

Altrix Healthcare Evaluation of ROMA

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Introduction

ROMA [‘Record of my Achievements’] is a programme designed to help service users collect evidence and demonstrate successes during treatment. At its heart is a behaviourist approach which seeks to reward achievement, encourage motivation and service user self-responsibility for treatment. Starting in February 2006, it has been piloted in six centres in the UK and this evaluation forms part of the process to determine its success and foster further improvement.

ROMA is both a personalised folder and a distinct approach to working with service users. The folder contains a number of modules that can be worked through systematically or tailored to individual service user need. Key workers and their managers have been supported by Altrix Product Specialists in order to enable the operation of the process of programme delivery. The evaluation sought to determine to what extent this process was universally understood between Specialists, Pilot Services and Service users. The resulting mapping of these perceptions can be found in the data analysis section [page 9]. The crux of the evaluation is determining whether the intentions of ROMA - *to encourage and motivate service users who are currently in treatment to focus on helping themselves to improve their situation and engage actively in their own treatment*¹ - have been realised. This is a pilot scheme, so it is important to identify what has worked well and what may need to be undertaken differently, to enable learning to be identified for future improvement.

The evaluation team recognised the importance of context in the operation of ROMA. Therefore, this report highlights not just the critical elements of the programme from purely the service user’s perspective but what learning can be generated for the Specialists and Pilot Services. It needs to be recognised that:

Practice is necessarily contextualised. It cannot be readily discussed independently of the settings in which it occurs’

and that

Practice is necessarily embodied. It involves whole persons including their motives and feelings; discussion of it in isolation from the person who practices is to misunderstand practice.

Professor David Boud ²

¹ ROMA Information Pack for Pilot Services. Altrix Healthcare.

² Boud, D., Cressey, P. and Docherty, P. (Eds.) (2006). *Productive Reflection at Work: Learning for Changing Organizations*. Routledge, London.

Finally, 'empowerment' is a term often used in health and criminal justice settings. This report seeks to identify the evidence-base for such claims, working from a proposition that it is the quality of the space which can be established in particular settings that leads to change in service user attitude and behaviour.

1. ROMA Project Evaluation Methodology

The ROMA evaluation consisted of consulting with and interviewing key programme partners as regards to their perceptions, views and experiences of the ROMA programme, from its inception to the present. The key programme partners interviewed were: -

- The Marketing Manager for Altrix
- The ROMA Project Team
- Service users
- Practitioners at the project sites

In developing the methodology, a mix of both qualitative and quantitative methods was agreed upon. This allowed for the gathering of data from service users and practitioners stories on their experiences in participating in and working with ROMA. Hard data was gathered and collated from the four sites that were chosen by the ROMA Project team for conducting the interview process. Only three adult service sites actually took part in the evaluation process, which were Birmingham, Mansfield and Worksop. The fourth site was unable to arrange interviews during the timescales agreed.

Utilising a qualitative methodology, a three-stage process was designed and consisted of the following steps: -

1. Interviews and collation of data on the experiences of those participating in the ROMA programme
2. Analysis of the data and the writing of the report
3. Presentation of the findings to the commissioning lead

Face-to-face interviews with practitioners and service users were arranged by the Altrix Healthcare Product Specialist Leads at each designated site. To encourage engagement of service users and to thank them for their valued contribution, incentives were available in the form of store vouchers provided by the company. For those service users and practitioners who were not able to attend for an interview, an allocated time for a telephone interview or written questionnaire was offered.

Quantitative data gathered to inform the evaluation was the:

- a) Number of modules completed
- b) Number certificates received
- c) Number of sites involved
- d) Number of practitioners involved
- e) Number of service users engaged in the ROMA programme
- f) Number of service users disengaged in the ROMA programme

An analysis of the data gathered from the interviews was then undertaken and, from this, emergent key themes identified. The themes elicited from the structure of the report centred on:

1. Assessment of whether the original service user expectations and service users were realised
2. Identification of key learning points
3. Identification of strengths and areas for development of the ROMA Programme

2. Findings

2.1 Statistics

It is clear from the statistics below that there has been a considerable take-up of the ROMA programme at both Birmingham and Mansfield. However, the number of certificates awarded to service users has been relatively low, given this potential service user base. Furthermore, the statistics for certificates awarded to particular service users shows that in the case of Birmingham, for example, 32% of total certificates awarded went to just two service users. At Mansfield, the disparity was greater, with 91% of certificates being awarded to three service users.

site	Total number of service users started ROMA	Number of service users certificates awarded to
The Terrace Birmingham	18	10
Notts Probation Service Mansfield	21	4
Sherwood Project Worksop	8	4

Table1. Roma Statistics: as of December 2006

Explanations for such disparities – low number of certificates awarded at centres given total number starting ROMA, as well concentration of awarded certificates to a relatively small number of service users – were numerous. On further investigation, through the one-to one interviews, it was found that staff awareness of the certificate process was not high. Consequently, the number of certificates awarded may not be a reliable indicator of service user take-up of the programme. Also, without this staff reinforcement of service user achievement through the certificate process then the potential power of recognition and achievement, which service users highlighted as one of ROMA's strengths, could be lost.

