

Meeting of:	<b>Cabinet</b>
Date of Meeting:	<b>Monday, 08 November 2021</b>
Relevant Scrutiny Committee:	Healthy Living and Social Care
Report Title:	Cardiff and Vale Advocacy Strategy
Purpose of Report:	To seek Cabinet approval to publish the Cardiff and Vale Regional Advocacy Strategy and to initiate procurement process for retendering of Adult Advocacy Services.
Report Owner:	Cabinet Member for Social Care and Health
Responsible Officer:	Director of Social Services
Elected Member and Officer Consultation:	Operational Manager – Commissioning and Information
Policy Framework:	This is a matter for Executive decision
<p><b>Executive Summary:</b></p> <ul style="list-style-type: none"> <li>• The Cardiff and Vale Strategy for Adult Advocacy Services was developed by Vale of Glamorgan Adult Services in partnership with Cardiff Adult Services and the Cardiff and Vale Advocacy Network. The strategy sets out how anyone engaging with adult social care in the region is fully included in all decisions and is able to fully participate in the assessment and care planning processes as equal partners.</li> <li>• The Strategy will form the basis of a new contractual relationship with Advocacy providers across the region by: <ul style="list-style-type: none"> <li>• Adopting a systemic co-productive approach with all stakeholders</li> <li>• Forming purposeful, collaborative relationships between local authorities, health boards and providers</li> <li>• Sharing a common understanding of what advocacy is and the specific role of independent advocacy, and</li> <li>• Sharing a common agreement about when independent Professional Advocacy is appropriate, always considering its accessibility and application alongside other forms of advocacy.</li> </ul> </li> </ul>	

## **Recommendations**

1. That Cabinet considers the content of this report and approves the publication of the Cardiff and Vale Strategy for Adult Advocacy Services.
2. That Cabinet delegates authority to the Director of Social Services, in consultation with the Cabinet Member for Social Care and Health, to oversee regional arrangements for the procurement of new contracts for the provision of Adult Advocacy across the region, for which Cardiff Council will take the lead.
3. That Cabinet approves that the re-commissioning of Adult Advocacy Services be led by Cardiff Council on behalf of the region.

## **Reasons for Recommendations**

1. To ensure Cabinet is updated on the aims and ambitions for Advocacy Services to support citizens to fully participate in decisions relating to their own care and support.
2. To ensure that the process for progressing the procurement of new Adult Advocacy contracts is undertaken efficiently and effectively in accordance with the Council's policies and procedures.
3. To ensure oversight of the re-commissioning of Adult Advocacy Services by Cardiff Council on behalf of the Vale of Glamorgan.

## **1. Background**

- 1.1 The Social Services and Wellbeing (Wales) Act 2014 Code of Practice for Advocacy sets out the requirements for local authorities to:
  - Ensure that access to advocacy services and support is available to enable individuals to engage and participate when local authorities are exercising statutory duties in relation to them, and
  - Arrange an independent professional advocate to facilitate the involvement of individuals.
- 1.2 A Cardiff and Vale Regional Steering Group was set-up to explore the two Council's readiness for Independent Professional Advocacy (IPA) and to develop a regional model for the future provision of IPA. It is generally accepted that the uptake of advocacy and IPA is low throughout adult social care, both nationally and in the region. A study undertaken by the Social Care Institute for Excellence (2016)<sup>1</sup> found that this is in part due to professionals and commissioners not understanding the benefits of advocacy or their responsibilities to ensure advocacy is provided leading to under publicised services which can lead to poor outcomes for people with care and support needs.

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<sup>1</sup> <https://www.scie.org.uk/files/advocacy/commissioning-independent-advocacy/commissioning-independent-advocacy.pdf>

- 1.3** The Welsh Government funded Golden Thread Advocacy Programme developed a Framework and Toolkit<sup>2</sup> for the commissioning of IPA for Adults under the Social Services and Wellbeing (Wales) Act 2014 which highlighted the importance for each region to have a clear understanding and a clear vision of what effective independent professional advocacy will look like in practice.
- 1.4** The Cardiff and Vale Regional Steering Group made up of representatives from Vale of Glamorgan Adult Services and commissioners, Cardiff Council, Cardiff & Vale UHB and local advocacy providers with support from the Golden Thread programme have developed a regional strategy that sets out a vision for advocacy services for the next five years.
- 1.5** The Cardiff and Vale strategy for adult advocacy is informed by the Golden Thread Framework and extensive feedback from local providers and people who have used advocacy through a number of consultation events<sup>3</sup> (as Appendix A and website reference), which clearly state that advocacy in the region should be:
- Well publicised and understood by professionals
  - Easily and rapidly accessible to all sections of population
  - Led by the person with care and support needs or carer with support needs
  - General and specialised
  - Cover the wide spectrum of advocacy including IPA
  - Consistently high quality
  - Improved links to health services
- 1.6** The strategy aims to meet this challenge by setting out an ambitious range of commitments along four main themes:
- **Adopting a co-productive approach with all stakeholders** committing to co-producing a communications strategy and developing a system of reviewing the use of IPA through engagement with citizens to ensure advocacy is accessible to all.
  - **Forming purposeful, collaborative relationships between local authorities, health boards and providers** committing to emphasise and promote the benefits of collaboration; give ongoing support to the Advocacy network and jointly produce specifications and seek opportunities to innovate.
  - **Sharing a common understanding of what advocacy is and the specific role of Independent Professional Advocacy** by committing to the provision of IPA and the development of the wider advocacy sector that is general and specialist, flexible, open, accessible and incorporates the established

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<sup>2</sup> <https://www.ageuk.org.uk/globalassets/age-cymru/documents/golden-thread-advocacy-programme/programme-documents/commissioning-ipa-framework-english-oct-19.pdf>

<sup>3</sup> <https://sway.office.com/KDtvGEZISwqjQBQI?ref=Link>

principles as described in the Code of Practice and Golden Thread Advocacy Programme Framework.

- **Sharing a common agreement about when independent professional advocacy is appropriate, and always considering its accessibility and application alongside other forms of advocacy** by committing to an action plan to raise awareness of all forms of advocacy by developing a network of Champions, focussing on black, Asian, minority ethnic communities, deaf and other disabled and marginalised groups.

