

on SELF-ADVOCACY and USER PARTICIPATION

Services to people with learning difficulties









No.9

APRIL 1996

Generic Advocacy Projects

User-friendly Complaints Procedures

KING'S FUND LIBRARY

11-13 Cavendish Square
London WIM 0AN

Class mark
HOCC3: QHA

Extensions
Kin

Date of Receipt
Price

23.10.96.

Denation

CONTENTS

	Page No.
EDITORIAL	3
GENERIC ADVOCACY PROJECTS	
Pheonix NHS Trust - Service User Forums	7
Barnardo's Advocacy Service	11
Hackney Advocacy Scheme	17
Advocacy on Tap	21
USER-FRIENDLY COMPLAINTS PROCEDURES	
Pheonix NHS Trust	29
Triangle Women's Housing Association Limited	33
Wednesday Self-Advocacy Group	39
Hackney Advocacy Advisory Group	41

EDITORIAL

Readers will be aware that there has been a very long gap since they saw an issue of the Information Exchange and, unfortunately, this will be the last one, at least for the present. The demands of my work within the Changing Days Project make it very difficult to fit other things in, much as I might like to!

My apologies to the contributors who have had to wait so long to see their material in print. However, the experiences they describe are just as useful now as when written and I hope that readers will contact people direct to get news of progress.

As well as those in this issue, there were five contributions we have not used. This is because they were either not about the topic (e.g. a self-advocacy group rather than an advocacy project) or there was no actual experience to write about because the project had just started or was about to start.

The Information Exchange arose out of a need expressed by workers to be able to 'talk through' experiences on particular aspects of the work in a detailed way on a regular basis. The Exchange seems to have 'filled the bill' to some extent in that it has been possible, because of the willingness of people to take the time to complete the questionnaires, to have a more in-depth look at particular issues than is usually possible, for example in a magazine article. My impression is that there is still a need for this type of information. Perhaps someone will take up the idea?

Andrea Whittaker April 1996

GENERIC ADVOCACY PROJECTS

Phoenix NHS Trust - Service User Forums

Contact: Pete Le Grys, Phoenix NHS Trust,

Headquarters, Stoke Park, Stoke Lane, Stapleton, Bristol BS16 1QU.

Tel: 0117 958 5000

When did it start?

November, 1993.

When will it finish?

It is permanent.

How is it funded?

From the Trust's budget.

Geographical area covered?

Bristol and Districts.

Client groups supported?

All users of Phoenix NHS Trust Services - people with learning disabilities.

Staffing?

One full-time development officer.

Aims and objectives?

The service user forum aims to develop ways of consulting and involving users of the Trust's services in sharing and refining those services by facilitating regular monthly meetings with senior managers and service users.

Have the aims and objectives changed since the work began? If yes, in what way and why?

The aims have not changed but we have, however, tailored different consultation strategies.

What are the advantages of having a generic advocacy project compared with advocacy working with one particular group of people, or one type of advocacy?

The forums are open to any trust service user. An advantage is that this ensures we disseminate information to users in a conscious/engaging way. It is also an easier starting point by saying <u>all</u> users are entitled to attend.

What are the disadvantages?

Complex ideas and concepts need constant recapping as the attendance of the forums can change between meetings.

What have you found to be the most successful ways of working? Why?

Developing a major forum of 'bottom line' consultation i.e. disseminating a major document/idea into three key areas. Using an assortment of one-to-one interviews, discussions, 'surgeries' and service user forums.

What have you found to be the least successful ways of working? Why?

When process gets focused around senior managers' issues, it can further disempower. It seems important to consult on users' terms and issues not on managers' agendas. Training is required to help the managers learn a different approach which is user focused.

What three factors have been the greatest help in your work to date?

- 1. Strong commitment from the organisation.
- 2. High profile within and outside of the organisation.
- 3. The forums having capacity to provide 'fast response' views on topics.

What three factors would most help you to progress your work?

