS#15 RG p.34
In-depth consumer interviews	Info seeking	Extended, semi-structured (usually face-to-face) interviews. Provide rich information from selected consumers. Useful follow up to surveys to further explore issues, or for specific population groups. Time consuming.	RG p.36
Hotlines and phone-ins	Info seeking	Relies on publicity and consistent phone number as well as phone being attended. Works best with skilled staff or trained volunteers to answer. Attracts respondents fairly indiscriminately.	RG p.49
Suggestion boxes	Info seeking	Easy to implement, but limited in obtaining useful input unless backed with feedback strategy. Limited to consumers with time and literacy skills. Always use in conjunction with other strategies.	IS#16 RG p.47

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E. Groups

Participation strategy	Degree of participation	Key attributes	Ref.
Focus groups	Info seeking	Semi-structured group interview. Consumers invited on basis of who they are and what they can contribute to discussion. Interactions among participants can help explore issues rapidly and in-depth.	IS#17 RG p.40
Regular consumer meetings	Info giving & seeking / consultation	Regular meetings (e.g. house meetings) to seek feedback on service, input on improvements and provide a forum to raise other issues.	IS#18
Nominal group method	Info seeking	Small group process, useful for consumer involvement in identifying priority issues and allocating scarce resources. Does not allow for in-depth exploration of issues.	IS#18 RG p.46
Workshops	Info giving & seeking / consultation	Working meeting usually of 8-12 consumers, maybe with providers, to share information and develop a shared approach to a specified issue. Participants selected on basis of skills, knowledge or experience.	RG p.54
Meetings and forums	Info seeking / consultation	Bigger audiences. Meeting structured to canvass views, debate an issue. Reps may be nominated by consumer groups / associations.	RG p.60
Seminars and conferences	Info seeking / consultation	Instigated by organisations to explore issues. Audiences of 20 plus people. Structured format. Informal or spontaneous input may be restricted. Be wary of tendency to give more time to professionals than consumers, who may require support to present their perspectives.	RG p.66
Social events; meet and greet	Info seeking / consultation	Organisations or consumers hold social events (e.g. BBQs, morning or afternoon teas) that provide opportunities for consumers to meet and talk with consumer reps, staff, Board members and others.	
Policy round tables	Consultation	Structured meetings convened to advise on the development of specific policy. Consumers / consumer reps invited.	RG p.69
Submissions	Info seeking / partnership	Oral and written presentation of consumers' views to government inquiries or to an organisation. May be written by consumers, or can include consumer input in organisation's submission. Support necessary to allow participation of less articulate, CALD and/or socially disadvantaged consumers.	RG p.44

F. Consumer groups

Participation strategy	Degree of participation	Key attributes	Ref.
Consumer advisory groups	Consultation	Up to 15 members. Provides input on specific issues / subjects on the basis of expertise or experience in relation to those issues. Members can be appointed or elected. Requires clear terms of reference.	IS#19 RG p.75
Consumer councils and reference groups	Consultation	Structure and role prescribed by organisation. Input to whole of organisation. Made up of consumers who advise the organisation. Need to support consumer reps maintain links with constituency. Reps need to have tenure long enough to have an impact, but not so long they become part of organisation.	RG p.67
Project groups	Info seeking / consultation	Time limited group initiated by organisation to advise on specific issues or to guide a project. May be used to demonstrate the value of CP to key players.	RG p.32
Consumer forums	Consultation	Like focus groups but include larger number of consumers, may include a small number of staff. Useful to educate people, share information or develop appreciation of different views. One-off or a series of meetings.	RG p.76
Participation support groups	Supports CP / consultation / therapeutic partnerships	Support to assist consumers on their issues on their own terms, may include support to participate. Groups can be consulted about service improvement. Workers may enter partnership with groups as advisers.	RG p.86

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G. Deliberative processes

Participation strategy	Degree of participation	Key attributes	Ref.
Consumer feedback panels	Consultation	A pool of potential respondents is established and maintained over 2-4 years. Can be called on to deliberate on issues and inform decisions.	IS#20
Citizens' (consumers') juries	Delegated power	Consumers brought together to deliberate in an informed way on a complex issue. Structured process including expert involvement to assist participants to understand the issues.	IS#20
Deliberative poll	Consultation	Participants selected randomly, receive information, engage in discussion and vote. Preceded by baseline poll in order to measure change.	IS#20

H. Employment

Participation strategy	Degree of participation	Key attributes	Ref.
Consumer consultants	Info seeking / consultation / partnership	Organisation employs past consumer(s) to consult with consumers and advocate on their behalf for service improvement and systemic change.	IS#21 RG p.55
Staff: Volunteers and paid	Supports CP	Organisation recruits unpaid workers who are either consumers or have close contact with consumers and the opportunity to get consumer feedback. Training, supervision and support required as for paid staff. Volunteer-trainee-employee pathway developed.	IS#22 RG p.30

I. Consumer representation

Participation strategy	Degree of participation	Key attributes	Ref.
Consumer representatives on committees	Consultation	Consumers representing other consumers on committees / Board of Management. Usually unpaid positions. Need to ensure they have a strong relationship with their constituency. Consumer reps require clear role description, information, training and support from organisations.	IS#23 RG p.70
Recruitment processes for consumer reps	Consultation	Clarify objectives for having consumer representatives. Develop clear, effective processes for recruiting reps.	RG p.72

J. Consumer control

Participation strategy	Degree of participation	Key attributes	Ref.
Consumer-run organisations	Consumer control	Consumers elect board of directors. Management reports to board. Consumer-run organisations often focus on social justice advocacy as well as service delivery.	IS#24 RG p.100
Community development	Partnership	Community development approach to program / project development. Focus on process as well as outcomes. Scope for creative ways to facilitate consumer participation. Support and partnership with consumers about their own issues.	RG p.98

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Organisational development



Description

Organisational development covers a variety of activities including the processes and results of consumer input into organisation/team plans, policies and procedures. Aspects include partnerships between consumers and providers; consumer input into needs assessment and evaluations of services; human resource development including assignment of consumer participation responsibilities to staff; access and equity policies and procedures; consumer participation policy and complaints handling mechanisms.

How it works

Where consumer participation is effective it is not an “add-on” but fundamental to the planning, provision and review of services: all relevant policies and procedures reflect a systemic commitment to consumer participation.

To achieve this, planning processes reflect effective consumer participation practices and are described in an easy-to-use style incorporating plain English. Consumer participation principles and practice are embedded in service and accreditation standards, relevant accountability requirements and management planning and monitoring practices within organisations.

Portfolio responsibility for Consumer Participation is designated at a senior management level in each service type and provides a focus for all consumer participation approaches throughout the agency. Consumer access to managers is a key to ensuring consumer participation strategies do become embedded and is highly symbolic to other staff. Overt management support for consumer participation can include management participation in and resourcing of Consumer Reference Groups.

Specific staff roles may be designed to foster consumer participation or a commitment to CP may be included in essential criteria in all position descriptions.

There is usually a documented consumer participation plan or strategy and well-developed communication strategies to present the goals, intent, strategies and “big picture” of consumer participation to staff and consumers.

Effective response to consumers’ complaints is recognised as a vital aspect of consumer participation. An effective complaints system starts with a commitment from the organisation to fair resolution of complaints at all levels of the organisation. Key performance

indicators for complaints systems include how complaints are recorded, how quickly action occurs, feedback to the consumer and the recording of outcomes and any further issues.

Degree of participation

Consultation.

Timeframe

Ongoing.

Resource level required

Initially high, then low.

As with everyday practice, organisational development requires an initial high level of resources to review policies and procedures and implement changes, but a relatively low level of ongoing resourcing. In consultation with consumers, resources are required for staff training and development, and policy and procedure review.

Networks—formal or informal groups of people with common interests—are critical to service development and change. Information and developments about particular issues can be fed through them and this can influence views of key people.

Strengths

Management support and involvement means that all CP activities undertaken by the organisation are likely to be more widely accepted and valued.

A coherent organisational approach to consumer participation strengthens the organisation’s ability to take full advantage of its benefits and avoid concerns of tokenism.