Secondly, interview data highlighted the lack of service user awareness of the certificates per se and it was necessary on occasions for the interviewer to show service users a sample certificate to make them aware of what one looked like. This is unfortunate because obviously service users are completing modules without getting the certificate awarded. Where service user awareness was high, often due to their key worker enthusiastically introducing and then reinforcing the use of certificates, then take-up of the module completion/certificate award process was very positive.

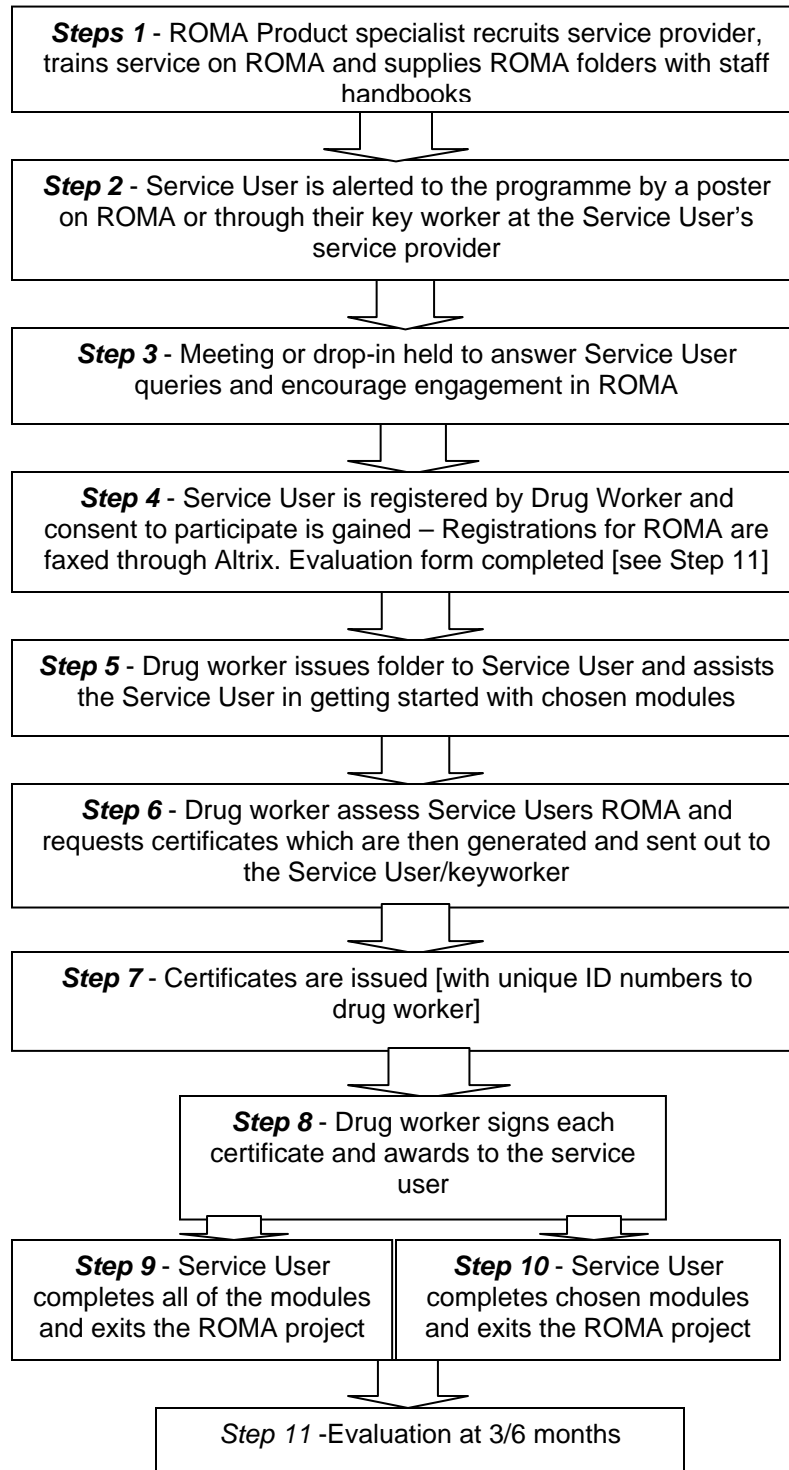
A further important finding, and potentially more worrying factor, coming out of this data collection process was the realisation through interviews that service users were undertaking ROMA but did not feature on the Altrix data base as taking part. This was most marked at Notts Probation at Mansfield.