- 1. A widening of commitment further throughout the organisation, particularly in supporting people to attend forums.
- 2. Developing strategies of involving people who use no verbal forms of communications.
- 3. The closer interface between forums and other important groups within the Trust

How do you see the future of your project?

To continue to develop forums as a platform for users to have a voice within the organisation.

To use forums as a springboard for users to take on power and valued positions within the organisation.

To 'translate' policies which affect service users into accessible formats to ensure people are aware of their rights etc.

Barnardo's Advocacy Service

Contact: Marjorie Arthurs, Barnardo's Divisional

Office, 235 Corstorphine Road, Edinburgh

EH3 7AR.

Tel: 0131 334 9893.

When did it start?

April 1987.

When will it finish?

We hope it will carry on and on.

How is it funded?

Barnardo's voluntary funding.

Geographical area covered?

Mainly central belt of Scotland including Strathclyde and Lothian but also small number of people in the Grampian Region of Scotland.

Client groups supported?

Young adults with learning disabilities and also some children.

Staffing?

Two (full-time equivalent) advocacy workers, 1 full-time co-ordinator, 1 full-time project administrator, 1 part-time secretary (12 hours).

Aims and objectives?

Through independent advocacy, empower people with learning disabilities who are eligible to be registered with the service, to live their lives as valued and responsible citizens. The service will empower people to:

- have their voice heard, either by speaking up for themselves, or through an independent advocate
- have their needs and preferences considered and respected when decisions are made which will affect their lives
- be given appropriate assistance to allow them to take normal life decisions themselves
- have their rights and interests protected
- have access to appropriate resources provided by health, social work, education, employment and housing services and by other statutory or voluntary organisations in order to meet their needs
- have access to community resources and leisure facilities
- have equal opportunities to participate and integrate into local communities as valued and respected citizens.

Have the aims and objectives changed since the work began? If yes, in what way and why?

Become less protective and more empowering because of the needs of the people who use the service

What are the advantages of having a generic advocacy project compared with advocacy working with one particular group of people, or one type of advocacy?

Some people cannot speak up for themselves. People need different approaches for different problems (although we don't see citizen advocacy as being problem orientated). People don't always want or need a citizen advocate but want to speak up for themselves. We know people in different situations. They gain confidence to ask for citizen advocacy when needed.

What are the disadvantages?

Time to do everything - both citizen advocacy and self-advocacy are time consuming.

What have you found to be the most successful ways of working? Why?

We recruit independent personal advocates and self-advocacy assistants in the same way. Induction and matching need to meet different methodological needs. Worker supports both and acts only as consultant to groups.

What have you found to be the least successful ways of working? Why?

The workers doing advocacy themselves because of time element, but also conflicts.

What three factors have been the greatest help in your work to date?

- 1. Stability and funding.
- 2. Supportive staff group (not feeling isolated).
- 3. Flexibility within a set of principles i.e. citizen advocacy which we have adapted to meet the needs of people who use the service.

What three factors would most help you to progress your work?

- 1. Guaranteed future long-term funding.
- 2. Extra funding to expand (we are already working to capacity and the demand is great).
- 3. A real commitment to advocacy from Government and service providing agencies voluntary and statutory.

How do you see the future of your project?

Changing to meet growing needs and to protect the independence of those who advocate both through self-advocacy groups and citizen advocacy partnerships.