Communication strategies can provide a shared basis for consumers and staff to work together to articulate recommendations, talk about difficulties and develop specific local approaches to consumer participation. Mentoring relationships may be established between experienced practitioners (both staff and consumers) and those keen to develop greater expertise.

Effective complaints processes ensure staff recognise consumer complaints, even if they are not presented in the language of the organisation. These processes have the capacity to identify systemic problems and help to monitor the organisation’s capacity to meet standards. In addition, there is a transparent relationship between complaints and satisfaction and feedback strategies. For example, complaints and

responses are publicised to all consumers.

Weaknesses

To some extent the success of organisational development strategies may be influenced by organisational culture. Consumer participation will not be effective without the organisation being open to change; organisational change will not reflect consumer perspectives without their involvement. The process of engagement with consumers is crucial, right from the very beginning of the process.

Example



One Melbourne-based agency providing services to homeless people monitored its existing complaints/grievance process and found that the 'threshold' was too high: the complaints process was complex and consumers were more likely to complain informally.

In response, a new process was developed in which staff record consumers' verbal complaints and concerns (including the nature of the concern raised, the response provided and all follow-up action taken). Themes are identified amongst these verbal concerns in much the same way as near misses are recorded in Occupational Health and Safety procedures. Consumers are always advised of the formal complaints process and the limits of informal complaints; but the organisation has started to take informal complaints seriously enough to respond to common grievances.

The complaints mechanism has thus been changed to accommodate the needs of consumers.

Tips

☞ In developing consumer participation processes and policies, ensure that you involve consumers and gain their input from the outset.

For more information...

- <http://www.health.vic.gov.au/mentalhealth/publications/downloads/conspar.pdf>
- Networks: <http://www.participateinhealth.org.au/clearinghouse/#I>. "IMPROVING HEALTH SERVICES THROUGH CONSUMER PARTICIPATION: A RESOURCE GUIDE FOR ORGANISATIONS". p.90. Viewed November 2007.



CP in everyday practice

Description

Consumer participation is not seen as a separate activity but is incorporated in all aspects of service delivery. Policies and procedures in relation to service delivery and administration support the role of everyday practice in increasing consumer participation.

How it works

"Every time a consumer has contact with a service, it is an opportunity for participation."
(Service provider)

Everyday service delivery practice can support consumer participation in a variety of ways including use of a strengths-based approach to case management and an asset-based approach to community development; consumer friendly administrative procedures and consumer charters. It includes a 'customer-focused' approach to service delivery and processes to respond to consumer initiatives.

Written and oral information is presented to consumers in an accessible and understandable way, explaining consumer participation opportunities as well as services available, choices and likely outcomes with clear pathways for asking and getting answers to questions about the service. Information is available in languages other than English, through translated written material and/or effective use of interpreters.

Communication with consumers is reviewed and reformed to encourage their participation; in particular information is made available to consumers before meetings/consultations and comments are acceptable after them.

Standard questions about consumer satisfaction with the service received may be included in all contacts. Any concern or compliment received in response to these questions is recorded and fed into the organisation's quality service and CP strategy.

Workers also record anecdotes and informal comments or feedback from consumers, and discuss them at team meetings. Related issues can be raised at higher levels and responses are consistently fed back to workers and consumers. For example, concerns and compliments and the organisation's responses to them can be publicised on



a news board in a public place such as the reception area or common room.

There are clear policies and processes to respond to inquiries or requests initiated by consumers.

Consumers have rights and guarantees that specify service conditions. The organisation has clear, well-publicised pathways for complaint and possible redress for consumers if service standards are not met. These are developed, written and regularly reviewed in consultation with consumers.

Degree of participation

Medium level consultation.

Timeframe

Medium to long term.

Resource level required

Medium.

Resources are required to review practice, procedures and policies and to introduce changes in consultation with consumers and staff. Training and establishment time are needed for administration systems. May require establishment of particular roles or assignment of responsibility (such as the responsibility for responding to feedback).

Strengths

Consumer-friendly administrative procedures do not require people using housing and homelessness services to tell their story again and again. This saves the organisation time and avoids a potential source of misinformation and frustration.

Responding to consumer initiatives is a valuable chance to build a partnership that may be a resource for future CP initiatives. It acknowledges and draws on the strengths and skills of consumers, and strengthens self-worth.

Consumer charters support participation and have the potential to ensure standards of service quality and accountability. Developed in consultation with consumers, they also contribute to future CP initiatives.

Incorporating consumer participation in everyday practice spreads responsibility for CP within the organisation and makes it a focus of all staff instead of isolating it.

Weaknesses

A consumer perspective on administrative procedures may have only a slight impact on systems that are usually designed to suit the needs of administrators. These procedures often reflect the compartmentalised nature of service organisations with departments and divisions having their own systems with their own information requirements.

Information provision is sometimes confused with consultation. There is a risk that communication may be ineffective because the method is not relevant to the target audience. Information and communication strategies have to be designed to provide information at an appropriate time and in an appropriate fashion.

Organisations may not be able to respond well to all consumer initiatives due to structural, time or resource limitations. Some consumer initiatives might require a lot of time in negotiation and extensive resources to implement. Failure to respond to consumer initiatives may result in loss of confidence in the organisation's ability or willingness to respond in future. There is a risk that organisations may go for a "quick fix" rather than one that will make a real difference.

Consumer charters may be "toothless" if they are not backed up with practice and resources. They tend to be individually focused and might draw resources away from services that target the wider community / consumer group.

Example



All publicly funded community-managed housing or homelessness assistance services must inform their consumers of the OOH

Consumer Charter and ensure rights and responsibilities are clearly understood. It is part of everyday practice for staff and consumers to work together within the rights and responsibilities outlined in the charter.

Tips

- ☞ Information to consumers is most likely to be effective in improving consumer participation if it is part of an ongoing, two way process of communication. Information provision should be seen as a continuum from informing to educating to empowering.
- ☞ The speed and approach with which services respond to requests and unsolicited feedback from consumers is an important indicator of the commitment of the organisation to consumer participation.

For more information...

- <http://www.health.vic.gov.au/mentalhealth/publications/downloads/conspart.pdf>
- See Information Sheet #13 (Organisational development) for an example of changes to a complaints procedure.
- More information on asset-based community is available online (viewed December 2007) at: <http://www.sesp.northwestern.edu/abcd>

Surveys



Description

Surveys are used to obtain information about consumer needs, opinions, priorities and experiences. Each consumer is asked a standard set of questions, and responses are recorded. The results are analysed and reported back in a useable form. This information can then be used to guide, and to be seen to guide, both ongoing quality improvement and future service planning.

How it works

Many agencies have regular survey processes for obtaining information from consumers about satisfaction with services. This may occur on a cyclical (e.g. annual) basis and/or at the completion of a discrete aspect of service provision. Typical examples include exit surveys and feedback surveys.

The most common form of survey is a sample survey. This saves the cost and time involved in surveying the whole population of consumers (a census). It gathers information that can be inferred to a wider population. Guaranteed confidentiality and informed consent are essential parts of the process.

Surveys collect information by means of questionnaires. These can be administered by interviewers face-to-face or by telephone, or they can be 'self-administered' by the respondent. Surveys can include questions where the choice of answers is limited (closed) or where the respondent is able to provide more detail (open-ended). Surveys can gather quantitative data that measures the issue in question, or qualitative data that describes the issue.

Pilot surveys are used to test the questionnaire and survey design and are essential to ensure that there are no flaws in the survey plan, that the questionnaire obtains the information being sought, and that information obtained can be analysed.

Analysis

Analysis of the information collected takes time and a degree of skill. Commonly available computer software, for example Excel and Access, can be used to assist analysis. Analysis using computers involves three steps: coding the answers, data entry into the computer, and sorting and filtering the data to get usable information.

Reporting back

It is important that the information obtained from consumers is presented back to them, as well as to the wider organisation. This can be done in a number of ways, including publication in newsletters, poster

presentations in the waiting area, at meetings etc. Consumers should also be advised how the results of the survey have been reflected on, and informed of any recommendations for change that have arisen as a result.

Degree of participation

Information seeking.

Timeframe

Short to medium term.

Resource level required

Medium to high.