Consequently, the identification, monitoring and recognition of certificate achievement were lost in these cases. Fortunately, the evaluation revealed these particular service users and they have now been registered as part of the ROMA programme.

On a more positive note, it must be recorded that in the case of Notts Probation Service three candidates had engaged significantly with the programme, generating sixty two certificates through completion of virtually all the modules. One service user in particular, had only started the ROMA programme just over three weeks before the evaluation interview and had completed all but one module, a remarkable achievement! On further discussion with this service user it was clear that the **timing of the intervention** was perfect for her, given personal circumstances, and resulted in the high levels of motivation.

2.2 Roma Administrative process

Using the process map below those involved in the programme were consulted to gain their understanding of what had worked well and areas where there could be further improvements to refine the process.



There were some important themes that emerged during analysis of the administrative process which impacted on the delivery of ROMA within the service and for the service user. These are set out as follows³:

Step 1 –

‘Staff turnover had an effect on the levels of operational knowledge on ROMA within service providers.’

‘[Service provider] Staff attitudes towards receiving training from a ‘commercial body’, for example, ‘who are you to tell us how to treat people?’.

No one [service providers] refused to join [the pilot].

‘Some staff saw it as extra work or simply could not be bothered, others were enthusiastic and welcomed the idea of ROMA’.

Step 2 –

There were operational problems reported with the provider services in regards to being Service Users not being alerted to the ROMA programme and how they could access it. Some service users were reported to have found out about ROMA by word of mouth through other Service Users on the programme:

‘The majority of clients that I spoke to thought that it was a really good idea and looked forward to the certification rewards’.

Step 3 –

‘Further operational problems were reported with provider services that were meant to be facilitating meetings and drop-in’

Step 4 –

‘Staff in provider services tended to pick up programmes without registering Service Users on ROMA’

Step 5 –

‘Staff gave out folders or Service Users had direct access to folders without registering on the ROMA Programme through the processes. ‘

‘Being able to take folders home with them [Service Users]and show them to family members was an encouraging aspect of the programme, I know this from receiving comments back from keyworkers [Drug workers]’

‘In some cases service users took their folder away with them. Worked really hard, but did not bring their folder with them at their next meeting. Maybe it was due to a lack of enthusiasm from key workers?’

³ The following quotations in italics are sourced from the returned questionnaires sent out to the project team.

Step 6 –

‘There were differing levels of engagement and input from drug workers to the Service Users on the programme..... Key workers that I kept in touch with, who shared a passion for wanting to make a difference, requested more certificates compared to keyworkers [Drug workers] who did not’.

Step 7 –

Staff in provider services tended to only request certificates from time to time, sometimes several at once:

‘Sending out certificates quickly made a huge impact on the service users as they received them in time for court dates.’

‘I thought that we would receive frequent requests for certificates with maybe 1 or 2 requests each time. However, this was not the case; the majority of requests received were for a large number of certificates each time.’

‘I think if we could get a request for certificates in on a regular basis the project may flow better. I also think it would benefit the service user more to have a steady flow of recognition rather than everything in one go’.

Programme Evaluation

Although evaluation sheets were formulated as part of the process, it was acknowledged that this step of the evaluation had not been fulfilled according to requirements:

‘The baseline evaluation forms were supposed to be completed for each client by their drug-worker at the time that they agreed to take part in the pilot, and then be stored in the service’s blue box file. This was agreed because some staff were not happy for this information to be held at Altrix. Unfortunately, this meant that we rather lost control of this process because, even though we asked if the forms were completed we had no evidence that they had been.’

The absence of a structured and evidenced evaluation process will have an impact on the long term capacity to measure the effectiveness of the programme. Additionally, unless the rest of the process is completed, it will be a challenge to capture lifestyle and behaviour changes associated with the programme.

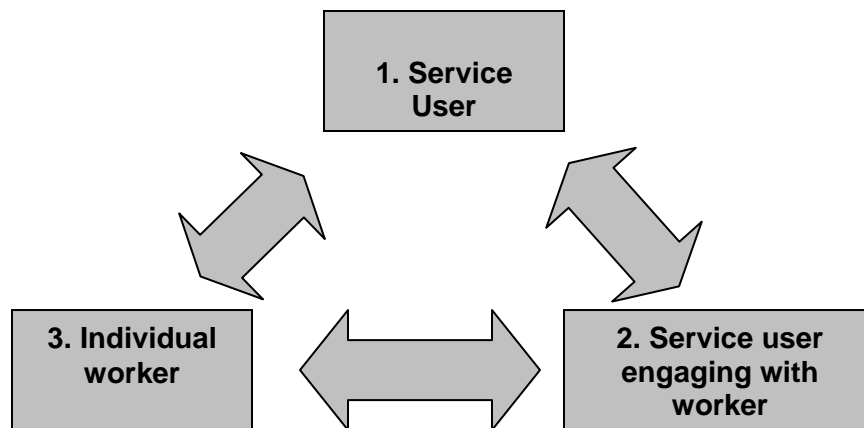
Clearly there were areas within the ROMA Pilot project that worked well and other areas that would require some more thought and consideration, particularly if the programme was to be rolled out commercially. It is a challenge to separate out the roles and responsibilities within the process although there appeared to

be a general understanding about how the process would be undertaken by all parties. In reality, through implementation, it became clear where improvements needed to be made. These will form part of the recommendations at the end of the report.