## **2. Key Issues for Consideration**

- 2.1** Vale of Glamorgan Adult Services currently has letters of understanding with local advocacy organisations to provide advocacy for older adults, working age adults with disabilities and mental health problems and adults with learning disabilities.
- 2.2** The current letters of understanding do not adequately meet the challenges set by the Cardiff and Vale Strategy for Adult Advocacy and so Adult Services wish to engage in new contractual relationships with advocacy providers that will meet our challenge and provide high quality advocacy services through co-produced service specifications.
- 2.3** The Cardiff and Vale Strategy for Adult Advocacy sets out a commissioning and monitoring process under guidance of section 29 of the Regulation and Inspections of Social Care (Wales) Act 2016.
- 2.4** Vale of Glamorgan Adult Services will re-commission regional advocacy services in partnership with Cardiff Council with Cardiff Council acting as lead commissioner, but both authorities will co-produce a service specification and monitoring framework as described in the Cardiff and Vale Strategy for Adult Advocacy.

## **3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?**

- 3.1 Long term** – The Council’s commitment to developing adult advocacy services represents a focus on the long-term wellbeing of people with care and support needs and carers with support needs by ensuring that they are fully involved in all decisions about their care and support.
- 3.2 Integration** – The Cardiff and Vale Strategy for Adult Advocacy promotes the integration of health and social care services by ensuring a consistent approach to advocacy across the sector.
- 3.3 Involvement** – Advocacy allows people to take more control over their lives by supporting people to be more informed to make care and support decisions.
- 3.4 Collaboration** – The Cardiff and Vale Strategy for Adult Advocacy sets out a model for collaboration between authorities, third sector organisations and

critically people who use our services to be fully involved in decisions that impact on citizens with care and/or support needs.

- 3.5 Prevention** – Adult advocacy enables all people the same opportunity to take meaningful control over their lives, access preventative services and secure their wellbeing.

## **4. Resources and Legal Considerations**

### **Financial**

- 4.1** The developments detailed within this report will be achieved within the agreed budget, but it is acknowledged that greater promotion and uptake of advocacy services may require further investment in advocacy services in future. This future demand and cost pressures are as yet unknown.

### **Employment**

- 4.2** There are no Council employment implications as a direct result of this report, but the commissioning of new adult advocacy providers may have TUPE implications for employees of providers currently providing advocacy under existing arrangements.

### **Legal (Including Equalities)**

- 4.3** There are no legal implications as a direct result of this report.

## **5. Background Papers**

Consultation feedback on the draft Cardiff and Vale Strategy for Adult Advocacy.

# Cardiff and Vale Strategy for Adult Advocacy Services

2021-2026

*"...forming a fundamental  
element of adult  
social care..."*



## Acknowledgement

We would like to thank everyone who has helped to produce this strategy for Advocacy services for adults living in Cardiff and The Vale of Glamorgan. Without everyone's hard work and support this would not have been possible.

Special thanks to Cardiff & Vale Advocacy Network.

## Foreword

Feeling involved and in control of your own decisions is essential to a feeling of wellbeing and personhood. Advocacy helps people to understand, participate and where possible take the lead in decisions about their lives. This is never more important than when making decisions about one's health and social care.

We are pleased to present our first joint Adult Advocacy Strategy which sets out ambitious targets for collaboration and co-production across all areas of Adult Social Care. Advocacy should be available to all: from the provision of accessible information, so people can make informed decisions; to the provision of an Independent Professional Advocate to ensure people's voices are heard and respected when making decisions about social care and support needs.

As a partnership, we are committed to developing services that help people to choose and control the care and support they need to live their lives in the way they want. Advocacy will enable everyone the same opportunity to fully participate in their care and support, no matter what their circumstance.

We commit to continue to develop our services, focussing on the strengths of the people we work with and the communities in which we live. By connecting people and organisations together, we will co-produce new opportunities for everyone to contribute to their own lives and the life of their community and lead fulfilled lives.

Cardiff and the Vale of Glamorgan Councils will work together to achieve the vision set out in our Advocacy Strategy by jointly developing and delivering services, making best use of shared resources to maximise the offer to our citizens to support them to exercise their right to choice and control.

We will do this in partnership with people who are the experts in their own lives and their own communities to ensure we achieve the aims of this Strategy.



*Cllr Susan Elsmore*

*Cardiff Council Cabinet Member for  
Social Care, Health and Well-being*



*Cllr Ben Gray*

*Vale of Glamorgan Council Cabinet  
Member for Social Care and Health*





# Our Vision for Advocacy in Cardiff and The Vale of Glamorgan

'There should be no barriers for people's voices to be heard whenever they are engaging with Adult Social Services, whether an adult with care and support needs or a carer'.

The Strategy sets out how Cardiff Adult Services and The Vale of Glamorgan Adult Services will ensure that everyone engaging with adult social care is fully included in all decisions and is able to participate fully in the assessment and care planning of their adult service as equal partners.

The Cardiff and Vale Advocacy Strategy will meet this challenge by:

## **Adopting a systemic co-productive approach with all stakeholders**

Advocacy should be provided and experienced as an equal partnership with the person to honestly and openly represent the citizen's voice so that they can be in control of their lives and their care and support.

Advocacy providers will ensure transparency through involving people who use advocacy in their development and quality monitoring.

The Advocacy Strategy itself is developed in partnership with the local Advocacy providers and people who use advocacy.

## **Forming purposeful, collaborative relationships between local authorities, health boards and providers**

The Cardiff and Vale Regional Partnership Board has established purposeful working relationships between the two local authorities, the Cardiff and Vale local health board and the third sector and is taking a leadership role in the development of this strategy.

## **Sharing common understanding of what advocacy is and the specific role of independent professional advocacy (IPA)**

Independent professional advocacy should be

seen in the context of a spectrum of advocacy. People's needs for advocacy will vary throughout their life, as they encounter different life stages and changes in circumstances.

Advocacy Services should be coherent and flexible enough to prevent needs from arising or escalating, to adapt to people's changing needs throughout their journey, and to manage a smooth transition to greater independence.

## **Sharing a common agreement about when independent professional advocacy is appropriate, and always considering its accessibility and application alongside other forms of advocacy**

Partners should share a common understanding about when independent professional advocacy is appropriate and be ready to make 'active offers' of IPA at the earliest opportunity and throughout the person's care and support.

The benefits and timeliness of the different forms of advocacy should be transparent and fully understood by commissioners and partners.

Access to advocacy should be simple and available without delay



## Introduction and Background

The Social Services and Wellbeing (Wales) Act 2014 strengthened the responsibilities for local authorities and health boards to provide an enhanced range of advocacy services and introduced a duty to provide Independent Professional Advocacy (IPA).

Advocacy has an important role in raising the voice of people who may need adult care and support services and carers who need support, so that each individual can be fully involved and in control of each element of their care and/or support. Advocacy should form a fundamental element of adult social care wherever an individual is not able to fully participate in their own care and support, to ensure the person remains in control of their personal wellbeing outcomes.

