

Rogan Wolf proposes a new model for involving users in recruitment of mental health workers

Power of veto

It is becoming increasingly common to involve service users in staff recruitment. But, as usual, there is a world of difference between the real thing and the hollow gesture. Beware the hollow gesture. It is worse than no gesture at all.

The most common version is to have a service user on the recruitment panel. I think this idea has limited value, and depends on the user being extremely confident and able to come in with his/her own question, perhaps composed earlier, in consultation with other service users. And of course the user will need to have received training in equal opportunities interviewing beforehand.

It is stressful being an interviewer at the best of times; being both interviewer and representative user 'voice' is doubly pressured (I know – I've done it). Unless you are highly experienced and very sure of yourself, you are bound to look to the rest of the panel for a lead – and this is not conducive to a distinctness or authority of user viewpoint.

Members of Brent User Group (BUG) in London have been taking part in staff recruitment for some time now and have come up with an improvement on the single user model. The user rep is accompanied by a colleague throughout the interview, there for support and consultation.

But in Westminster we have successfully piloted a third model which I like best of all. Its first principle is that many staff interviews do not need a user presence at all. Far more effective, I suggest, is to hold a half-day's seminar with local personnel departments. These are the people who have to draw up all the job descriptions and person specifications. Let them hear direct from users what it is that makes a good worker, and let them adapt the person specs of all local posts accordingly. Here is real influence user can have, without filling their diaries with hollow gestures.

The second principle of this model is that users take part directly in the recruitment of senior appointments only – posts whose occupants tend to stay for some time and influence the lives of many vulnerable people. These posts include senior managers and consultant psychiatrists.

The recruitment process for these posts consists of two interview panels. The first panel is composed of the usual people and takes the final decision. The second panel is composed of trained users who ask the candidates questions that the user groups have prepared beforehand. This will particularly test the candidate's 'people skills'. This is new ground for equals opportunities interviewing – so direct and immediate an assessment of a person's personal qualities and skills in communication. Such skills, while important for the posts of senior manager, are simply crucial for the posts of senior clinician.

In our Westminster pilot we were as methodical as possible in the way we conducted our assessment. Someone from the first panel was present to act as observer. We used a checklist of attributes put together by researchers as proven indicators of good relationship skills. We matched our own observations with those of the observer from the first panel. In our pilot the two matched perfectly, as did the final choices. The pilot was a real success.

Much rests, of course, on how much power is given to the view of the second panel. Personally, I believe the second panel need have no interest in choosing the best candidate. That is the task and responsibility of the first panel. The task of the second panel is to weed out the people who are not at ease with service users, who are unskillful in relating to them, who lack empathy, genuineness and warmth. In other words, the second panel has the power of veto. In Westminster we have not quite secured that, and further negotiation remains ahead of us.

So far in Westminster, users have been involved in the recruitment of the chief executive of the local trust, a consultant psychotherapist, a consultant psychiatrist, and architects competing for the tender to build a new psychiatric hospital. Something revolutionary has quietly happened here.

In conclusion I would point out that all the above applies to user groups functioning across a locality. The second panel model could be applied just as easily within a mental health agency, such as a day centre or hostel. In this case it would be the agency's users who formed the second panel, not the district's user group; and it would mean that all the agency's staff recruitment could be undertaken with real and vital user input.