Effective surveys are designed, administered and analysed by people with research skills and experience. They require good planning and preparation. Time is required to recruit a sample, apply the questionnaire and record responses, code and enter the data and analyse the results.

Consumers may expect reimbursement if the survey takes more than 15 minutes and is administered one-on-one. Some form of acknowledgement is recommended.

Strengths

A survey is often the only way of obtaining quantitative information about a population when it is not available from an existing source. Surveys can provide an understanding of the extent of the problem or issue, or the number of people with a particular point of view.

Surveying consumers is a good way to monitor service delivery and evaluation. Such surveys can contribute to the development and maintenance of quality services and programs (Van Tosh 1993 in Glasser 1998).

Weaknesses

Surveys do not have the advantage of engaging consumers in a group. Participation should be social as well as effective for the organisation.

There is a risk that the survey can be ineffective if careful attention is not paid to ensure the questions provide answers that inform the purpose. Organisations need to be clear on what they want to know to design an effective survey.

A survey may not be the right way to find out what

the organisation wants to know. Surveys are designed to measure rather than explore; they do not increase understanding of the underlying causes of problems. For this reason they are best used alongside qualitative research.

Surveys can have a very low response rate at times, especially where questionnaires are sent out in the mail to all the organisation's consumers without personal contact.

Taking part in a survey can sometimes be a frustrating experience for the respondent, especially when the choice of answers is restricted and more fundamental concerns are unable to be aired or recorded. Surveys can be intrusive or impersonal depending on the type of information being sought, the way the questions are phrased and the method (face to face, mail or telephone) being used.

Examples

When a survey of carers was piloted, a community worker pointed out that the list of answers to one question about their work was entirely negative. In the final questionnaire a question was included about job satisfaction which was answered overwhelmingly in positive terms. If this had been omitted, the research would have found a very different view of caring.

HomeGround Services, a Melbourne-based homelessness organisation, uses client feedback surveys to gather consumer views on service quality, service focus, accessibility and protection of consumer rights. The Homelessness Advocacy Service (HAS) provides feedback on survey design.

A sample of clients is surveyed from across all HomeGround programs. Surveys are done in an interview format; each interview lasts between 20 minutes to an hour depending on the depth of feedback provided by the consumer. Interviewers are volunteers from the HAS Peer Educator Support Program, who are reimbursed for their involvement. As people who have experienced homelessness themselves, they are able to encourage consumers to provide honest feedback on services. Consumers are reimbursed for the time involved in participating in interviews.

Results are analysed by HomeGround's Service Development staff and a report is produced and made available to the organisation and stakeholders, including consumers.

Tips

Surveys involving more than 100 people are best suited to collecting factual or uncomplicated attitudinal data. If detailed information on attitudes, values and beliefs are required, qualitative approaches are likely to be more rewarding.

- ☞ A lot of care is required in questionnaire design. Because the information being sought is to be quantified, surveys require specific, clearly worded questions. People cannot provide answers to questions that are not asked.
- ☞ Involve consumers in the design of the survey, collecting the data, interpreting the input and providing feedback on the development of initiatives that result from the input.
- ☞ To improve response rates, use face-to-face methods (e.g. peer interviews). Publicise the survey, provide reminders, appropriate reimbursement and (where relevant) a self-addressed envelope.



For more information...

- <http://www.participateinhealth.org.au/clearinghouse/#I>. "IMPROVING HEALTH SERVICES THROUGH CONSUMER PARTICIPATION: A RESOURCE GUIDE FOR ORGANISATIONS". p.35. Viewed November 2007.



Suggestion boxes

Description

Consumers are invited to write down their suggestions for improvements as well as compliments, complaints and concerns on paper and place them in a box that is located in a common area. The organisation publicly responds to the feedback received.

How it works

The presence of the suggestion box is advertised (e.g. with signs, posters, article in newsletter) and staff encourage consumers to use the box, especially to report any negative experiences they might have had of the service.

Feedback, suggestions and responses to them are made public to all consumers, for example with written responses placed on a display board in the common area. This may stimulate further discussion and action on the issues raised.

A working group of staff and consumers may be formed to consider the feedback received and to provide advice and suggestions about how the organisation can respond to negative feedback and complaints.

Suggestion boxes are most effective when:

- They are placed in a position where people have the time and facilities to write their suggestions.
- There is a focus or issue for suggestions. This can change on a regular basis and there can be a display near the box explaining the importance of the issue, information about it and what the organisation needs to know from consumers.
- Printed forms are available for consumers to use to make suggestions, with an invitation for them to provide contact details so staff can follow up the suggestion or complaint with them.
- They are not used as the only method for getting consumer input, but are part of a wider consultation plan with multiple strategies.

Degree of participation

Information seeking.

Timeframe

Short term / ongoing.

Resource level required

Low.

Staff time and organisational procedures are needed to monitor and report suggestions, consider and respond to them. Procedures should allocate responsibility for these steps. Printed forms and displays should be provided and maintained.

Strengths

Suggestion boxes, like regular consumer meetings, are familiar to consumers and staff of housing and homelessness services. They are low cost and require relatively little staff time once they are in place.

Suggestion boxes are easy to implement and may just require small adjustments to become a useful tool in the CP toolkit.

For consumers, suggestion boxes can be fairly anonymous. They can be an easily accessible and non-confrontational method of providing feedback, especially at services where consumers regularly visit the office.

Weaknesses

In some services, consumers are most likely to have time on their hands to write a suggestion while waiting for the service, rather than afterwards when they may have something more to say about service quality.

Suggestion boxes are less accessible for consumers who lack good literacy skills or the confidence to put pen to paper. They are also less suitable for services that are primarily outreach-based.

Suggestion boxes can tend to be a one-way method of communication. To help start a dialogue, suggestions and responses to feedback can be displayed near the box for all to see. Consumers can be encouraged to leave contact details but this negates the anonymity of the mechanism.



Example

One accommodation service has a suggestion box that tends to receive the "same old complaints" about the food and about the behaviour of other people's children:

"When we clean it out all we get are the same old complaints, kid's drawings and some lolly wrappers! What can we do?"

Consumers suggested a display around the suggestion box, with the complaints, drawings and wrappers and some comments from the organisation in response, along with an invitation for consumers to continue to participate. However, this mechanism needs to be part of a bigger participation strategy.

Tips

- ☞ Suggestion boxes are best treated as a simple starting point and a minor consumer participation accessory, not as a main strategy.
- ☞ People with the energy to complain may have the energy to be active consumers in your participation strategy. Consider how to engage them in other CP processes.
- ☞ As an alternative or additional strategy, try a “virtual” suggestion box using an organisational feedback email address. Advertise the address on posters, brochures and in newsletters. Designate a staff member responsible for regularly checking the inbox and seeing that feedback is followed up and replied to where appropriate.

For more information...

- <http://www.participateinhealth.org.au/clearinghouse/#I>. “IMPROVING HEALTH SERVICES THROUGH CONSUMER PARTICIPATION: A RESOURCE GUIDE FOR ORGANISATIONS”. p.47. Viewed November 2007.

Focus groups



Description

Focus groups of up to ten people discuss an issue. The group is facilitated and run according to an interview guide and the discussion recorded. Responses and themes are then summarised and fed back to organisational decision makers and into the decision making processes.

How it works

The aim of the focus group is to provide a situation in which meaningful and sustainable flow of ideas can take place.

First you need to decide how many focus groups you need: this depends in part on what other consumer participation strategies you are using. The number of focus groups may also depend on the number of different consumer groups that have needs in relation to the issue. For example, separate focus groups might be organised to gather input from consumers of different ages, genders, racial or ethnic origins.

Consumers are best recruited through existing contacts such as through current client lists of programs.

Select people who are fairly open, who can express their feelings in front of a small group of people and are prepared to respond to what others say. A focus group would normally have a maximum of 10 participants, more usually 6 to 8.

Participants must be informed about the purpose of the research and guaranteed confidentiality. Participants should be asked to sign a consent form which details all relevant information and provides contact details of project manager. Anyone who is involved in providing the services which may be under discussion definitely should not act as a facilitator. Consumers need to be confident that anything they say will not have an impact on the service they receive from the organisation.