2.3 Reward and Recognition

The data from the interview process has identified three spheres of activity where ROMA's reward and recognition foundation has operated as a powerful tool for development activity:

1. For the service user
2. For the worker/s within the service being provided
3. For the engagement between service user and worker.



2.3.1. For the Service user

ROMA engendered proof, pride, hope and praise.

Proof...the service user was able to use the package and, crucially, the certificates as proof that they were recovering and positively doing something to improve their situation. Audiences included key workers, close family, friends, lawyers and court officials.

Pride...service users expressed the positive feeling completing the modules and receiving the certificates invoked in them. Feelings not commonly experienced.

Hope.... Service users interviewed spoke of the opportunity ROMA gave them that things could be different and that they themselves were capable of improving

their lot. Service user remarked that through being involved with ROMA it *'makes you feel positive'*.

Praise...many spoke of the richness of praise. That coming away with others endorsements of their actions was very motivating.

This **affective dimension to ROMA** cannot be over-emphasised. There was a strong sense expressed that it was the feelings that were invoked by certain sections that had impact, as much as the more rational step-by-step approach. Sometimes the affective and the cognitive were merged. For example, one service user spoke of the worth of his 'action plan' but at the same time it made *'me feel good'* when completed.

ROMA gave the service user space and structure for reflection

Service users spoke of how they used ROMA to occupy their time, to take thoughts away from negatives and accentuate a more positive frame of mind. It also offered a useful vehicle to think about impact of behaviours, to review effect on other areas of their lives, and how others were involved and affected by actions.

As one service-user remarked *'ROMA helped me in my rehabilitation, it helped me to focus'*.

The diary section was very helpful in encouraging reflection. A number remarked of its structure being helpful to them when things around them more chaotic. It also helped them to see that the struggle to become clean had *'good patches and bad patches'*. One service user spoke of how looking back through his diary had been really important in picking out those times when it:

'hadn't been good, but I could see that I had improved, that I was now spending £10 rather than £20, its given me motivation to carry on trying to get that down'.

One participant spoke of the diary as *'making me realise'*. When prompted as to what that was he said that, *I'd read it back and it made me think 'stop'*.

Another commented on how ROMA *'got me thinking about stopping using drugs'*.

Certificates emphasised rewards

The certificates were a powerful tool for ROMA buy-in. Service users spoke of the joy of completing modules, receiving their awards and combining this with key worker involvement [see below]. It was tangible endorsed recognition of their worth, their endeavour, and who they could be. Comments were made about *'how well produced'* the certificates were and that they looked professional and

had meaning for them. A service user remarked on how the 'certificates were a great idea, especially for showing other people; it's like me saying, look I have been trying and I have succeeded'. Another spoke of the certificates proving that 'I was 'helping myself'.

Had a sense of being part of own drug programme

A powerful outcome of the ROMA programme was that some participants believed it enabled them to 'feel part of the programme'. They had control over how they progressed, if they progressed and what the outcomes might be in terms of rewards. As one service user stated '*it drives you*' As the modules grew so did their understanding of what the programme had been about, what they needed to focus on in the future with tackling other modules. This links in closely with the point below about giving structure to the sessions with key workers. Yet it was more than that for others. One service user spoke of the way he had worked with ROMA outside of those sessions:

'I would go home and do what I wanted to do with it. It gave me something to do'

This occupation of time was important. '*I got a real sense that this was for me, that this was my folder*, stated one service user.

Wider impact of programme on family and reigniting relationships through engaging with ROMA

As highlighted above, ROMA and its attendant certificates, was powerful evidence that the service user was determined to change. Others now had the opportunity to support the service-user in carrying forward the programme. Many of the service users interviewed spoke of the way that family members were shown the certificates and the manual as evidence that they were now addressing their behaviour. This could have moving results:

'I have a thirteen year old son that I used to inject in front of. Now he goes round showing my family how his Dad is doing something for himself. It's the most powerful reason for me to be different.'

Some interviewees were more reserved about who they showed their results to. Obviously, the programme was not able to surmount some very intractable relationship dynamics built up over a period of time.

That the programme could lead somewhere

Service users spoke of the way in which ROMA offered up opportunities for them 'to now do something'. A development point is that this could be the next step in the programmes advancement, offering a pathway for discovering new opportunities, or shaping existing skills and talents.