The Cardiff and Vale Regional Partnership Board (RPB) committed the two local authorities to co-produce a joint approach to advocacy that:

- Promotes a strong, positive image of Independent Professional Advocacy throughout the Region to encourage people's access.
- Provides easy access to Independent Professional Advocacy and other forms of advocacy and support.
- Provides high quality advocacy and Independent Professional Advocacy (IPA) to anyone who needs it without delay

The Cardiff and Vale Advocacy Steering Group was set up with the support of the Golden Thread Advocacy Programme. It includes representatives from Cardiff Council and Vale of Glamorgan Council Adult Services, Social Services Commissioners and Cardiff and Vale Health Board along with representatives of advocacy providers.

The steering group was established to explore and set out the responsibilities and duties to provide advocacy in the Social Services and Wellbeing (Wales) Act 2014 and associated Codes of Practice to:

Update the RPB on the current provision of Advocacy across the region

Remove any barriers to accessing advocacy in the region

Expose and rectify any gaps in provision across the region

And ultimately to collaboratively develop a regional Commissioning Strategy to set out the RPB's vision for advocacy services for the next five years.

The Cardiff and Vale Advocacy Network of local providers and commissioners was set up at the same time to improve the links between the established advocacy providers, create opportunities for shared learning and improvement and to act as a resource of expertise to inform the work of the Steering Group.

The National Framework for Commissioning Independent Professional Advocacy in Wales was produced by Welsh Government in 2019, was the culmination of the work of the Golden Thread Advocacy Programme. The Framework sets out a nationally recommended approach to advocacy and forms the basis for this Strategy.



## Mental Health and Mental Capacity Advocacy

Individuals have a statutory right to Independent Mental Health Advocacy (IMHA) under the Mental Health Act 1983 (2007 amendment) and Independent Mental Capacity Advocacy (IMCA) under the Mental Capacity Act 2005.



The Mental Health Act 1983 (2007 amendment) requires that every Health Board in Wales and England makes an IMHA service available for all qualifying patients that want it. In Wales, the Mental Health Wales Measure (2010) has extended this requirement and expanded those who qualify for the service. IMHAs act in relation to

medication, treatment and care for the patient's living with mental illness.

Under the Mental Capacity Act (2005), there is a statutory right to advocacy for people who lack mental capacity to make certain decisions and who are 'un-befriended'. IMCA gives people who have an impairment, injury or a disability which results in them being unable to make a specific decision for themselves, the right to receive independent advocacy support and representation.

The Cardiff and Vale Health Board commission IMHA and IMCA under separate arrangements do not form a part of this strategy but remain an important component of the advocacy landscape within the region.

Alongside IMHA and IMCA, Community Mental Health Advocacy is also commissioned by the Cardiff & Vale University Health Board for those persons receiving secondary mental health care, being managed by a Community Mental Health Team.



## Advocacy and the Social Services and Wellbeing (Wales) Act 2014

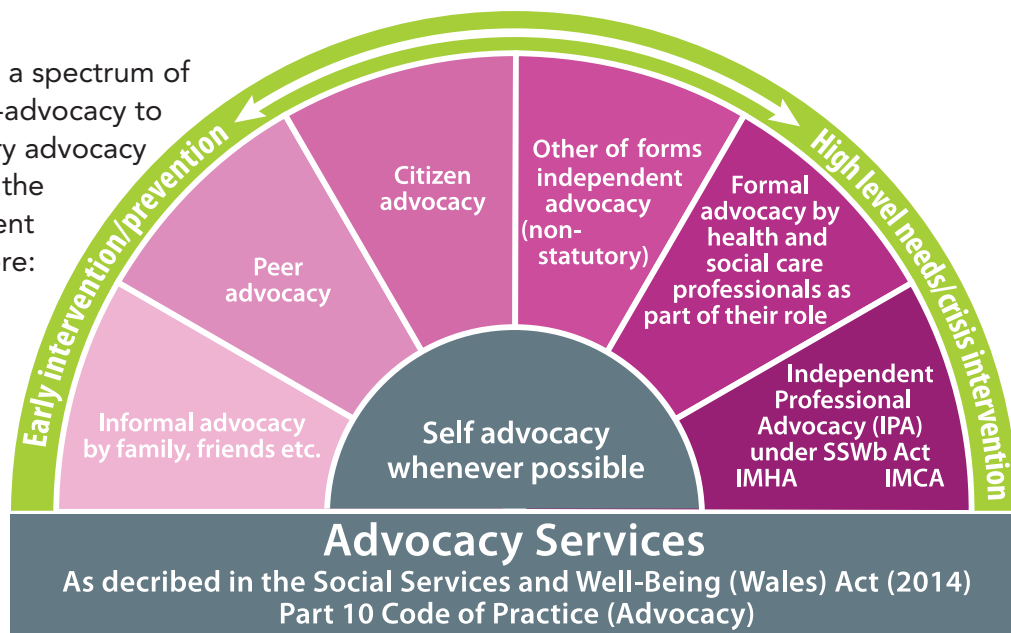
The Social Services and Well-being (Wales) Act 2014, hereafter known as 'the Act', seeks to ensure that people who need care and support or who may need care and support, and carers who need support are able to have their voice heard on issues that matter to them.

It aims to defend and safeguard rights and support people to have their views and wishes genuinely considered when decisions are being made about their lives.

Advocacy ensures people are heard throughout adult social care by safeguarding equality, social justice, social inclusion and human rights. It aims to make things happen in the most direct and empowering ways possible.



The Act recognises a spectrum of advocacy from self-advocacy to formal and statutory advocacy as illustrated within the Framework document and reproduced here:



The need and right to advocacy should be considered from the first point of contact (Information, Advice and Assistance) through to assessment and beyond into the provision of Care & Support Services.

The Social Services and Wellbeing (Wales) Act 2014 Code of Practice (Advocacy), hereafter known as 'the code' requires local authorities to:

- a) ensure that access to advocacy services and support is available to enable individuals to engage and participate when local authorities are exercising statutory duties in relation to them and,
- b) arrange an **Independent Professional Advocate (IPA)** to facilitate the involvement of individuals in certain circumstances.

### The Code of Practice (Advocacy)

*"Advocacy is taking action to help people say what they want, secure their rights, represent their interests and obtain services they need. Advocates and advocacy schemes work in partnership with the people they support and take their side. Advocacy promotes social inclusion, equality and social justice."*  
(Action for Advocacy, 2002).

**Independent Professional Advocacy** is also referred to as "statutory IPA" or "IPA under the Act" (i.e. for purposes relating to care and support). This distinguishes it from non-statutory IPA which may be accessed for a much broader range of issues.