An interview guide is prepared and used to explore attitudes and behaviours; facilitators ask questions and allow consumers to discuss things among themselves, with the facilitator monitoring and guiding the discussion.

A focus group should be no longer than two hours. However, introductions and house-keeping can take place 'over refreshments' in an additional half hour at the start, especially while waiting for late comers.

Consumers are reimbursed for any costs incurred and often their contribution is also acknowledged with some form of payment or gift.

Sessions should be recorded (audio and/or video) and someone should be present to assist the facilitator and to take notes. Notes assist in identifying who the speakers are. It is not necessary to transcribe the tape recording; however it is important that it is carefully analysed and the key messages and themes are extracted and written up in a comprehensive report.

The report records the composition of the group and some descriptive demographic data relevant to the topic. The report should include: the research questions / purpose of the focus group (what you want to know); the interview questions; a summary of the answers to the interview questions; analysis and discussion of these answers with quotes to illustrate main points, and answers to the research questions.

A summary of the focus group should be made available to participants with details of what will happen next to their input.

Degree of participation

Information seeking.

Timeframe

Short term.

Resource level required

Medium to high.

Resource requirement include: an ethics process to ensure that informed consent is obtained and to guarantee consumer confidentiality; assistance to recruit consumers and ensure they are able to get to venue; a budget to cover costs of venue, reimbursements and acknowledgements and refreshments; and a skilled facilitator and a note-taker. Interpreters may also be required where the focus group includes consumers from CALD backgrounds.

Time is required to analyse and report findings and summarise for consumers.

Strengths

Consumers enjoy focus groups: they like to meet with others and share ideas and experiences, and often feel they have made a worthwhile contribution for relatively little effort.

Well run focus groups can be one of the most efficient ways of getting in-depth information from consumers. Focus groups are an efficient way to collect qualitative data.

Interaction between consumers means that issues get explored in greater depth than is possible with individual interviews. False or extreme views tend to be discouraged by the group process.

Consumer's perspectives and experiences are clearly illustrated 'in their own words' from quotes recorded during the group.

Weaknesses

The main limitation of focus groups is that the information obtained is only what participants say they do or believe. Opinions and feelings may be exaggerated or silenced in the group.

At times discussion may be dominated by one or two people, in which case the quieter members may not get to have a say. The group may also stray from the issue and fail to answer the questions. Focus groups require a facilitator with good group-work skills to avoid these pitfalls.

The number of questions that can be asked in one session is limited. It is unlikely that you will be able to have more than five questions for eight people in one hour.

Focus groups require a significant amount of time in both the preparation phase and in recording and analysing the information.

Example



Focus groups were used to get the views and opinions of consumers and of service providers to inform the content of this Resource Kit. The interview guide and the information presented were prepared in consultation with Peer Educators from the Housing Advocacy Service, who also facilitated the consumer focus groups. Since many questions were about definitions and meanings, information for discussion was presented on Powerpoint slides.

Consumers were recruited through housing workers who were given printed information to share with their clients. Lunch was provided to participants and they were also reimbursed \$50 for costs incurred. The purpose of the project and the group were explained and a summary of the focus group was posted to them. Their ideas and selected quotes have been incorporated into the Kit.

Tips

- ☞ Focus groups can be a useful adjunct to other consumer participation processes where in-depth consumer perspectives are sought on a specific issue or on a one-off basis.
- ☞ Involving consumer advocates to facilitate the

group can encourage openness and honesty of input.

For more information...

- <http://www.participateinhealth.org.au/clearinghouse/#I>. "IMPROVING HEALTH SERVICES THROUGH CONSUMER PARTICIPATION: A RESOURCE GUIDE FOR ORGANISATIONS". p.40. Viewed November 2007.



Regular consumer meetings

Description

Consumer meetings are held on a regular basis to invite consumers to provide ideas for service improvements, and to gain feedback. Issues can be raised, action discussed and responsibility assigned. Attendance is open to any of a defined group of consumers (e.g. residents of a residential service) and all are encouraged to attend. Using the nominal group method priorities can be clarified.

How it works

Regular consumer meetings are often used in residential services and day centres where consumers are present at the site.

Regular meetings should be held at a time and place that is convenient to consumers as well as workers. Refreshments, transport and childcare should always be available.

The purpose and parameters of each meeting need to be clear. Meetings run best with a structured agenda and some report back on previous actions / ideas. Meetings can run between one and two hours.

House meetings are usually facilitated by a worker. However, regular meetings of consumers could also be facilitated by consumer advocates or by consumers themselves. These meetings could look to assist consumers on their own terms about their own issues, and or about service-related issues. Workers could enter into partnerships with these groups as advisers.

Nominal group method

The nominal group method is a small group process that encourages the participation of less assertive consumers and allows issues to be placed in order of priority.

This method can be used at the start of a meeting and people could go on to talk about the priority items in detail. It can also be used by organisations to assess the relative weighting consumers give to various options.

The purpose of the meeting and its process are explained to consumers. Participants are asked to record their ideas; this can be done using a brainstorm. Ideas are sorted into categories dealing with similar topics. The topic areas are then listed with specific ideas grouped under each.

Consumers are then allowed three votes and can allocate these to the three topics they believe are the most important. The votes are then counted and the

topics placed in order of priority.

The process can be completed relatively quickly and the rules for running the groups are much the same as for focus groups. Butchers paper headed with each of the topic areas can be used to list the specific needs. The voting can be made easier with coloured sticky paper dots.

Degree of participation

Information seeking, can be consultative.

Timeframe

Short term.

Resource level required

Low.

Meetings require a facilitator / chair and a note taker. A suitable venue is required. The environment needs to be safe and inviting. Refreshments should be provided and a time for socialising allowed. Child-care and transport costs may be reimbursed.

The nominal group method requires butchers paper and perhaps sticky dots, in addition to a facilitator who knows about the method.

Strengths

Organisations and consumers are familiar with the 'house / consumer meeting' and this familiarity makes it easier to implement than other mechanisms.

Consumers enjoy opportunities to get together and share experiences and suggest solutions to problems they have experienced. They like to get information and to be listened to, and the regular meeting is a good venue for this.

Regular meetings are useful in a congregate setting as they can build relationships among participants over time. If well facilitated, regular meetings can model respectful interaction and conflict resolution processes.


The main advantage of the nominal group process is that it is relatively democratic in involving the less assertive consumers and producing an outcome that reflects the opinions of the whole group. This is useful for consumer involvement in identifying priority issues and allocating scarce resources.


Weaknesses

Regular meetings have a poor reputation within some housing and homelessness services, and amongst some consumers. Where turnover of consumers is high, meetings may tend to be dominated by airing of negative opinions about services and facilities (e.g. residents of a crisis accommodation centre may focus on wanting bigger televisions or different food). If the organisation is unable to provide any tangible outcome from discussions at meetings, the process may be frustrating for both consumers and staff.

The main disadvantage with the nominal group method is that in itself, it allows for only minimal exploration of the issues that emerge as the most important. Later voters might be influenced by the developing dot distribution and may manipulate the process by allocating all their dots to a particular issue because of this knowledge.

Examples



 An organisation in the UK engaged consumers through a mix of regular meetings and a consumer representative. The representative, elected by consumers, shadowed the team leader of a 40 bed hostel in central London and was given access to information on the resources available and how priorities were decided on. They then reported back to the other consumers on the implications and outcomes of recommendations from the regular meetings.




 In Boston USA, St Francis House is a professionally-run day shelter that offers services to 150-170 'guests' per day. The Guest Advisory Council was the idea of employees at the shelter who asked, "How do we know what our guests need here?" and decided the best way to answer was to ask them.

The Council is an open weekly forum in which guests can voice any issue they might have. The group is facilitated by staff although guests are encouraged to take charge as much as possible.

"At first there were a lot of complaints about staff, the food and clothing distribution. But as the shelter responded in tangible ways to guest concerns, the Council now looks beyond individual situations and into issues affecting them as a community".

Tips

-  Consumer meetings are often used as an integral part of participation strategies that involve consumer representatives and advocates.
-  Meetings need to be held at a time and place that is convenient to consumers.