A powerful narrative was offered by one service user when he said:

' In the last eight years I have just had my care-plan but working with this [ROMA] I now have more detail on steps to be taken for where I need to be. It's exciting. I am going to photocopy it and keep it in my drawer'. I was involved in a ten-week therapy programme with Turning Point. It was in a group. I was hopeless and it was not my thing. This is much more my thing, it seems more weighty'.

Another service user:

'I have been in treatment for the last fourteen months and it has been tough and frustrating. Over the last two months I have started ROMA and I know that it has been much more helpful than the months before'

For one service user interviewed, ROMA certainly did lead somewhere; it acted as a diversion to using substances. He stated

' I came home and I wanted drugs and I thought I don't want that to be, so I picked up the [ROMA] x-word and it just occupied me, stopped me doing it'

So what's next?

A significant finding from the evaluation has been the overall achievement of reward and recognition for service user's positive actions. However, at all the three sites visited service users expressed a concern that ROMA needed to be carried forward in some guise. Comments such as 'when I have done this, what can I do then', and 'what will this be worth, once completed', were expressed on a frequent basis. There is a danger here that expectations, quite rightly, have been lifted by the programme but also a concern that it does need some follow-up programme to continue and reinforce the effort of committed service user and supportive staff.

Two service users from different sites detailed how they have utilised their ROMA experience to help them move forward. One service user spoke of how the programme had led him to explore opportunities to '*stand on my own two feet*' and think about what he most enjoyed. He had started gardening, and friends and their neighbours had called on his services. He was now established his own small business to meet such demands. Another service user spoke of how he

wished to use his earlier film-making experience to have a visual record of his ROMA achievements. At the interview he was able to explore how this could possibly be extended to include other service users extolling their success stories, or setbacks. This led to a discussion of the possible future use of ROMA and his willingness to be involved in that innovation.

2.3.2. The engagement and interaction between service user and worker

Service users spoke of the way in which ROMA changed the nature of their relationship with their worker.

Link with sessions

ROMA was used as an important part of the way in which workers and clients structured sessions. The package was taken home and then results worked on. Or the ROMA file was kept in the offices of the worker and then brought out and worked with during the session. In the latter case the sense of ownership of ROMA possibly being more diluted compared to those service users who were given full responsibility for looking after their file and bringing it to sessions with their key worker.

Broke up the session

Some service users spoke of the repetitive nature of their sessions, an interviewee stated: *'we seem to go around the same things, the same questions and its gets boring'*.

When the ROMA programme was introduced part way through sessions, or as the focus of that session, it helped to *'break things up a bit'*, as one participant remarked. Consequently, this helped to keep the service user engaged in sessions, seeing the worth of them, contributing to the possibility of a more positive outcome when engaging with their worker.

Helped keep appointments

The diary sections of the ROMA package worked effectively and helped service users keep appointments. Good practice was evident where the programme was brought in line with the schedule with the key worker. This helped the service user [and the worker?] as seeing ROMA as an integrative part of their work together, rather than something tagged on with little relevance to the work being carried out.

Introduced by the worker

How ROMA was introduced to the service user can be seen to be critical,

especially in engendering commitment and motivation to move forward with it. Some service users described the way in which their workers did not give them any sort of guidance about the use of the programme. They felt that '*not enough support had come from the worker*' and so ROMA was not bought into sessions. Despite this, a few service users still worked with the programme in their own time. One service user spoke of the need for more guidance and '*this is what I want you to do*' type of talk from his worker.

This view was not universally held across the service user group who agreed to be interviewed but was frequently heard enough to be of concern. It was also not confined to just one centre visited. Such testimonies were common across two of the three sites and spoke of similar lack of engagement by workers...

However, other service users were more positive about their workers use of ROMA.

For one it helped her to have her own folder, '[to] see *what their work together was all about* [and] *then be able to take home what we were doing*'.

Support as tackled modules

The language used in the programme was difficult to understand for some service users, as well as getting to grips with what was required. The worker played a key role in offering help here. [*She*] *explained stuff I didn't really understand*', said one service user.

Gaining the possible outcomes from engagement also put the spotlight on the worker. Service users spoke of the way in which they involved just themselves and the keyworker in demonstrating success and discussing outcomes between themselves. In some cases the worker was the only person who saw the folder being completed and evidence generated for improvement.

The certificates were presented by the workers [see below for relevant development points] and so they played a key role in highlighting recognition and reward for the successful service user behaviour. **How this was done was not always conducive to enabling service user commitment and motivation.** One effective worker ensured that the certificates were delivered with aplomb, lots of praise and enthusiasm. Other service users spoke though of occasions when the certificate being passed over to them at the beginning of their session and '*it was low key and felt flat*'.