Paragraph 47 and 48 of the Code states:

*Local authorities must arrange for the provision of an independent professional advocate when a person can only overcome the barrier(s) to participating fully in the assessment, care and*



support planning, review and safeguarding processes with assistance from an appropriate individual, but there is no appropriate individual available.

**Participating fully** enables the individual to express or have represented and taken into account their views, wishes and feelings; that they understand their rights and entitlements; the decision making process; what matters to them; the personal well-being outcomes that they wish to achieve; the barriers to achieving those outcomes, and the options and choices available to them.

The 'barriers' are described in chapter 12 of the Code and include barriers to understanding, retaining, using or weighing information, or to communicating views, wishes and feelings. If a judgment is then reached in partnership with the person that there is no appropriate individual or other form of advocacy available, the person **must** be referred to an IPA service.

The role of the **appropriate individual** is described in chapter 13 of the Code and includes supporting someone's full engagement and participation in determining their well-being outcomes. A person cannot be an appropriate individual if they are:

- someone the individual does not want to support them
- someone who is unlikely to be able to, or available to, adequately support the individual's involvement, or
- someone implicated in an enquiry into abuse or neglect or whose actions have influenced a local authority decision to consider adult protection and support order actions or protection activity in respect of a child.



## Principles for Advocacy Services

The Code says the following principles should be reflected in arrangements for planning, commissioning, monitoring or review of advocacy services in the area. The process must ensure that people are empowered to express their own views, wishes and feelings and are able to participate fully as equal partners.

Advocacy services should:

- be led by the views and wishes of the individual
- be champions of the individual's rights and needs



- be well publicised and easy to use
- work exclusively for the individual
- be well managed, prompt, responsive and provide value for money
- respect confidentiality
- have effective, accessible Compliments and Complaints procedures
- promote and monitor equality

## What are the types of circumstances when individuals may require advocacy services?

The Social Services and Wellbeing (Wales) Act 2014 Part 10 Code of Practice (Advocacy) sets out the circumstances when Advocacy must be made available when an adult can only overcome the barriers to participate fully in the **assessment, care and support planning, review and safeguarding processes** with the assistance from an appropriate individual, but there is no appropriate individual available:

These include but not exclusively:

- when making decisions that will have a significant impact on their day to day life including:
  - a. assessment, care and support planning, reviews
  - b. safeguarding
  - c. accessing information, advice and assistance
  - d. where they are going to live
  - e. the assessment of or changes to informal care and support arrangements and
  - f. moving from receiving care and support via a care and support plan, or support plan if they are a carer, to receiving care and support from preventative wellbeing support in the community.
- when external factors impact on their care and support arrangements, for example, provider failure; care home closure; changes of management or ownership arrangements in care homes



- when suspected of being at risk of harm or neglect, and
- when preparing to leave hospital and return to the community.

## Managing/Supporting Independence

The principles of independent advocacy **must** be clearly acknowledged and supported by social care providers and practitioners and other professionals with whom the advocates will be working.

Independence should be built into all stages of independent advocacy provision, including:

- The service level agreement entered into between the commissioners and the advocacy provider
- The establishment of appropriate feedback arrangements so that the independent advocacy service can report both outcomes achieved as a result of service provision and concerns to the commissioners on both a regular and urgent basis, while maintaining the anonymity (where necessary)
- Independent advocacy service governance arrangements which reinforce the independence of its management

Independent advocacy providers should ensure that their independent status is reinforced through:

- High standards in advocacy practice as measured against the National Standards and Outcomes Framework,
- Strong partnership working with service users, professionals and commissioners



- Publicity material and agreed confidentiality policies.

### ■ Making Voices Heard

The Older Peoples' Commissioner for Wales' report on advocacy *Making Voices Heard* (May 2018)<sup>7</sup> made some important recommendations, including:

- Local Authorities and Health Boards must ensure that their workforces are sufficiently skilled and trained so that they are knowledgeable on independent advocacy and the benefits of its use, and this should include sufficient knowledge and

competencies on the legal entitlements to statutory independent advocacy. Local Authorities and Health Boards must scrutinise the effectiveness of workforce competencies in relation to independent advocacy.

- Local Authorities and Health Boards must improve the offer of statutory and non-statutory independent advocacy, with the Welsh Government mandating an 'Active Offer' to include older people living in care homes and older people awaiting hospital discharge.



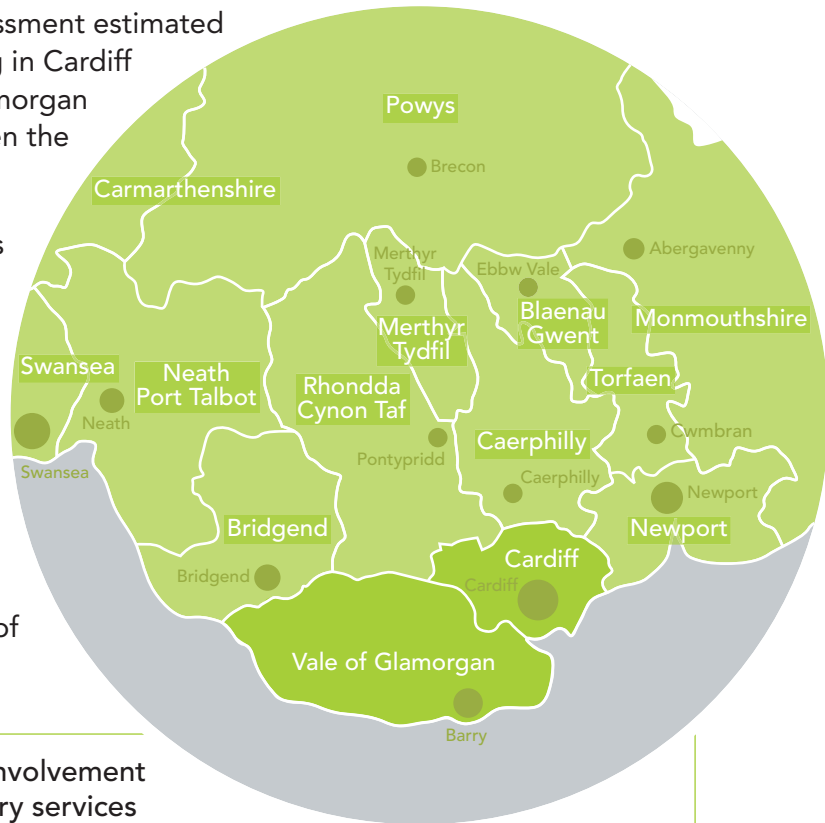


## Cardiff and The Vale of Glamorgan – Regional Context

The Cardiff and Vale Population Needs Assessment estimated that in 2015, there was 357,160 people living in Cardiff and 127,592 people living in the Vale of Glamorgan and highlighted significant inequality between the most deprived and least deprived areas.