-  To make consumer meetings more consultative and meaningful, consider asking consumers to set the meeting time and venue; agenda regular feedback on actions from previous meetings; and encourage and support consumers to chair meetings and to be involved in actions arising from them.
-  Explore other group methods and consider integrating aspects into these meetings.
-  News boards in common areas can be used to let people know of the issues raised and the outcomes of house meetings. This will show new residents how the process works (and demonstrate tangible outcomes from it).

For more information...

- <http://www.participateinhealth.org.au/clearinghouse/#I>. "IMPROVING HEALTH SERVICES THROUGH CONSUMER PARTICIPATION: A RESOURCE GUIDE FOR ORGANISATIONS". p.46. Viewed November 2007.

Consumer advisory groups



Description

Usually up to 15 members, consumer advisory groups and consultative committees provide advice across a range of the organisation's activities and strategic direction. Their input is based on expertise or experience about the issue at hand. There are two types of committees: those that involve consultation with consumer representative agencies, and those that seek the participation of consumers. Advisory groups are usually restricted to a particular project, although this is not always the case.

How it works

Consumer committees meet regularly over a set period of time. The agenda may be set by the organisation, the consumers or both. The committee can be facilitated by staff and/or consumers. Members may be appointed or elected, usually for limited terms.

A successful consumer advisory group or consultative committee is one where participants and the organisation are clear as to the scope of participation, and how the advice that is offered will be used in broader decision-making processes. This process is aided by written terms of reference that spell out the purpose of the committee, the nature of the advice sought, how long the committee will meet and what will happen to the advice given.

Consumer consultative committees and advisory groups also need to ensure they consult regularly with the broader community of consumers.

Degree of participation

Consultation.

Timeframe

Medium to long term.

Resource level required

High.

Advisory committee members should receive orientation and ongoing support and skills development. Organisations also need to provide financial reimbursement to consumers willing to participate.

"Consumers are the experts when it comes to their needs and desires and their expertise needs to be valued."

(Glasser 1998)

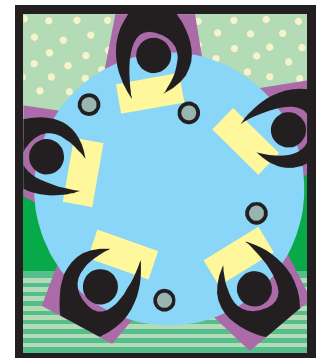
Staff training and education is necessary to overcome

professional resistance. The most effective training will have consumers involved. Joint leadership between consumers and staff in education and training will also demonstrate the development of a partnership between the two groups (Fisk et al in press).

Administrators need to: ensure real response and tangible outcomes to consumer input, suggestions and complaints; avoid tokenism; and allocate adequate staff time for consumer engagement, recruitment and follow up.

Strengths

A consumer consultative committee or advisory group creates a ready resource of advice for organisations. The advice gained will represent both consumers' experiences as well as an understanding of the boundaries to service and organisational capacities.



Involving a number of consumers may assist the agency to gain a balanced range of consumer perspectives.

Participants gain skills and knowledge through their involvement in the group over time.

Weaknesses

Creating a consumer advisory committee signals a shift of power and resources to consumers of services. This may feel problematic to staff. It is one thing for staff to support empowerment as an abstract goal but quite another to shift power to clients, away from themselves (Cohen 1994).

Consumers on advisory groups may have very high expectations of their role and their potential to influence decisions. More than advising, consumers may want to be involved in making decisions before the organisation's management is ready and before they have sufficient skills and knowledge. This can be managed with clear terms of reference that include conflict resolution procedures. Organisations may find themselves having to review terms of reference and to negotiate power-sharing arrangements.

While the input of consumers is valuable in all areas, organisations need to integrate this with other input and constraints. This is sometimes an area of conflict with consumers. The development of a mixed

Advisory Group—of consumers, agencies and professionals—to advise the strategic direction of the organisation may be an option.

Example



In addition to providing legal services, the Melbourne-based PILCH Homeless Persons Legal Clinic (HPLC) seeks to identify the range of legal issues facing homeless people, to identify gaps in the delivery of services and conduct advocacy regarding relevant law reform and social policy issues.

The Clinic consults with a Consumer Advisory Group (CAG) made up of people who have experienced homelessness or who are currently homeless. This group provides guidance and advice to the Clinic primarily on its advocacy and less on its operation. Prior to the establishment of the CAG in 2006, the Manager of the HPLC met with consumers—who had consulted with homeless people to develop a submission for the organisation—with the view of forming a permanent advisory group. Terms of reference were drafted with the assistance of these consumers.

Twelve members of the group were recruited through caseworkers at the different agencies from which HPLC operates. They had responded to a draft Expression of Interest developed by the Manager. Six members of the core group remain involved in 2007. The HPLC has also recruited new members to the CAG.

Advisory group members are paid \$20 per hour with a minimum of \$30 per meeting and this was determined as a result of feedback from consumers about the importance of incentives and recognition. They also receive lunch and Met cards (for transport).

The group's monthly meetings are facilitated by the Manager. At present, the chair is rotated through the members of the CAG, minutes of meetings are taken and actions noted. Monthly meetings help to connect the members and create a positive dynamic between them. Members have received training in facilitation and will receive public speaking, negotiation and other training on an ongoing basis.

Members of the CAG have had opportunities to meet with the Board of PILCH (the auspice body); they have made formal presentations to the Board and have met informally at functions attended by both groups.

The group was funded initially with a small grant from the Law Foundation. The Helen Macpherson Smith Trust has very generously agreed to fund

the CAG for a further two years, until the end of 2008.

Tips

- ☞ Consider confidentiality issues – it may be necessary for consultative committee members to sign confidentiality agreements.
- ☞ Consumer representation in decision making is important, but the need to avoid participation being or appearing to be tokenistic outweighs any others. The terms of reference of the group must be clear about the authority the committee has, the boundaries of its influence within the organisation, and contain clear, negotiated role expectations for participants.

For more information...

- HPLC information viewed December 2007 at: http://www.pilch.org.au/html/s02_article/default.asp?nav_top_id=60&nav_cat_id=172&dsb=711
- Information on Bayside Health consumer participation program viewed December 2007 at: <http://www.alfred.org.au/Page.aspx?ID=45>



Deliberative processes

Description

Deliberation is an approach to decision-making that involves an informed constituency thinking critically together and discussing options from multiple points of view. Deliberative processes allow informed discussion and avoid reducing questions to a simplistic either/or response. There are a range of deliberative mechanisms including deliberative polls, consumer panels and citizens' juries.

How it works

A **deliberative poll** is like an enhanced opinion poll. Participants are selected randomly and then come together to discuss the issue. The profile of the participants can be structured to provide a sample that is representative of the whole group according to specific characteristics, for example, age, gender, or service used. It generally involves large quantities of participants (up to several hundred).

A deliberative poll requires information to be given to participants in advance. Extended small and large group discussions take place when participants meet. It is preceded by a poll and leads to a vote or series of votes at the end, the results of which can be compared with the first poll.

Consumer panels may also be called consumer feedback panels. An organisation establishes a pool of potential respondents within a defined area (interest or geographical). This pool may then be called upon to participate in a range of quantitative research methods, such as phone surveys, face-to-face interviews or self-completion postal questionnaires, on any issue. They may also be called upon to participate in one or several qualitative consultation methods, for example citizens' juries or deliberative polls.

A consumer panel can involve a large number of consumers and is typically maintained over an extended period of time (2-4 years). Based on Residents Feedback Panels, such panels of consumers can provide input into planning and can track changes in consumer attitudes over a period of time.

A **citizens' jury** is created by those with authority to define an issue and act on the jury's recommendations. The facilitators recruit experts, gather briefing information and arrange the selection of a panel via random selection which matches a representative profile (in the context of housing and homelessness services, this might include a representative group of consumers from across the organisation's programs). The convening of the jury and the topic they will

deliberate is widely publicised.

When the jury meets, deliberations are held and expert witnesses are called. A report is prepared outlining the jury's recommendations.



Degree of participation

From consultation to delegated power.

Timeframe

Short to medium.

Resource level required

Medium to high.