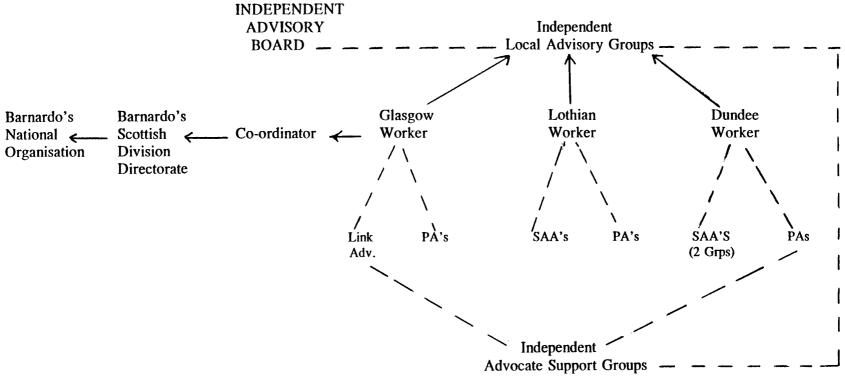
How Barnardo's Advocacy Service Works

- The philosophy of the Service is based on the principles of citizen advocacy defined by Wolfensberger, USA and the Key Idea of citizen advocacy as outline by John O'Brien from the Georgia State Advocacy Office, USA
- The basic idea is to link ordinary, independent citizens with people who have learning disabilities in order that their needs and interests are represented and protected.
- The Service aims to identify the advocacy needs of the individual and then seek a personal advocate to meet those needs.
- Advocates, once approved by the Service, become independent of the Service and any other service providing agency and accountable to their advocacy partner or advocacy group to which they are matched.
- Advocacy Service staff do not advocate. Their role is to identify people who need an advocate and link them to an appropriate independent person, and to support the partnerships and self-advocacy groups.
- Advocacy partnerships are generally on a one-to-one basis, although sometimes more than one advocate is linked with a partner. Rarely, if ever, would an advocate have more than one partner.
- Advocacy partnerships are formed on an open-ended basis, for as long as both parties want or need the partnership to exist. Some partnerships have lasted over 5 years, others for as long as it takes to deal with a specific task or issue.
- There is a pool of advocates to respond to short-term and crisis situations.
- Some people with learning disabilities registered with the Service want to speak for themselves. They have access to self-advocacy groups.
- Self-advocacy groups are supported by independent self-advocacy assistants who, once approved, are accountable to the group, not to the Advocacy Service or any other service providing agency.
- All advocates and self-advocacy assistants go through a process of induction and matching. Two personal references are sought, one written the other followed up by a personal visit. Police checks are requested.

- Induction is done on a personal basis focusing on the needs of the partner or group and identified by worker and advocate.
- A two-day induction course is offered and new advocates are strongly advised to attend.
- Ongoing training events and workshops are offered by the Service.
- All advocates and self-advocacy assistants are supported (although not directed or supervised) by a named advocacy worker.
- Advocates and self-advocacy assistants also have access to local independent advocate support groups.
- An independent counsellor is available should advocates/self-advocacy assistants want to take advantage of more intensive personal counselling and support.
- Local areas have an independent local Advisory Group which promotes and supports the local Service and the local worker. The group is made up of people with learning disabilities, advocates, parents and members of the local community.
- Local groups are represented on the independent Scottish Advocacy Advisory Board, which promotes and supports the work of the Advocacy Service.
- The staff are employed by Barnardo's and are accountable through their line management to the Divisional Director.
- People with learning disabilities, their advocates, their families and or friends have access to the independent advisory groups, or the Advisory Board to air their views, make suggestions or complaints, or they can contact Barnardo's staff and management.
- Advocacy Service staff keep in regular contact (at least on a six-monthly basis) with everyone registered with the Advocacy Service.
- People who register with the Service remain with the Service, even though they may not be actually involved with an advocate or a self-advocacy group. Having a named worker (whom they know) and knowing that the Service is there when they need it, gives them peace of mind and a sense of security.



THE ADVOCACY SERVICE STRUCTURE



PA's : Personal Advocates SAA's : Self-Advocacy Assistants Hackney Advocacy Scheme.

Contact: Carol Scott, 205 Morning Lane,

Hackney, London, E9 6JX.

Tel: 0181 525 4541.

When did it start?

About 18 months ago.

When will it finish?

On-going.

How is it funded?

By Social Services.

Geographical area covered?

At present day and residential establishments only. Hope to expand to cover those in community not receiving a service. At present will cover all of Hackney.

Client groups supported?

Adults with learning difficulties. Hope to expand to cover children.

Staffing?

Volunteer advocates recruited, trained and allocated by North East London Advocacy. At present 8-9 volunteers - hope to expand.

Aims and objectives?

Ensure service users have independent voice. Enable service users to advocate their needs, wishes and wants.