The Population Needs Assessments suggests that as advocacy services broaden out, the availability of advocacy for older people reduces – especially affecting older people without children and older people from the LGBTQ community.

The Cardiff and Vale of Glamorgan Area Plan for Care and Support Needs (Shaping Our Future Well-being: Me, My Home, My Community' 2018-2023 sets out a range of cross cutting care and support needs, many of which have direct relevance to advocacy as:



**Key finding 1:** Increase citizen involvement in shaping preventative and reactionary services

**Key finding 2:** Promote and improve access to high quality and accessible information and advice

**Key finding 5:** Support people to make healthier lifestyle choices to reduce the prevalence of unhealthy behaviors

**Key finding 6:** Improve access to low level and specialist mental health care and support

**Key finding 10:** Develop services to respond to existing and future care and support needs, including those for carers

**Key finding 11:** Improve support for people as they transition between services

**Key finding 12:** Improve organisational working practices, to ensure that services help people to achieve the outcomes they seek

The Area Plan also specifically recognizes the need to improve access to different types of advocacy for older people, including people living with dementia.

The Cardiff and Vale Population Needs Assessment highlights the need to improve the provision of high-quality information and to

simplify access to services and recommends that improved awareness, signposting and access to different forms of advocacy is a key method to reach this objective.



## Development of the Strategy

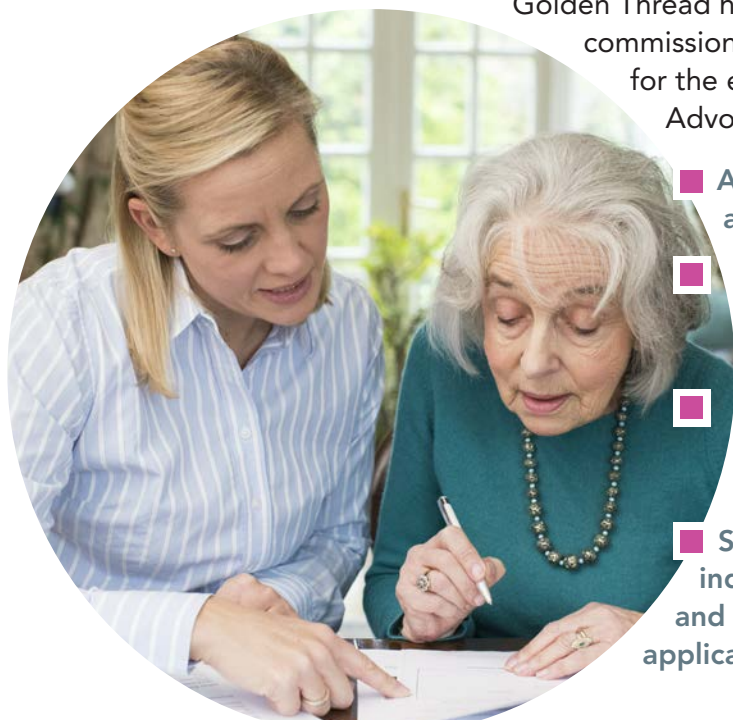
This strategy has been developed by Vale of Glamorgan and Cardiff Council Adult Services in partnership with the Cardiff and Vale Advocacy Network. The draft strategy was informed by a series of consultation events, and through regular liaison with advocacy providers.

A formal consultation of the draft strategy took place during March and April 2021, taking the form of focus groups and online questionnaires. The focus groups were made up of commissioners, social work teams, social care providers, advocacy providers and people who use advocacy services. Details of the consultation feedback can be found in the appendices.

## Cardiff and Vale Advocacy Strategic Priorities

Welsh government commissioned AgeCymru to deliver the Golden Thread Advocacy Programme to support the implementation of Part 10 of the Social Services and Wellbeing (Wales) Act 2014.

Golden Thread have produced the Framework and Toolkit for the commissioning of Adult Advocacy and set out four principles for the effective commissioning of Independent Professional Advocacy:



- Adopting a systemic co-productive approach with all stakeholders
- Forming purposeful, collaborative relationship between local authorities, health boards and providers
- Sharing common understanding of what advocacy is and the specific role of independent professional advocacy
- Sharing a common agreement about when independent professional advocacy is appropriate, and always considering its accessibility and application alongside other forms of advocacy

### Priority 1:

#### Adopting a systemic co-productive approach with all stakeholders

The Cardiff and Vale Regional Partnership Board is committed to working alongside citizens, services users and carers to inform the development and quality of social services across the region.

Our Strategy for Advocacy will be co-produced with citizens and professionals, including statutory and independent organisations working together in equal partnership, sharing power and responsibility for decision making.

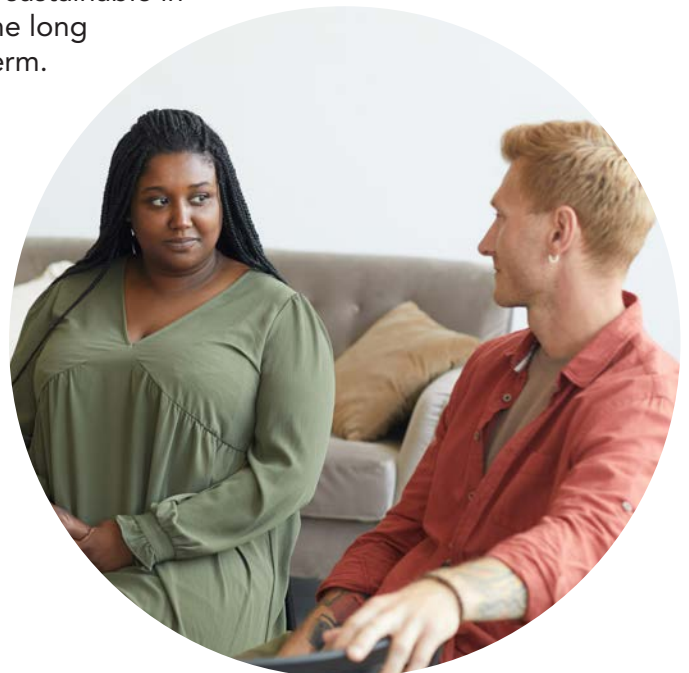


The Cardiff and Vale Advocacy Network, consisting of all local advocacy providers, including people who use advocacy services will be instrumental in the development of this strategy and the commissioning intentions of the two local authorities that will follow.