Resources required are similar to strategies like surveys and focus groups, that is, consumers need to be paid for their time and any expenses incurred in participating. However, some level of expert advice to ensure the process is more deliberative will be important to start with. While you might need to pay expert consultants for their time, some academics are interested in the application of these processes and will provide a level of assistance voluntarily.

Maintenance of a Consumer Feedback Panel database requires administrative resources on a long-term basis.

Strengths

The key advantage of deliberative participatory strategies is that they encourage enlarged perspectives, opinions, and understandings, and thus can result in better decisions and policies.

Deliberative processes increase the likelihood that consumers' contributions to decision making will be well informed as well as being backed by their experiences of homelessness or housing disadvantage. Consumers have access to briefing material and have the opportunity to consider the issues.

When consumers meet together to participate in these strategies they are also able to socialise, learn and develop skills and knowledge.

The participant group of a deliberative poll can be large and allows for responses in different places or across different services to be compared. It is also a

convenient consultation method to engage those who face barriers associated with travel/transport.

Citizen juries allow for the inclusion of expanded levels of expertise, knowledge and skills in the process and the opportunity to scrutinise the information presented. This method is useful when the issues involved are complex and expert involvement is required to clarify these complexities.

Weaknesses

Deliberative polling can be costly when participants are brought to a single site and their expenses are paid, although the use of televoting may overcome these drawbacks. With a televote, participants are sent information and encouraged to discuss the issue with family and friends. However, televoting does not bring consumers together and the process is therefore less deliberative.

The model citizen jury process is potentially a lengthy and costly process, involving participants meeting over several days. Significant organisational commitment and resourcing is required to make this happen. A condensed version over a shorter timeframe may be possible.

Example



Public housing tenants in the Southern Metropolitan Region of Melbourne were selected onto a citizens' jury to deliberate over methods of participating in the Tenant Participation Framework, prior to its finalisation.

The jury met over two days with access to expert witnesses; after each witness presentation, they met as a small group to deliberate. An experienced facilitator led them through team building and decision making skills as well as assisting them to formulate questions to scrutinise the information presented by the witnesses. The participants collaboratively produced a written report with recommendations that was circulated to all tenants in the region. The regional manager undertook to act on as many as she could.

Tips

- ☞ To keep a Consumer Feedback Panel current requires some process for maintaining regular contact with people on the database. Mechanisms must be put in place to replace participants who lose interest or move away.
- ☞ The question(s) to be deliberated on by a Citizens' Jury need to be clear in advance.
- ☞ Deliberative consultation methods are in their infancy in Australia and there are a growing num-

ber of academics who are interested in practical examples. They may be a good source of expert advice for your consultation.

For more information...

- More information on deliberative polls, consumer panels and citizens' juries: Ideas for Community Consultation viewed December 2007 at: <http://www.nswplanning.org.au/pia/engagement/stories/docs/ideasforconsult.pdf>
- Deliberative Democracy Consortium is a US website viewed December 2007 at: <http://www.deliberative-democracy.net>
- Active Democracy is an Australian website with case studies, links and references at: <http://www.activedemocracy.net>
- Brotherhood of St Laurence (2004). *Seeing is believing*. DVD of citizens' panel in Victoria. Purchase from BSL library. <http://www.bsl.org.au>



Consumer consultants

Description

Consumer consultants are people who have experienced homelessness and/or required services from housing or homelessness organisations, and who are now employed in a housing / homelessness service to put forward a consumer perspective. The ultimate aim is for the consumer consultant to create opportunities for all consumers to participate.

How it works

Consumer consultants are linked to a wide group of consumers receiving services, to gain their input into organisational structures where consumer views are regularly considered, resulting in changes being made.

To be most effective consumer consultants are firmly linked to managers with the authority to make decisions about changes to service delivery. The manager takes a strong positive position in setting the tone and expectation around valuing consumer participation, and generally has a strong hands-on role in consumer participation, planning the approach and closely monitoring implementation.

Consumer consultants are expected to:

- Be involved in the development of Consumer Participation Plans;
- Be active members of committees that provide input into planning, development and evaluation of service delivery;
- Establish consumer networks, or coordinate and facilitate existing networks;
- Run orientation and training programs around consumer participation for both consumers and staff.

These positions have been found to be most effective where two or more consultants work together.

Key policies, processes and structures to support and monitor consumer consultants include:

- A well-developed duty statement including key selection criteria, boundaries of the role and confidentiality protocols;
- Clear resourcing decisions in relation to consultants' work space
- Availability of mentoring, training and supervision for consumer consultants (and other staff)
- Clear consultative processes for gaining consumer input and reporting it to appropriate forums

- Payment of consumers for meeting attendance;
- Clear protocols and procedures for acting on information, the extent of decision-making authority and reporting back to consumers
- Monitoring mechanisms in relation to implementation of change as a result of feedback.

This strategy requires a range of regular forums for consumers to meet and discuss their experience of services, gain an understanding of their rights and talk about ways to improve services to better meet their needs.

Degree of participation

Consultation.

Timeframe

Long term.

Resource level required

High.

Like other members of staff, consumer consultants must receive award wages and conditions.

Consumer consultants need support, nurturing and replenishing mechanisms. They need ready access to de-briefing, peer support and rewards.

It is important that managers actively support implementation of strategies to encourage consumer employment. This support consists of: education and training of non-consumer staff; increased individual supervision for consumer staff, and special attention to the need to offer 'reasonable accommodation' or to otherwise modify work responsibilities to meet the needs of consumer staff, as is done when employing someone with a disability (Fisk et al; under review).

Strengths

By being visible and articulate, consumer consultants may change community attitudes and reduce the stigma associated with homelessness (SQM 1999). Consumer consultants can increase the sensitivity of non-consumer staff (staff who have not been consumers of homeless services) to their clients and educate co-workers; (Van Tosh in Glasser 1998).

Consumer consultants can provide an enormous impetus for the development of a wide range of consumer participation strategies. Consumer consultants have first-hand knowledge of homelessness and for

this reason are more likely to be trusted by consumers. They are well-placed to advise on what strategies will work to engage consumers in participatory activities.

Consumer consultants increase the avenues for consumers to be an integral part of job redesign and training delivered to staff.

Consumer consultants can provide a strong voice advocating consumer perspectives on an ongoing basis within an organisation. By building participation opportunities, consultants can shift the organisation from a 'consultancy' model to partnerships to consumer independence model, where consumers make all decisions regarding consumer participation activities.

Weaknesses

An over-reliance on consumer consultants as the key strategy to increase consumer participation can be counter-productive. To ensure consultants present views representative of all consumers their employment needs to be embedded in an effective infrastructure to engage as many consumers as possible.

Criticisms of the consumer consultant strategy are nearly all focused on the role definition and its implementation rather than the consultants' practices.

Employment of consumers as staff carries certain risks and the agency must be prepared for the challenges faced by consumer staff (Fisk et al in press, in Glasser 1998). (See Information Sheet #22: Consumers as staff).

There is a risk that consumer consultants may be expected to advocate on behalf of individual clients rather than for systemic change.

Example



The Psychiatry Unit of the Alfred Hospital in Melbourne employs Consumer Consultants to present to the organisation the point of view of the people who use the service. Fliers advise consumers of Consumer Participation at the Alfred and invite them to join the process.

Consumers can contact consultants when they are inpatients or outpatients, in person or by phone. Consumers can attend regular meetings with consultants and can tell these employees their concerns and ideas for improving the service. Staff, including the consumer consultant also get together to talk about the service and consider consumers' views. Then a group of people who use the service and staff who operate it, get together to discuss changes that are occurring and recommendations for further change.

Tips

- ☞ Consumer consultants must be employed as part of a consultative strategy that engages consumers and staff alike.
- ☞ It is strongly recommended that more than one consumer consultant should be employed.

For more information...