Have the aims and objectives changed since the work began? N/A.

No.

What are the advantages of having a generic advocacy project compared with advocacy working with one particular group of people or one type of advocacy?

We are able to meet a variety of needs. Individual group and gender support is offered. Also we can look at ethnic cultural minority needs.

What are the disadvantages?

Matching advocates with requests can take some time. It is more costly and time-consuming.

What have you found to be the most successful ways of working? Why?

Having independent advocates creates a stronger pressure on the organisation and reassures service users of fairness

What have you found to be the least successful ways of working? Why?

Allocating unsuitable advocates. Need to look closely at volunteers' skills and perceptions, particularly when advocates are working with people who do not communicate verbally or have a behaviour that challenges.

What three factors have been the greatest help in your work to date?

- 1. Working with independent agency.
- 2. Working across agencies i.e. involving other professionals (health etc).
- 3. Having commitment from senior managers.

What three factors would most help you to progress your work?

- 1. Having more time to devote to project.
- 2. Reassurance of financial commitment.
- 3. Reassurance of commitment to project.

How do you see the future of your project?

Unsure at present because of funding implications but would like to see project developed to cover all needs in borough.

Any other comments?

I feel this type of project is the only way forward in developing services. If services are going to be continually cut, the need for such a project is even more important to ensure service users and potential service users get the services they want and need.

Advocacy on Tap.

Contact:

Self-Advocacy Group, 16 Gombards, St. Albans. Tel: 01727 847 311 or

01727 854594

The following material is an extract from Newsletter No. 4 - St. Albans Self-Advocacy Group.

Do You Know? 2 Advocacy On Tap

We - the Advocacy On Tap Steering Committee - have just appointed Mary Leishman to help sort out shortterm problems for people who have a learning difficulty.

Example: If you think it is unfair for your employer to have a meeting with your Social Worker without telling you and without you being there.

If you have a problem like this. phone The Self Advocacy Group - St Albans on 01727 847311 or 01727 854594 any time or phone Mary in office hours on 01727 848114 Mary's leaflet follows:



Helping Hertfordshire people with learning difficulties when things go wrong

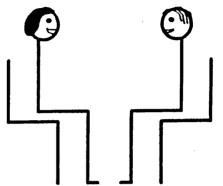
If you have a sudden problem...

If you think you need some help





Mary will come and talk to you



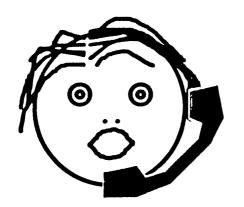
If you are still not happy



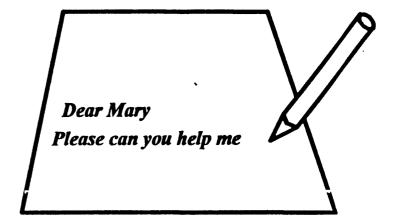
then...

73-

Phone
Mary Leishman
on
01727 848114



Or write to
Mary Leishman
at
'Community Projects'
Cell Barnes Hospital
Highfield Lane
St Albans
Herts AL4 ORG



...who can help you to speak up for yourself through your difficult time.

Don't be scared!

Use

Advocates on Tap
I'm here to help you

Mary Lèishman

Advocates on Tap Worker
'Community Projects', Cell Barnes Hospital
Highfield Lane
St Albans
Herts AL4 0RG
Tel: 01727 848114

.25-

USER-FRIENDLY COMPLAINTS PROCEDURES

Phoenix NHS Trust

Contact: Lesley Le-Pine, Assistant Director, Consumer

Relations, Phoenix NHS Trust, Headquarters, Stoke Park, Stoke Lane, Stapleton, Bristol BS16

1QU.

Tel: 0117 958 5000

How long has the complaints procedure been in use?

3 years.

How many people have used it?

Women and men with learning difficulties - 110.

We do not categorise complaints under sex of complainant. 110 is the total number of people with learning difficulties who have used the procedure themselves. This does not include advocates or other people making complaints on the person's behalf. This would be a higher figure. (In total, 264 complaints have been made - up until March, 1995).