Self-Motivation of Service User

It was noted above that some service users were keen to progress with ROMA outside of the scheduled sessions with their worker. However, from the statistics provided, it was evident that a few even progressed without any considerable intervention at all by their worker. These 'independent' ROMA participants often completed many modules unaided and to a high standard, choosing to do this alone rather get their worker involved. This finding has real ramifications for the possible forms of delivery for ROMA if such service users are completing without any considerable agency involvement.

2.3.3. The worker

the last section emphasised the role of the worker in encouraging recognition and reward. The process of working with ROMA has emphasised **the need for worker development**. In some cases, the service user was far more positive and enthusiastic of the programme than their worker was.

Despite this such service users persevered, possibly because they could see the results for themselves of their endeavours. However, could some service users who were not so aware have been encouraged to persevere a little more through the adoption of a more positive approach?

It was clear that the relational factor was important. In other words, ROMA's emphasis on giving responsibility to the service user for the programme, and its structure lending itself to structured sessions had, as one worker remarked, 'a positive effect on my attitude to my service user'. It was satisfying for workers to see commitment, progress and the pride of the service user when receiving the certificates.

One worker commented that:

'a change in behaviour is not always discernible, what is more evident is noticing with the service user a change in feeling, that they are a lot more positive'

'Service users can be more empowered than you think'

This view of service users was offered by one worker when questioned about the effect of ROMA on their practice. The worker spoke of how service user's engagement with ROMA, and their subsequent success, had made them really think about their service users in a different way. That service users more than likely had greater resources than the worker first thought. This throws into question the ways in which 'conventional practice' possibly does not generate such resources. Negative attitudes to exploring alternatives to how workers normally practice were also highlighted by this evaluation. One worker commented on how they were used to *'working in a particular way and ROMA had to fit in'*.

However, the same worker had alongside them a colleague who was also working with ROMA. This colleague recognised the challenge it made to their practice and was trying to work more closely with their service users in fostering positive attitudes.

An opportunity arose for both workers to collaborate more closely on how ROMA was being respectively worked with, and support agency development in this regard. Unfortunately, this opportunity had not been taken, even though their service users were generating plentiful evidence of ROMA's success.

The ROMA materials from the perspective of the worker

The dominant response to the question of what workers thought of the quality of the ROMA package was that it was very professionally produced, it was '*quality and smart*' which they believed '*made the service user feel good*'.

Workers also liked its **flexibility**. Some approached it from the perspective of the service user and picked out particular modules that seemed to be appropriate to use at the time. Others saw the logic of its structure and encouraged the service user to work through it methodically.

As a **tool to support change** workers liked ROMA's approach. It '*provoked discussion*' said one, another spoke of the package enabling them to '*find out what they [the service users] are good at*'. It was apparent that workers embraced those areas of change that represented their particular backgrounds, whether from probation or as a drug worker. What they all liked were the interactive sections - the quizzes and reflective sections - that encouraged their service users to see the package as '*less dry and more interesting*'. One worker felt the package was good for encouraging change in the service user not just for the sections service users completed but also in identifying areas they were avoiding. This he felt '*saved me time*'.

The important point being raised here concerned the way in which ROMA encouraged service users to see this programme as something for them rather than a punishment being imposed.

The **certificates were an overwhelming hit**. Workers, who ensured service users had them, clearly identified their worth in showing service users what they had achieved.

One commented that the certificates were '**silver embossed quality**'!

They were an important to demonstrate to court officials what they have achieved, echoing a point made by service users.

ROMA, a number of workers commented, **is different**. It is not structured like an exam; more that it encourages the service user to:

'go away and do what you can, for yourself, see what you have achieved, and then we will work together'.

This lack of a tight time frame was seen as a real positive. It was up to the service user *'to do it at their own pace, [I am] not going to make them...it's for them to find out what they will gain from it...and then let me know why'.*

Therefore, the workers did recognise that ROMA **encouraged service user empowerment**: it was only going to be as good as the effort the service user committed to it. One worker said though that ROMA was like *'planting seeds and from that point things will come'*. This assertion complements a view held by one worker when asked if they would like to see ROMA progress. Her view was that she was very passionate about all of this:

'Recovery is selfish, it's theirs...but it is aided by setting goals and getting certificates for all the effort and achievements'.

Here ROMA is part of a wider commitment to recovery but the evidence from the evaluation showed how workers approved of the way in which the programme highlighted the need for self-motivation.

One important finding from the evaluation, in terms of the workers perspective, is how ROMA challenged their accepted ways of working with their service users. One worker spoke of how the programme enabled her to:

'Spend time 'with them' in the session....[without ROMA] often we are challenging them and checking them'.

This perceived role change brought about a restructuring of the sessions they held with service users. The same worker reflected how ROMA 'structured the session' towards 'looking at their addiction.' From a laypersons perspective this last statement may seem startling – that workers time is not spent on this important task. However, it is possibly indicative of the habitual practice that grows up in agencies where time is spent in accepted ways that become common-place for most service users.