To seek to promote the benefits of collaboration whilst recognising that service providers may

be in competition with each other. We believe that our process of 'competitive dialogue' is compatible with co-productive commissioning. The process enables us as commissioners of services to talk with providers and draw upon their expertise prior to finalizing a service specification, thus ensuring that a range of different solutions are considered before the tender commences in 2021/22.

Citizens have a vital role in this co-production process. This strategy will continue to support their involvement as effectively as possible, including through provision of appropriate training, to ensure this co-productive commissioning strategy is sustainable in the long term.



**Our commitment:**

**To** involve all partners in estimating the demand for independent professional advocacy, and engage with communities and community organisations, e.g. third sector providers of preventative services, to identify how independent professional advocacy may be relevant to meeting needs. This will be done through engagement with citizen panels, health and social care services and the Advocacy Network of providers.

Starting from the point of view of people who use the services and their carers, we will design commissioning models based on an approach which embraces the principle of co-production.

**With partners we will** co-produce a communication strategy, which is well publicised and disseminated through a range of formats, media and locations to ensure it is accessible.

**We will** develop system for reviewing the use and effectiveness of independent professional advocacy through engagement with citizen panels, health and social care services and the Advocacy Network of providers.

**We will** ensure that co-production really works by creating the right working environment so that services are accessible to all.

## Priority 2:

### Forming purposeful, collaborative relationships between local authorities, health boards and providers

The Cardiff and Vale Regional Partnership Board has established purposeful working relationships between the two local authorities, the Cardiff and Vale local health board and the Glamorgan Voluntary Service and is taking a leadership role in the development of this strategy.

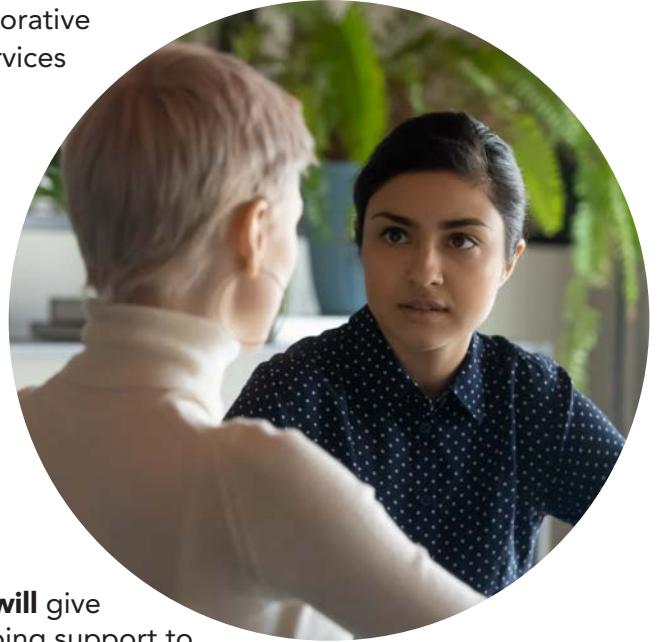
Advocacy is therefore placed within the regional collaborative governance arrangements of local health and social services and the collaborative approach we are adopting in this strategy will be evidence through the commissioning process that will follow.

#### Our commitment:

**We will** emphasize and promote the benefits of collaboration whilst recognizing that providers may be in competition with each other.

**We note** the challenges and obstacles that collaboration can present for some small service providers, such as lack of capacity, time commitment, skills and knowledge etc, so we will seek to overcome these obstacles, in the interests of developing services, locally that meet the needs of individuals that require different types of advocacy support.

**We will** create opportunities for key people to get together – commissioners, providers from all sectors, health, and any other interested parties involved in the commissioning process.



**We will** give ongoing support to the Advocacy Network to enable productive dialogue between providers and commissioners.

**We recognise** that real benefits will accrue from valuing each other's roles, and work towards shared aims and objectives.

**We will** jointly produce requirements and specifications for the service that encourage sufficient supply of services and the development of a skilled workforce

**We will** seek opportunities to innovate as a result of the collaborative approaches to funding.



### Priority 3:

## Sharing common understanding of what advocacy is and the specific role of independent professional advocacy

Through the Advocacy Steering Group, the Cardiff and Vale Regional Partnership Board (RPB) have worked together with partners to develop a regional approach to adult advocacy. However, recognizing the different demographics, geography and approaches to delivering social services in each locality, we are keen to support a flexible approach to commissioning advocacy that takes these differences into account.

The RPB has adopted a set of common principles to inform future advocacy commissioning, drawn from the Part 10 Code of Practice and Golden Thread Framework and Toolkit for Commissioners.

The Part 10 Code of Practice states that the following principles should be reflected in the arrangements for the planning, commissioning, monitoring and review of advocacy services in their area.

Advocacy services are:

- led by the views and wishes of the individual
- champion the rights and needs of individual
- work exclusively for the individual
- are well publicised, accessible and easy to use
- provide appropriate assistance to individuals taking into account their specific needs
- are well managed and provide value for money
- listen to and reflect the views and ideas of individuals to improve the service provided
- are responsive and provide help and advice quickly when contacted
- operate to a high level of confidentiality and ensure individuals and partner agencies are aware of its confidentiality policies
- have an effective and easy to use complaints procedure, and
- have clear policies to promote equality issues and monitor services to ensure that no-one is discriminated against.

### Our commitment:

**We will** commission advocacy services making a clear and balanced commitment to both provision of IPA under the Act and supporting development of the wider advocacy sector, including self-advocacy.

**We will** ensure that the commissioning of advocacy services is based on the right principles and these should be set out in the strategy to guide future procurement.





**We will** ensure ongoing engagement with providers to clarify the active offer, develop a collaborative approach, improve equality of access, raise awareness and understanding of advocacy and deliver a comprehensive and inclusive service that successfully meets individuals' different needs for advocacy.

**We will** ensure that the regional service should be provided through a combination of generic and specialist advocacy.

**We will** ensure that flexibility is a key requirement of future services, to ensure that individuals can access the form of advocacy support that is right for them.

**We will** ensure that there is sufficient time allowed to enable trusting relationships to be built.

**We will** consider the ongoing use of the Gateway to advocacy services, but prioritise the accessibility of services over any existing structures.

**We will** ensure that a clear, simple and open access referral process should be produced and widely disseminated.

**We will** ensure that service specifications incorporate the established principles and standards of a quality advocacy service, as described in the Part 10 Code of Practice and the Golden Thread Advocacy Programme Framework.



Priority 4:

Sharing a common agreement about when independent professional advocacy is appropriate, and always considering its accessibility and application alongside other forms of advocacy

Independent professional advocacy should be seen in the context of a spectrum of advocacy. People's needs for advocacy will vary throughout their life, as they encounter different life stages and changes in circumstances.