What were the reasons for making complaints?

A wide variety of complaints, from quality of food, unhappiness with service, behaviour of staff, through to activities, work, places to live and IPPs. Too many to list individually.

How many complaints have been settled satisfactorily?

263

Please comment on the time taken to settle a complaint (e.g. on average: 'simple' complaints; most serious complaint).

Informal complaints are usually settled within a couple of days (if it is complicated it can take up to a month). If it is a formal complaint it must be resolved within a month.

UNDERSTANDING AND USING THE PROCEDURE

What training was given to users?

Service users were involved in the working group that developed the complaints procedure.

Individual and group training.

Accessible version of procedure as a leaflet and produced on tape. Also discussed at service user forums and residents meetings.

What training was given to staff?

All senior managers, home and ward managers, department managers and general staff received two days training with the emphasis on the procedure from the complainant's perspective.

What support are people given when making a complaint? Who is involved in giving this support?

People are told they are safe and will not get into trouble whatever they have to say. A friend or advocate can accompany the person if they want to talk about the complaint. A supporter can be provided if the person does not have a friend or advocate. They can speak to any boss who they trust and feel safe with or direct to the consumer relations department.

Who is involved in giving this support?

Friends, family, advocates, staff not working in direct care who the person trusts, consumer relations department, voluntary organisations etc.

MANAGING THE PROCEDURE

Who is involved in managing the procedure and how? (e.g. users, staff, advocates, parents/families etc).

Assistant Director, Consumer Relations.

Monthly figures are produced on complaints for the Trust Board. These are produced annually for 'public consumption' i.e. DoH, Trust Board, service users, voluntary organisations, forums etc.

How is your complaints officer involved?

Assistant Director is the complaints officer amongst other things!

Who is responsible for maintaining and developing the procedure?

Assistant Director of Consumer Relations in liaison with other staff and service users.

CHANGES SINCE THE INTRODUCTION OF THE PROCEDURE

What differences/influences (if any) has it had on users?

People have been able to trust that they will be listened to and taken seriously. Also that they will not get into trouble. More and more service users have been able to speak up about the services they get and many have begun to make complaints on behalf of service users who have very limited communication.

What differences/influences (if any) has it had on services?

It has had an impact on how different services are delivered. Influenced training programmes for staff, created new policies, changed old ones, highlighted areas which need attention.

Triangle Women's Housing Association Limited

Contact: Dominic Drumm, 60 Eastmeade Gardens,

Ballymoney, Co. Antrim, Northern Ireland

BT53 6BD.

Tel: 012656 66880

How long has the complaints procedure been in use? Since November, 1994.

How many people have used it?

Six women, six men.

What were the reasons for making complaints?

staff (e.g. attitudes)
other residents (e.g. invasion of privacy)
families (e.g. lack of contact)
social contact with the community (e.g. choice)
maintenance of living accommodation (e.g. repairs).

How many complaints have been settled satisfactorily?

Approximately 30.

Please comment on time take to settle a complaint (e.g. on average: 'simple' complaints; most serious complaint).

Simple complaints approximately 1 week. Serious complaints, depends on the nature of the complaint.

UNDERSTANDING AND USING THE PROCEDURE

What training was given to users?

Five group sessions - see sample session outlines attached.

What training was given to staff?

At a staff meeting, the concept of self-advocacy and empowerment was explored.

What support are people given when making a complaint?

Residents have the choice of either having a fellow resident accompany them or advocating on their own behalf. Confidentiality is assured. Staff are not judgmental but show empathy and understanding.

Who is involved in giving this support?

Residents elect two representatives to convey their complaints if they so wish. The resident's key worker, family or management committee can be contacted at any time.

MANAGING THE PROCEDURE

Who is involved in managing the procedure and how? (e.g. users, staff, advocates, parents/families, etc).

The management team in the project is involved in managing the procedure. However, it is accountable to the residents, executive management and management committee. The above management groups are involved in the implementation of the procedure, per rota.