Opening Eyes – the ROMA programme had, from the workers perspective, performed a valuable function. A majority of the workers interviewed spoke of the value of the programme being a reflective tool towards realization. This is one worker speaking of the effect on the service user of starting to become engaged in the programme:

'...she has done fantastic things in her folder. I have watched her take it home and it has just opened her eyes to issues of the past, yet not in a negative way. More it has calmed her down and sorted her thoughts out...she has been analyzing her life and her use [of substances]. Her folder is nearly complete and she has now thirty certificates.'

Obviously, this worker has been able to time the intervention when the service user was able to take on the programme's challenges. She did feel this would not always be the case, that the programme was maybe unsuitable for 'chaotic service users'. Other workers supported her view and this indicates that the **awareness needed by the worker to time the intervention effectively is important**. ROMA is not a panacea for all; more its value can be identified as a powerful tool when introduced skilfully by a worker to a service user who is ready to embark on its journey.

The role of the worker as a 'guide', as one described them in relation to the programme, manifested itself most strongly when discussing the difficulties some service users had with the language used in the ROMA programme. Here the worker's role was to help the service user with terms they did not understand [a universal view in respect of the 'word search' in Module B: Stage 1 – Drug Awareness]. It can be concluded though the view of the workers was that the level of language had not been a barrier to them working effectively with their service user. The results also from the interviews with service users supported this view. Only in a minority of cases did the service users struggle with understanding but their worker was supportive in helping their comprehension.

How service users were introduced to ROMA

A crucial step with any intervention is the way in which service users are introduced to it. This evaluation clearly identified that the practice of introducing service users to ROMA varied considerably between centres, as well as between workers in the same centre. The worker's comments above demonstrate the importance of matching ROMA to service user need and this is obviously one of its strengths. However, the data indicates that there does need to be greater consistency for how prospective ROMA users are made aware of ROMA and brought into its system of recognition of attainment.

One service user's story is instructive:

'I didn't know anything about it at first....I went on a PALS course and a girl came in with the folder....I then saw the poster in this office [the agency] when I came in next and asked them how I could get on it and what it would do for me...they told me it would help me become a drugs worker...my [lead] worker was away so I had to wait two weeks before I saw her and said I want to do it...'

It was clear from service user interviews that word of mouth played a significant

part in raising awareness. However, once service users had found out about ROMA from peers then there seemed a distinct lack of information readily available for them to act on it, especially, as in the case above, their worker was available to build upon this initial curiosity and motivation. The service user may have gone away in those two weeks and lost that moment in trying to do something to improve.

An information leaflet setting out the scope of ROMA, what it needs from the service user and how they will be supported, together with potential gains from involvement, would support this initial information process.

4. Conclusions

Process

From the process mapping exercise with the project team it was further identified that benefits would be gained by firstly, putting more detail into project development and, secondly, firming up of the roles and responsibilities for both lead specialists and service providers. This would improve the focus of the project and clarify operational roles.

The literature supplied to the author's states that evaluation would take place at 3 and 6 months intervals. It can be concluded that little or no evidence exists whether this had actually taken place.

Service User

The programme also sought to focus service users on helping themselves to improve their situation and engage actively in their own treatment. Again, the findings suggest that ROMA was successful in encouraging engagement and then taking responsibility for their treatment programme. The structuring and tone of the package were instrumental in this, as well as the reflective space that it generated for service users. Some key workers used the package skillfully and flexibly to reinforce or structure sessions. However, other service users were able to progress despite their worker being lukewarm towards ROMA. Active support by other workers was appreciated and helped many to overcome initial wariness or lack of basic skills. The majority of programme modules were well received, the only one proving problematic being the 'word search'. Apart from this exercise it is recommended that the programme should retain the current modules.

With all the success of the package comes a caveat. That by embarking on the programme service users attain recognition and reward, are then buoyed up by their success but often such progress can be fragile. "What's next?" was a frequent response to questions. A challenge remains of how to carry forward the diligence and enthusiasm for this personal learning. They recognised in interviews that they needed more, a further extension to the package that consolidated key learning points and encouraged resilience. This package extension could be 'ROMA2': the aim being to build upon past success and continually reinforce the reflective process to increase awareness of what sustains different forms of behaviour.

Interviewees also questioned the 'currency' of their resulting achievement. There were obvious affective benefits but a form of accreditation leading to a possible course of study, or credits towards a qualification, would be very useful to encourage further learning activity, as well as opening up new possibilities for

existing and emerging talents. It is recommended that these possibilities should be explored through identifying suitable development partners to fulfil these expectations.