The Golden thread Framework suggests that local authorities should ensure that the advocacy services they commission are flexible enough to prevent needs from arising or escalating, to adapt to people's changing needs throughout their journey, and to manage a smooth transition to greater independence.

The "Spectrum of Advocacy" model developed by the Golden Thread Advocacy Programme shows the full spectrum of advocacy under "the Act" including independent professional advocacy which should be available to support people at different times and in certain circumstances. It covers stages from early intervention through to crisis management.



The vital importance of raising awareness and improving understanding of advocacy has been a consistent message from the start of the commissioning process. Without this, take-up of the advocacy offer for adults in the social services system is likely to remain low, and individuals who could benefit from advocacy will continue to miss out on the specialised form of support that advocacy provides.

The Social Care Wales Information and Learning Hub provides a range of training materials on advocacy under the Act. The Social Care Institute for Excellence (SCIE) also provide some more detailed information about the different types of advocacy that are outlined in chapter 8 of the Part 10 Code of Practice.

The Older People’s Commissioner and the Golden thread for Advocacy Programme have both produced advocacy videos, together with a range of other materials aimed mainly at the general public.

### Our commitment:

**We will** co-produce an action plan for a regional awareness raising campaign to cover all forms of advocacy, including IPA through:

- developing a network of advocacy champions as part of the awareness raising campaign to widen the reach of the campaign.
- focusing our awareness raising resources to support people who are considered to be “hard to reach”, including Black, Asian and Minority Ethnic (BAME) communities, the Deaf community and other disabled and marginalized groups.
- ensuring that the awareness raising campaign involves citizens, commissioners, health and social care professionals and providers to demonstrate co-production in practice.



## The Commissioning and Monitoring Process

Statutory guidance issued by the Welsh Ministers under section 29 of the Regulation and Inspection of Social Care (Wales) Act 2016 sets out:

- how providers of regulated advocacy services may comply with the requirements imposed by regulations made under section 27 of the Act, and
- how persons designated as a responsible individual for a regulated advocacy service may comply with the requirements imposed by regulations made under section 28 of the Act.

These requirements are contained within Parts 2 to 15 of The Regulated Advocacy Services (Service Providers and Responsible Individuals) (Wales) Regulations 2019. Section 29(3) of the Regulation and inspection of Social Care (Wales) Act states that providers of regulated advocacy services and designated responsible individuals must have regard to this guidance in meeting requirements imposed by regulations under sections 27 and 28 of the Act.

The Strategy follows the commissioning process as described in the Golden thread for Advocacy Programme Framework and Toolkit.

The Golden Thread toolkit sets out a framework for commissioners to consider when procuring advocacy services:

■	Analyse	Understand the values and purpose of the agencies involved, the needs they must address and the environment in which they operate
■	Plan	Identify the gaps between what is needed and what is available and decide how these gaps will be addressed
■	Deliver	Secure services and ensure they are delivered as planned
■	Review	Monitor the impact of the service and ensure any future commissioning activities take the findings of the review into account

What we know:

Analyse	
Individual	<ul style="list-style-type: none"> <li>■ How many adults use advocacy services.</li> <li>■ The effectiveness of advocacy services in helping people participate in care and support decisions.</li> </ul>
Health & Social Care Sector	<ul style="list-style-type: none"> <li>■ Advocacy is highlighted as a priority need for older people and people living with dementia.</li> <li>■ The number of people accessing Independent Professional Advocacy through the medium of Welsh.</li> </ul>
Wider Community	<ul style="list-style-type: none"> <li>■ The number of people who have accessed IPA to enable their participation with preventative and Information, Advice and Assistance services.</li> </ul>
Service Provision	<ul style="list-style-type: none"> <li>■ Long established relationship with Advocacy providers.</li> <li>■ Well attended Advocacy Network.</li> </ul>



What we need to know:

## Analyse

<b>Individual</b>	<ul style="list-style-type: none"> <li>■ How many adults need advocacy services but are not able to access the appropriate service at the appropriate time.</li> <li>■ The number of adults receiving health care and hospital care that cannot fully participate in their care and do not have an appropriate individual to advocate for them.</li> <li>■ The number of adults receiving health care and hospital care that cannot fully participate in their care and do not have an appropriate individual to advocate for them.</li> </ul>
<b>Health &amp; Social Care Sector</b>	<ul style="list-style-type: none"> <li>■ Any difference in use of advocacy between people who self-manage their care and those who have a Care&amp; Support Plan.</li> <li>■ The impact of IPA on an individual's satisfaction with their Care &amp; Support.</li> <li>■ The impact of a person's particular circumstance or disability on their ability to access IPA.</li> <li>■ A clear and systematic understanding of the role of the Appropriate Individual to act as Advocate and thus have a good understanding of healthcare and care &amp; support services.</li> </ul>
<b>Wider Community</b>	<ul style="list-style-type: none"> <li>■ The number of people who need IPA to fully participate in preventative interventions and Information, Advice and Assistance services.</li> </ul>
<b>Service Provision</b>	<ul style="list-style-type: none"> <li>■ Local advocacy providers not linked in with the Network.</li> </ul>

What we need to know:

## Plan

<b>Individual</b>	<ul style="list-style-type: none"> <li>■ The number of people who have advocacy needs identified at assessment or review, but already have an appropriate individual.</li> <li>■ The number of people who have advocacy needs identified at assessment or review, but do not have an appropriate individual.</li> </ul>
<b>Health &amp; Social Care Sector</b>	<ul style="list-style-type: none"> <li>■ Pathway for identifying adults with needs for advocacy at point of assessment and review is well established.</li> <li>■ Well established Advocacy Network of providers and commissioners.</li> <li>■ Each local authority have lead officers with responsibility for commissioning of Advocacy Services.</li> <li>■ The Cardiff and Vale Regional Partnership Board are committed to a regional approach to commissioning adult advocacy.</li> </ul>

<b>Wider Community</b>	<ul style="list-style-type: none"> <li>■ The Cardiff and Vale Population Assessment indicated rising demand for health and social care services across all areas, with a corresponding increasing demand for advocacy.</li> </ul>
<b>Service Provision</b>	<ul style="list-style-type: none"> <li>■ Long established trusting contractual relationships with local providers based on outdated Service Specifications and commissioning models.</li> </ul>

What we need to consider:

<b>Plan</b>	
<b>Individual</b>	<ul style="list-style-type: none"> <li>■ Identifying Adults at Risk in need of Advocacy and actively offering IPA at an early stage of intervention.</li> </ul>
<b>Health &amp; Social Care Sector</b>	<ul style="list-style-type: none"> <li>■ Identifying adults engaging with preventative and IAA services (including intermediate care and hospital discharge planning) who cannot fully participate these services and do not have an appropriate individual.</li> <li>■ Establishing improved links with NHS commissioners.</li> <li>■ Develop clear and robust service specification for the delivery of high-quality Advocacy services, including the levels of training/qualifications for Independent Professional Advocates.</li> <li>■ Develop a regional model for commissioning advocacy across the region that meets the demand of this strategy.</li> </ul>
<b>Wider Community</b>	<ul style="list-style-type: none"> <li>■ Ongoing engagement with people who use advocacy based on the principle of co-production, starting from the point of view of people who use the services and their carers.</li> </ul>
<b>Service Provision</b>	<ul style="list-style-type: none"> <li>■ Collaboratively produce service specifications and contracting guidelines that take into account national quality standards.</li> <li>■ Collaboratively produce commissioning model that provides a flexible and accessible approach to all type of advocacy yet prioritizes IPA without delay.</li> <li>■ Taking a competitive dialogue approach to developing a commissioning framework.</li> </ul>



## What we already do:

Deliver	
Individual	<ul style="list-style-type: none"> <li>■ Provide accessible Information, Advice and Assistance in relation to Advocacy through the Cardiff and Vale Advocacy Gateway.</li> <li>■ Provide independent access to Independent Professional Advocacy through the Cardiff and Vale Advocacy Gateway.</li> <li>■ Established Advocacy provision that offers person centered Advocacy support.</li> </ul>
Health & Social Care Sector	<ul style="list-style-type: none"> <li>■ Needs Assessments already identify the diversity of people assessed and their need for advocacy.</li> <li>■ Cardiff and Vale RPB are committed to a regional joint commissioning of advocacy.</li> </ul>
Wider Community	<ul style="list-style-type: none"> <li>■ Individual Advocacy providers and the Gateway already produce promotional materials to raise profile of their services on websites, leaflets and flyers.</li> <li>■ The Gateway offers a simple and effective route into advocacy services.</li> <li>■ IAA services throughout the region already signpost to Advocacy services.</li> </ul>
Service Provision	<ul style="list-style-type: none"> <li>■ The region has a well established Advocacy Network that allows for the sharing of ideas and the partnership's collaboration in the development of the strategy and the future commissioning models.</li> </ul>

## What we need to do better:

Deliver	
Individual	<ul style="list-style-type: none"> <li>■ Co-produce and monitor service specifications that clearly outline an approach that:               <ul style="list-style-type: none"> <li>— respects dignity and confidentiality,</li> <li>— is led by the views and wishes of the individual,</li> <li>— works exclusively for the individual and</li> <li>— is responsive the individual's communication needs.</li> </ul> </li> </ul>
Health & Social Care Sector	<ul style="list-style-type: none"> <li>■ Analyse the diversity of people who need advocacy services and use this information to inform the Advocacy provision and identify and positively target particularly hard to reach groups.</li> <li>■ Any commissioning framework will need to encourage advocacy providers to work together, share information and skills and be based on forward planning not historical data using GTAP Population Needs Analysis Tool.</li> <li>■ Work in partnership with providers to improve skills and knowledge of workforce to identify when IPA is required.</li> </ul>

<b>Wider Community</b>	<ul style="list-style-type: none"> <li>■ Develop a regional brand for Advocacy for all local providers to use that is easily recognizable and can be used to promote advocacy in a simple and effective manner that is not affected by individual organisation’s promotions.</li> <li>■ Review the Gateway pilot in view of the developing strategy and new commissioning models to ensure the Gateway continues to provide a simple access route rather than an additional barrier to advocacy.</li> <li>■ Improve IAA services understanding of Advocacy and IPA to ensure all suitable people are offered the relevant advice and signposting.</li> <li>■ Ensure any promotional materials and branding for the Regional Advocacy service is appropriate for the diversity of the population and tailored to any hard to reach groups as appropriate.</li> </ul>
<b>Service Provision</b>	<ul style="list-style-type: none"> <li>■ Clearly define quality standards, using recognized quality standards such as the Advocacy Quality Performance Mark to ensure a consistently high quality experience for all adults who use advocacy services.</li> <li>■ Through a collaborative conversation with local providers and commissioners we will co-produce a model for commissioning adult advocacy including IPA.</li> <li>■ Any commissioning model will need to ensure all providers are treated equally and retain independence from commissioners and care and support services.</li> </ul>

How we monitor:

<b>Review</b>	
<b>Individual</b>	<ul style="list-style-type: none"> <li>■ Each local authority commissioner already seeks feedback from people using services and use this information to develop service improvements.</li> <li>■ Providers already review individual cases to highlight the effectiveness of IPA as part of regular contract monitoring.</li> </ul>
<b>Health &amp; Social Care Sector</b>	<ul style="list-style-type: none"> <li>■ We already have established and trusted contractual relationships between commissioners and providers with a range of monitoring approaches.</li> <li>■ We already have processes in place to support providers where performance is not meeting agreed standards.</li> </ul>
<b>Wider Community</b>	<ul style="list-style-type: none"> <li>■ Current arrangements for monitoring the performance of advocacy providers is undertaken by each individual commissioner.</li> </ul>
<b>Service Provision</b>	<ul style="list-style-type: none"> <li>■ We already have established and trusted contractual relationships between commissioners and providers with a range of monitoring approaches.</li> </ul>



## How we need to improve our monitoring:

### Review

#### Individual

- Ensure feedback from people who have used advocacy services is gathered as part of the contract monitoring and is used to improve the services offered by providers and commissioners.
- Commissioners to provide a response to the feedback so that people feel their experience of services is treated with respect and used to inform service developments.
- Commissioners to develop a systematic process that analyses case studies to measure effectiveness of IPA and makes recommendations for improvements.
- The reviews of people's experience should be discussed at the Advocacy Network to ensure shared learning across the sector.

#### Health & Social Care Sector

- Collaboratively produce a standard set of monitoring standards for use with all organisations commissioned to provide advocacy and IPA to ensure consistency and equality of provision.
- Examine research and best practice in order to secure best value and outcomes for discussion at the Advocacy Network.
- Consider using the GTAP Maturity Matrix for monitoring providers during contract or during commissioning process.

#### Wider Community

- Consider methods to involve the wider community in the monitoring and evaluation of the performance of advocacy services.

#### Service Provision

- Further develop a collaborative approach to commissioning and monitoring advocacy services with citizens, providers, care & support services and commissioners that focuses on improving outcomes for people who face barriers to fully participate in IAA and care and support services.
- Ensure service specifications are appropriate and compliant with the principles and approaches identified as part of this strategy.