How is your complaints officer involved?

There is no complaints officer, but a management team visits each resident on a fortnightly basis.

Who is responsible for maintaining and developing the procedure?

The management team of the project, under the guidance of the executive management and committee members.

CHANGES SINCE THE INTRODUCTION OF THE PROCEDURE

What differences/influences (if any) has it had on users?

Service users have become more assertive. They believe that they have greater power to change the service provision.

What differences/influences (if any) has it had on services?

The service provision has increasingly tailored its service to meet individual rather than group needs. The residents have identified gaps in the service which have been brought to the attention of the executive management.

The second secon

OBJECTIVE	METHODS SEQUENCE	RESOURCES
To help service user talk about their feelings when they have been unfairly treated by the staff, their friends or their environment.	A. Generalise situations of conflict. B. Talk about feelings in these situations.	Room that is spacious where each Tenant has accessible eye contact with each other.
To help service user describe how they express their feelings when they have been badly treated.	C. Using colour coding ask group members to describe what feelings they get more than others when they have been unfairly treated.	Colour Coding
To help service user describe what changes occur when they express their feelings.	Ask group members What situations do they get bad feelings (a) At home (b) At Day Centre (c) Out in the street. What happens (a) Do they do nothing. (b) Do they tell someone. (c) Do they shout. (d) Do they sulk. Ask residents is there whole change limited change no change	Flip Chart Flip Chart

()

AIM: To develop Service users ability to make better use of procedure.

Situations

OBJECTIVES	METHODS	RESOURCES
To help service User identify what situations they can complain about ie. In their environment as their	Ask each group member to describe the things they do not like about their home, the Day Centre or their life style.	Flip Chart
relationships with staff	Ask Residents to think about situations that make them unhappy with their relations with staff.	Colour Coding Disks
	Use colour coding to link their feelings with their situations.	Colour Coding Disks

AIM: To enable service user to identify the appropriate people to complain to.

OBJECTIVE	METHOD	RESOURCES
To enable service users to understand why they are being unfairly treated.	Use broad situations where conflict may occur.	Flip Chart Photographs
To show service user where they can get help outside the agency.	Ask group members to identify the people responsible for their situations.	
To show service user where they can get help inside the agency.	Ask group members to identify friends or relatives who they can complain to.	

AIM: To produce a revised complaint procedure. To evaluate effectiveness of group work.

OBJECTIVES	METHOD	RESOURCES
To enable group leader and service user evaluate how they make a complaint.	Ask each group member to go through each step of the complaint procedure.	Revised complaint procedure.
	Use pictorial aids and flip chart to	Colour Coding disc
To gain feedback on service users understanding of complaint procedure.	locate the appropriate person.	Flip Chart
To provide a revised complaint procedure.		

Wednesday Self-Advocacy Group

Contact: Antony Oats, 47 Roskear Villas,

Tucking Mill, Camborne, Cornwall,

TR14 8DG.

Tel: 01209 714985

How long has the complaints procedure been in use?

Don't know. We only found out about the procedure today in our meeting.

What were the reasons for making complaints?

Some of us have made complaints to staff or the managers of our centre or hostel.

These were:

About another student drinking out of a carton.

About not being allowed to kiss my girlfriend.

To my social worker about getting the sack from work.

To the senior managers in social services about the way staff treated us in the hostel.

To my advocate about going to a Gay Club.

To the manager for not having enough freedom.

How many complaints have been settled satisfactorily?

3 complaints. 4 have not been settled.

Please comment on time taken to settle a complaint (e.g. on average; 'simple' complaints; most serious complaint).

3 were settled quickly. More serious problems, 8-18 months. The other one has not been settled.

UNDERSTANDING AND USING THE PROCEDURE

What training was given to users?

None.

What training was given to staff?

A few staff had something.

What support are people given when making a complaint?

One person had support from an advocate.

Hackney Advocacy Advisory Group.

Contact: Gavin Pavluck, 205 Morning Lane,

Hackney, London, E9 6JX.

Tel: 0181 525 4541.