- Service Quality Australia (SQM) (1999). *Evaluation of Consumer Participation in Victoria's Public Mental Health Services*. Viewed December 2007 at <http://www.health.vic.gov.au/mentalhealth/publications/downloads/conspar.pdf>
- Wadsworth & Epstein (1996). *Orientation and Job Manual – Staff Consumer Consultants in Mental Health Services (1995-1996)*. This manual provides extensive detail in relation to the employment of consumer consultants. It is based on the experience of the 'Understanding and Involvement Project'.
- Middleton P, Stanton P & Renour N (2004). Consumer consultants in mental health services: addressing the challenges. *Journal of Mental Health*. Volume 13, Number 5, October 2004, pp.507-518(12). Viewed October 2007 at <http://www.intentaconnect.com/content/routledg/cjmh/2004/00000013/00000005/art00007>



Consumers as staff: paid and volunteer

Description

Current and/or past consumers fill defined roles in service delivery or management within the organisation, and draw on their experiences and characteristics to enhance their ability (and that of the organisation) to provide services to people who are homeless.

How it works

The starting point is to eliminate barriers to employment of consumers and former consumers. This may involve ensuring that HR policies include provisions precluding discrimination against consumers during recruitment processes. The organisation might also create one or more dedicated staff positions to be filled by consumers.

Organisations that are serious about employing consumers need to go beyond policy to proactively create opportunities for consumers to become involved. This may require the development of an employment pathway from consumer to volunteer, trainee and ultimately to paid staff (casual, part-time, permanent). This pathway must be supported with training and development opportunities available to all staff. The volunteer end of the pathway may play a role in identifying consumers who have the potential to go on to employment.

Effective employment practices (including clear job descriptions) can reduce any confusion for consumer staff about the boundaries between roles as consumer and staff, and maximise the impact of these positions.

Volunteers

Consumers interested in ongoing involvement with an organisation can be invited to volunteer their time to contribute to consumer participation strategies as well as other activities. A worker with responsibility for consumer participation would meet with the volunteers and explain the aims of the strategy. The volunteers then identify the issues or consumer groups with which they believe they can best work. An approach is developed and outcome goals agreed.

Consumers can be responsible for running orientation and training programs around consumer participation for both consumers and staff.

Degree of participation

Medium to high.

Timeframe

Long term.

Resource level required

High.

It is important that managers actively support implementation of strategies to encourage consumer employment. This support consists of education and training of non-consumer staff, increased individual supervision for consumer staff, and special attention to the need to offer 'reasonable accommodation' or to otherwise modify work responsibilities to meet the needs of consumer staff, as is done when employing someone with a disability (Fisk et al; under review).

Other requirements include: a detailed job description which describes position requirements (and if relevant the authority of consumer consultants); a work plan which identifies intended outcomes over time; a direct supervisory relationship with a senior staff member; and documentation of defined functional relationships with related consumer participation and quality improvement structures in the organisation, if relevant.

The role needs to be supported and supervised with regular direction, review and support from the line manager. This relationship should also attend to the specifics of the job description, work plans and the monitoring outcomes. Consumer staff are best supported and managed within standard personnel practices pertaining to all staff members.

Strengths

The status of "staff member" is very influential in organisations. The inherent tensions between staff and consumer can be used creatively to explore and develop new ways of relating between them. Consumers as staff can increase the sensitivity of non-consumer staff to their clients and educate co-workers (Van Tosh in Glasser 1998).

Consumers can provide important links to potential consumers: they can help to locate hard-to-find individuals and devise creative strategies to engage homeless persons resistant to services. This is particularly the case when agencies are trying to engage homeless people who have serious mental illnesses and/or substance abuse problems, or multi-problem homeless families (Glasser 1998).

Consumers as staff have also shown a special ability to sensitively relate to and help solve the problems that clients face. They tend to be more tolerant of unusual behaviour; they do not maintain a rigid distance from the people they serve and tend to show more empathy for individuals' struggles.

Consumer staff can use characteristics developed while homeless to solve problems. These characteristics may include: knowledge of systems and being street smart; flexibility and patience; know-how to develop alternative approaches; understanding of basic needs/preferences; engagement/peer support; positive role modelling and the ability to fight stigmas by demonstration. They may be able to offer coping strategies and overcome obstacles with information and referral due to their own experience receiving services and facing these obstacles. (Van Tosh in Glasser 1998).

Peer to peer methods of consultation minimise power imbalances and increase the richness of information gathered while adding perceptive insights to the analysis of findings and the ability to advocate on behalf of consumers.

Engaging consumers as staff has significant benefits for individual consumers in terms of opportunities for meaningful activity and entry to the workforce.

Weaknesses

There is a necessary role ambiguity in holding the position of staff member and simultaneously being a member of the consumer group. Consumer involvement as staff carries certain risks. The agency must be prepared for the challenges faced by consumer staff (Fisk et al in press, in Glasser 1998). One challenge is the need to overcome client-staff boundaries that can be a source of stress for the consumer staff, especially if they are a former client with the agency. Another is that it can be common for disclosed consumer staff to face some sort of discrimination—whether overt or subtle. Non-consumer staff have been known to treat consumer staff differently, with less respect, than other co-workers.

Other difficulties include having friends who are still clients; not feeling competent enough to do the job as a former client; and other clients wanting to develop a personal relationship with them.

Example



Crisis is a national charity in UK for single homeless people. It is important for Crisis that the homeless people who use its services—its members—are empowered to break out of homelessness and reintegrate back into society. This is achieved by offering a wide range of activities so that there is something that every homeless person can engage in. Once people are engaged, Crisis works with members to help them progress into further learning and on towards employment.

The Skylight Café, operated by Crisis, offers its members (consumers) a unique training opportu-

nity where they learn about the catering business. As volunteers in the café they develop self-confidence, organisation and communication skills which are so important for people wanting to get back into the workforce. Crisis also has an employment pathway for consumers from volunteer positions into paid employment within the broader organisation.

For more information...

- Information on Skylight Café viewed December 2007 at <http://www.crisis.org.uk/page.builder/skylightcafe.html>
- <http://www.health.vic.gov.au/mentalhealth/publications/downloads/conspart.pdf>
- Glasser, N. (1998). *Giving voice to homeless people in policy, practice and research*. Viewed November 2007 at <http://aspe.hhs.gov/homeless/symposium/5-CONSUMR.htm>
- Tripp (2005) viewed November 2007 at: http://pathprogram.samhsa.gov/text_only/tech_assist/transcripts/BenefitConsumerInvolvement_7_2005.asp
- See also Information Sheet #21: Consumer Consultants.



Consumer reps on committees

Description

One or more consumers (or past consumers) are members of formal decision-making structures within the organisation. The role of the consumer representative is to provide a consumer perspective and take part in organisational decision-making.

How it works

A consumer representative is a user or former user of a particular service who identifies as a consumer, and who has a formal position on a relevant decision-making body within the organisation such as a Board or Committee of Management.

A consumer representative would normally have a clear position description which identifies their role and responsibilities and defines their status in relation to decision-making processes. Often, their status will be similar or identical to that of other members of the committee. Representatives are accountable to the organisation they represent and to the organisation's key stakeholders.

In some cases a consumer representative may have a defined relationship of consultation and/or representation with their constituency, the consumers. In this case it is vital that the representative is accepted by other consumers of that service to advocate on their behalf. The role may involve, but is not limited to:

- Protecting the interests of consumers, service users and potential service users;
- Presenting how consumers may think and feel about certain issues;
- Contributing consumer experiences;
- Ensuring the committee recognises consumer concerns;
- Promoting consumer rights and commenting on assumed reciprocal responsibilities;
- Reporting the activities of the committee to other consumers;
- Ensuring accountability to consumers;
- Acting as a watchdog on issues affecting consumers; and
- Providing information about any relevant issues affecting consumers.

Induction and training are provided and ongoing support may be required to maximise the representative's ability to contribute.

Consumer representatives generally carry out their role on a voluntary and unwaged basis. However, consumer representatives need to be adequately resourced through the reimbursement of expenses, remuneration and training and development.

Degree of participation

Consultation.

Timeframe

Medium to long term.

Resource level required

High.

Information, training and support are required to enable consumer representatives to participate in committees and to ensure representatives maintain a relationship with their constituency. Resources are required to reimburse representatives' expenses; to recruit representatives; to clarify their roles and define the terms of reference on committees they may sit on; and to identify and address skills deficits.

Strengths

Consumer representatives are able to provide a consumer perspective which often differs from a bureaucrat, industry/sector, academic or professional perspective. They have the potential to provide regular direct access to consumer views at the highest decision-making levels within organisations.