Worker and Service Provider

As can be seen from the above, the workers role was important in terms of introducing the service user to ROMA, enabling understanding, structuring sessions, then acknowledging, through recognition and reinforcement, progress towards goals. It can be concluded that this role is one that is ripe for further development. Workers did not always display such qualities, some not being fully conversant of ROMA as they could have been, possibly challenged by the approach to working with the client in a more facilitative manner. Some workers spoke of how ROMA had performed a useful function of challenging their accepted view of clients and their capacity for change. Therefore, a major learning point from the evaluation is enabling professional development so workers are clear as to the approach taken by ROMA, identifying potential individual shortcomings, and then being able to be supported and developed to overcome them.

The following highlights the necessary characteristics that workers need to embrace when working alongside service users with ROMA. Key development points for staff willing and able to be involved are:

- a. the importance of the worker enthusiasm for ROMA
- b. that they possess the necessary skills of engagement to work with positive reinforcement and reward approaches to enable service user change.
- c. to be critically reflective of existing practice. Particularly to notice what is working and how engagement with clients can be made more flexible to sustain such practice. In this respect the study is clear that recognition and reward are powerful drivers for service user change.
- d. to link more closely with colleagues who are working with ROMA in the same agency, or other agencies, to share practice and support each others development
- e. notice what is working. In this case the study is clear that recognition and reward are powerful drivers for service user change.
- f. To identify how workers can integrate such drivers into their working practice.

With all the success of the package comes a caveat. By embarking on the

programme service users attain recognition and reward. **They are enthused by their success**, but often such progress can be fragile. “What’s next?” was a frequent response to questions. A challenge remains of how to carry forward the diligence and enthusiasm for this personal learning. They recognised in interviews that they needed more, a further extension to the package that consolidated key learning points and encouraged resilience. This package extension could be ‘ROMA2’. The aim being to build upon past successes and continually reinforce the reflective process which will increase awareness of what sustains different forms of positive behaviour.

Interviewees also questioned the ‘currency’ of their resulting achievement. There were obvious affective benefits but a form of accreditation leading to a possible course of study, or credits towards a qualification, would be very useful to encourage further learning activity, as well as opening up new possibilities for existing and emerging talents. It is recommended that these possibilities should be explored through identifying suitable development partners to fulfil these expectations.

Product

The intention of ROMA was to encourage, develop and motivate service users. The findings of this evaluation confirm that this has been the case in practice. There is clear evidence that service users felt that engaging with ROMA had instilled a sense of pride and self-worth. Further, that they were able to use such evidence to verify their progress in tackling their substance misuse. Such parties included court officials, close family members and significant others. The certificates awarded for completion of modules were a major success. Their appearance and quality was remarked upon by all as first class. They played a powerful visible role in rewarding commitment and success by service users, especially when reinforced by workers taking the time to present the award.

5. Recommendations

The recommendations are taken out of the conclusions of the previous section and will inform the basis for the next steps with ROMA.

Process

A further development would involve the appointment of a ROMA agency lead.

Their role could be to:

- a] Liaise with the ROMA representative
- b] Ensure information was available to service users at first contact,
- c] Be able to delegate this role if away from office for whatever reason
- d] Coach staff new to ROMA
- e] Monitor the agency's work with ROMA in terms of certificate raising, appropriate awarding to deserving service users, and ensuring procedures are in accordance with ROMA requirements, as determined by ROMA representative.

Attention is drawn to the 'Evaluation' element of the process map, especially given the importance of the pilot status of the programme.

An information leaflet could be developed setting out the scope of ROMA, what it needs from the service user and how they will be supported, together with potential gains from involvement, would support this initial information process.

Service users

From the findings it can be concluded that some service users were able to progress with ROMA without worker involvement. These individuals were highly motivated by what ROMA had to offer, in addition the timing of the intervention played a major role for these service users tackling modules and producing results of considerable worth. This is evidence, from their perspective, of ROMA being independent from the Agency providing their treatment programme. A recommendation could therefore be to explore options of delivery: does this have to be agency-led? Could the programme be accredited and then delivered with alternative forms of support, if needed?

Worker and service provider

With both the workers and service provider, there needs to be a deeper understanding developed focused into the importance of their role within the interpersonal process between the worker and the service user from a motivational perspective to support ROMA.

It would be worthwhile therefore to explore the idea of workforce development and training to further support implementation of ROMA

Product

ROMA could be developed further by seeking to accredit the programme and identifying key partners to develop the pathways into wraparound services and vocational routes.

ROMA would benefit from the further development of 'Reflective' elements throughout the programme to enable consolidation of learning at the end of each module.

ROMA could be further adapted for use with young people and the focus would need to be developed by engaging young people in a consultative process at the point of product development.

Establishing key targeted marketing areas would enable Altrix Healthcare to explore the options of the future potential customer base.

ROMA would further benefit from demonstrating the evidence base from within which the product has been developed by inserting literature references used to source the material.

Developing the 'What Next' element of ROMA would go towards sustaining enthusiasm, consolidate and affirm the positive behaviour changes that service users have made. In summary, this final points act to further and enhance service user resilience.