Hackney Advocacy Advisory Group is made up of service users. They are working on making the complaints procedure more user-friendly through a series of workshops and making a video and cassette tape.

In the meantime, the following Statement of Rights has been produced for all people with learning difficulties using day or residential services.

A cassette tape, a video and posters of the list have also been made.



THE RIGHTS OF PEOPLE WITH A LEARNING DIFFICULTY USING DAY AND RESIDENTIAL SERVICES

If you use any of the day or residential services provided by Hackney Social Services you have the right to expect:

- 1. To be treated with respect and have your own wishes, needs, likes and dislikes taken into account.
- 2. To be helped to take part in all things that happen in your community, going to clubs, going to weddings, going to meetings, etc.
- 3. To use all the services that everyone else uses, doctors, dentists, college classes, legal advice, etc, and to have help to do this.
- 4. That you will not be treated differently from other groups and have the right to vote, have your own home, to get married, to have children, to have a job and live the life you enjoy.
- 5. That your learning difficulty should not be thought of as an illness or a sickness.
- 6. That where you or your family come from and the place where you might pray are taken seriously, and to have help to take part in your community's activities.

- 7. To get all the support and advice that you need to help you to do things. This help should take seriously your age and what you have done in the past and your wishes.
- 8. To get the help and support you need to be healthy and to have the help you need to keep you well.
- 9. To have time on your own when you need this.
- 10. To see, and be helped to understand, what is written about you by the service.
- 11. That what the service knows about you is not told to other people unless you agree to this.
- 12. That the service will tell you what it can offer you so you can make your own choice about using the service.
- 13. To be helped to handle your own money.
- 14. That you will be helped to be safe and that your belongings will be kept safe.
- 15. To be able to choose your own sexual partner and have this respected by others, but you should not put others down if they do not want the same as you.
- 16. That your own political thoughts and views be respected by others, but you should not put others down if they do not want the same as you.

- 17. To be friends with whomever you like and to be helped to make your friendships and relationships grow.
- 18. To speak up for what you want and wish for yourself, by words or actions and/or have someone say this for you or with you.
- 19. To make your own choices and to be shown different things you can do, to try new things, make mistakes and say "No".
- 20. All decisions about your life will be made with you and if you have an advocate she/he can help you to make decisions.
- 21. To be helped to plan your own future.
- 22. To speak up about what is good, or not good, about the day or residential services and to take part in planning how they should be.
- 23. If you think you do not get the help and advice you need, or you do not get the service you want, or if you think the service is not good enough for you, you can tell someone. This is called a "Complaint". We will listen to you and take what you say seriously. If we can we will try to change what you do not like. You can tell your key/link worker, your social worker or the Manager of the service you use. You can also tell:

James Reilly
Community Care Resources Manager
205 Morning Lane
Hackney E9 6JX
Telephone: 081 525 4597

Angela Cole
Service Manager Learning Difficulties
205 Morning Lane
Hackney E9 6JX
Telephone: 081 525 4548

or

You can tell the staff in the Inspection Unit at 205 Morning Lane Hackney E9 6JX Telephone: Freephone 0800 616877

You can tell your complaint by:

- (a) writing a letter
- (b) telephoning, or have someone do this for you
- (c) by using a cassette tape
- (d) by using sign language
- (e) by using pictures to show what you want to say.

If you do not want to tell this on your own, you can have someone do this with you or for you.

King's Fund

PAST ISSUES

No. 1	Involving service users in appointing staff.	November 1991
	Using pictorial methods to enable people to communicate more effectively.	
No. 2	Stories of how people are working to get changes in services.	February 1992
No. 3	Involving users in the planning and development of services.	June 1992
	Complaints procedures - using them effectively.	
No. 4	Conflicts of interest	November 1992
No. 5	Involving users on management committees.	May 1993
	Consulting users about community care plans.	
No. 6	Involving people who have multiple disabilities.	November 1993
No. 7	Questionnaire results	November 1994
	More easy-to-use documents.	
No. 8	Consulting users about community care plans.	April 1995