Building consumer representation into the Board of Management may help management and the broader organisation to stop thinking of clients as "others"; it helps to break down "us and them" dynamics.

This strategy is potentially empowering to the consumers who take the representative role.

Weaknesses

Consumer representatives on committees may appear tokenistic when not accompanied by other consumer participation mechanisms. Tokenism, defined as one person on a board or committee to represent an entire class of people, is one of the most common participation pitfalls for well-intentioned organisations.

Limiting consumer involvement on boards or committees to one person means that the consumer has no natural allies on the committee, making involvement an intimidating or potentially threatening experience (Glasser 1998).

Being a consumer representative on a Board of Management may require skills beyond the consumer's own personal experiences. Constant resourcing, including ongoing training and development, is often required. Most people find committee processes obscure and initially at least, are likely to feel uncomfortable and unable to contribute effectively.

Participation on a Board or committee can be demanding in terms of the time commitment required from individuals. It may be difficult to sustain on an unpaid basis, especially for consumers with other commitments.

Example



Merri Outreach Support Service (MOSS) is a Melbourne-based organisation working with people who experience or are at risk of experiencing homelessness. MOSS works for change through individualised assistance, advocacy, community development and research. Since its inception, MOSS has placed a high value on consumer input and participation. This is reflected in a variety of ways including active Consumer Reference Groups, consumer focus groups and consumer representation on the Committee of Management.

MOSS's Committee of Management is responsible for overseeing the management of the agency and setting the strategic direction. Committee of Management meetings are held on a monthly basis. MOSS's constitution establishes that out of 12 positions on the Committee of Management, 4 are set aside for consumers / ex-consumers.

MOSS has clear policies which cover the operation of Committee of Management meetings and which establish the expectations of consumer and non-consumer Committee members. In general, consumer representatives have the same status and role description as other Committee members.

Conflict of interest may be an issue for consumer representatives (as for other members of the Committee), and Committee members who are current clients of the service may be asked to stand aside

from discussions involving staffing issues (e.g. staff disciplinary proceedings). Consumer members of the Committee are not seen as formal representatives of the agency's consumers.

Information on consumer participation opportunities is provided to consumers from the outset of their involvement with MOSS and staff encourage

clients to become involved in the organisation. Where consumers express an interest in becoming involved, staff will assist with capacity building support to enable them to do so. Often involvement may be a stepped process; for example, starting by participating in Community Development activities, then becoming involved in one of the Consumer Reference Groups, and some consumers may eventually become a member of the Committee of Management.

Reimbursement of expenses (travel, childcare, etc.) is provided for consumer representatives as for other Committee members. Each consumer representative has a general member of the Committee assigned as a mentor / buddy; the mentor's role is to provide support and explanation to enable the consumer representative to understand and contribute to Committee proceedings. Consumer representatives are assisted to identify areas of skill development required, and participate in the Committee's general performance appraisal processes.

An ex-consumer is currently co-chair of the MOSS Committee of Management (January 2008).

Tips

- ☞ Clarify representatives' roles and the terms of reference of the committees they sit on.
- ☞ Selection processes need to ensure that representatives have sufficient stability in their lives to participate, plus personal qualities relevant to participation in a group setting.
- ☞ Build a relationship with a consumer advocacy service or consumer support organisation who can support the person's involvement.
- ☞ Be aware that putting consumers on a committee is usually a long-term strategy and always involves reciprocal obligations. It means a significant commitment from your organisation in terms of time, communication, support and training.

For more information...

- More information on Merri Outreach is available at <http://www.merri.org.au>
- <http://www.participateinhealth.org.au/clearinghouse/#I>. "IMPROVING HEALTH SERVICES THROUGH CONSUMER PARTICIPATION: A RESOURCE GUIDE FOR ORGANISATIONS". pp.70-71. Viewed December 2007.
- See also Information Sheet #19: Consumer advisory groups.





Consumer-controlled organisations

Description

In consumer-controlled programs or organisations, the overall strategic direction of the service, including responsibility for financial and policy decisions, is in the hands of the service recipients. The Board or management are ultimately accountable to consumers.

How it works

Consumer-controlled models tend to be underpinned by a philosophical approach in which the ability to give help is seen as a human attribute and not something acquired by education or professional degree.

In consumer-controlled models, consumers are usually members of the organisation and are able to elect the Board which has the legal authority for the management of the service. The consumers, through the Board, determine the service's goals, objectives and priorities. The responsibility for implementing these rests with management and staff.

Boards of consumer-controlled organisations may often include consumers. Consumers-controlled organisations may or may not employ consumers or ex-consumers as staff. Boards and staff may also include non-consumers with desirable skills and a commitment to consumer run organisations.

In addition to consumer involvement in election of the Board, consumer-controlled organisations would normally use a range of other consumer participation processes to ensure that organisational decision-makers stay in touch with consumer views on an ongoing basis.

Degree of participation

Consumer control.

Timeframe

Ongoing.

Resource level required

Medium.

Consumers need access to training and skills development to participate in consultation and election processes. These processes also require other resourcing. Reimbursement and resourcing are required for consumers participating in the Board or other forums.

Strengths

Consumer-controlled programs for homeless people offer consumers a sense of belonging and an opportunity for growth. They are empowering; offering staff and participants a wealth of information and experience. Consumer-run programs show participating consumers that they can live independently and with dignity; the empowerment aspect goes beyond the Board to the people served.

Within consumer-run organisations, the focus of service delivery is on choice, dignity and respect. The concept of choice is central to the success of consumer-run programs and is indispensable for any program that truly serves its clients. Flexibility is important to services for homeless people: it might mean allowing consumers the dignity to make mistakes. Instead of telling clients 'no' or 'we can't do that here', consumer-run programs try to find creative ways to fulfil those needs (Glasser 1998).

Because consumers have had personal experience in the service system—getting or trying to get services—when they put together their own service organisation, they try hard to tailor the system to the client's needs, rather than the client's needs to the system (Van Tosh 1990 in Glasser 1998).

Weaknesses

Consumer control means that the Board and management of the service must ensure that their community and consumers are involved in all major decisions of the service. Like community control, consumer control may become a forum for differences within the community. Conflict must be regarded as one of the processes of participation, to be worked through rather than avoided.

Consumer-controlled organisations face a number of risks. Firstly, the management and professional workers of the service may set their own agenda despite the views of the board and other consumers. It is vital that consumers are able to express their views to the Board on a regular ongoing basis and not just at election time.

Secondly, consumer run organisations face considerable barriers. A common difficulty is finding a location for consumer-run homelessness programs in the face of resistance and stigma from surrounding communities. When neighbours find out that former clients will be running the program, resistance may increase.

Thirdly, a high level of transience of consumers accessing homelessness services can be a potential

barrier in terms of organising elections for Board members. Lack of a steady, adequate income for consumers may also interfere with their ability to act as Board members or stay involved in the process.

Other challenges faced by consumer-run programs include difficulty in obtaining adequate and secure funding for the programs, and difficulty getting cooperation from traditional service agencies.

Many of these barriers are faced by all programs for homeless people, but they may be made more formidable due to scepticism about the ability of consumers to operate programs.


For more information...

- Information on DASSI: <http://www.dassi.com.au>
- Information on National Coalition for the Homeless extracted from a longer article by Nicole Glasser (1998) at: <http://aspe.hhs.gov/homeless/symposium/5-CONSUMR.htm>

Examples

 In Victoria, DASSI (Disability Attendant Support Services Inc) is a consumer-run organisation. All clients are members of DASSI and elect the Board of Management that sets the strategic direction for the organisation. The Board is also made up of consumers and non-consumers with specific skill-sets.

Consumers have input into the decision-making of the organisation through regional Client Advisory Groups that meet twice a year. A client then represents each region at a state-level Client Advisory Group that feeds into the Board of Management. Additionally, DASSI clients are directly involved in developing and reviewing their support plans and actively assist their individual client services coordinator to match attendant support staff to the client's specific needs.

 National Coalition for the Homeless (US) provides a national voice to address issues related to homelessness and poverty. The organisation mandates that 30 per cent of their policy-making board be consumers and also employs two formerly homeless people. The coalition trains consumers in general advocacy skills, including how to be an effective Board member.

