

Advocacy Newsletter

July 2018 Issue no. 10

Hello!.....



As Ffion has sailed away into the sunset I would like to say a warm hello to all the readers of this newsletter. My name is Sue Vaarkamp and I am delighted to be the new Support Assistant for the Golden Thread Advocacy Programme working from the Age Cymru office in Mold, North Wales. I am enjoying the role very much and being able to make a contribution to a wonderful project. As time goes on I look forward to working with you all and forging new links and relationships. If there is anything I can do for you, please do not hesitate to contact me.

The Golden Thread Advocacy Programme—Two years on—Where are we now?

GTAP was funded in 2016 by Welsh Government to support the implementation of the advocacy element of the Social Services and Well-being Wales Act (2014). To achieve this we have 3 overarching objectives:

1. To develop a National Framework for Commissioning Independent Professional Advocacy for Adults In Wales
2. To support and build the capacity of the advocacy sector in Wales, and
3. To raise awareness of advocacy

We have now completed 2 years of this 3 year programme and the following is a summary of what we have been doing under the 3 headings above.

1. To develop a National Framework for Commissioning IPA

The GTAP team have all worked on this framework based on their experiences of working with local authorities and providers across Wales over the last 2 years. The primary audience for this is local authority commissioners although we recognise that input from providers is also vital in its development. We are guided and advised on this piece of work by a Strategic Reference Group which is made up of representatives from Welsh Government, Health, WLGA, All Wales Adult Services Heads, member from GTAP Board, National Commissioning Board and ADSS Cymru.

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We now have a fairly well rounded draft document which has been reviewed by commissioners at several workshops. The document is being supported by a toolkit which is still in early stages of development but will support the sections of the framework. The Framework itself is focussed around the commissioning cycle (Analyse, Plan, Do and Review) and the good practice statements that we have asked commissioners to assess themselves against. The next stages of the development will be completed during the summer and early autumn and there will be a range of engagement workshops to do this.

The team have also been working with commissioners across the whole of Wales to develop strategic commissioning plans and strategies for advocacy across Wales.

Another element of this objective is to establish what the adults advocacy sector in Wales looks like. We have therefore gathered data and comments from providers in Wales to develop Advocacy Counts 6.

2. Awareness raising

We have been developing a range of bilingual awareness raising tools. These so far Include:

- A leaflet
- A Z card
- A bookmark
- IPA for professionals
- A visual representation of the range and types of advocacy services
- Bi-monthly newsletters

We are using our contacts and networks to get these out as far and wide to the general public as we can but also trying to focus on those who may need to understand the role of an advocate and how they can help. The leaflet and z-card have spaces for organisations to put in their own information.

Written by Louise Hughes GTAP - Programme Manager

Advocacy Hub and Spoke Commissioning: Things to consider

As commissioning of IPA services accelerates in pace across Wales, we are seeing, through co-production events as well as stakeholder engagement events including those with citizens, a preference for advocacy services to be commissioned using a model by which a number of specialist, locally led and managed services are engaged to provide IPA services across an area. The preference from citizens is expressed in a number of ways at the events, but is well summed up from this participants quote: “[in response to what is needed?] *Advocacy from people who really understand your needs – specialist*”

And
“*Needs to be specific to services*” by which the needs of specific groups should be met by specific services, rather than generic services. If these types of models, of hub and spoke services with multiple service provision spokes being in place, all receiving referrals from one central hub is in demand, then what lessons can be learnt from already existing services using these models? This article presents some of those issues so that they can be considered in future planning.

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Communication:

Communication between the providers, both the individual spokes as well as the hub and spokes needs to be considered and reinforced. The purpose of a hub and spoke model is to ensure that citizens receive their support from the right source at the right time. However, this does not mean that once a referral reaches a service provider, a spoke, it should stay there indefinitely. Good referring works both ways and it has been noted that should an issue fall outside of the remit of the specific spoke, a timely referral back to the central hub for reassignment could be a smarter way of working, for both the service and the citizen using that service.

Access points:

Any model working with existing service providers, who already have existing relationships with referral agencies has the potential to fall victim to an issue we have dubbed “Many front doors”. The purpose of the hub is to effectively case manage referrals, ensuring that the issue a citizen is presenting with is supported by the most appropriate service, whether that be a member of the hub and spoke model or a service outside of it (for example, a benefits specialist). With many front doors this role becomes harder to achieve for the hub and can lead to its function being undermined. Unlearning referral pathways and professional relationships can be very difficult. However, for a hub and spoke model to function properly this is vital.

Data Collection:

With a variety of services involved, there will, understandably, be a variety of data collection systems used. At the outset of any new system of working, a clear understanding of what data is to be collected, a clear understanding of how it is to be collected as well as a clear understanding of how it is to be reported is vital for the smooth running of a service. This will greatly help to ensure that a service is able to evidence its efficacy and demonstrate the impact it is making.

Conclusion:

The three points above are ones that have come from GTAP’s experience of Hub and Spoke models, as well as evidence from similar models in England. They are not the only issues to consider, but they are thinking points for providers and commissioners alike. All commissioning should be based upon the outcomes that are to be achieved by the service commissioned and should be designed as a response to said outcomes. No two services are alike, no two solutions are alike, but we propose that the above are key considerations for any service being designed. As ever, the GTAP team is here to support providers and commissioners alike, and for further information or to access our support please do contact us.

Written by Huw Davies Age Cymru’s Development Officer for Commissioning (Mid & West Wales).

Measuring the Mountain – Understanding Experiences of Social Services in Wales

Measuring the Mountain¹ is an all-Wales project designed to evaluate the impact of the Social Services and Wellbeing (Wales) Act. Funded by Welsh Government, it is a collaboration between citizens, the third sector and the public sector.

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Using an innovative software package called ‘SenseMaker’², the project aims to collect up to 2000 stories from people with recent experience of social services in order to build a picture of how social care feels for those involved. The stories may be from either service recipients or carers, and might be big or small, positive, negative or indifferent. The project’s activity will contribute to Welsh Government’s 3 year evaluation of the Act, starting this autumn. The project provides opportunities for both individuals and organisations to get involved. “Listeners” are staff or volunteers who have a key role in ensuring that everyone who has a story is able to share it. Listeners are trained to use the software and to support each person to interpret their experience, using SenseMaker tools. Volunteers can earn time credits for the stories they collect by joining Spice’s Time Credits network³.

On September 24-27, the project will host a “Citizens’ Jury” at the Liberty Stadium, Swansea, to consider in depth some of the key issues that arise from the stories. The Jury will question ‘witnesses’ and examine evidence from across Wales before reaching conclusions to share with Welsh Government, social care professionals, participants and other people in Wales. For further information please visit Measuring the Mountain’s website or contact the Project Manager, Katie Cooke: kcooke@interlinkrct.org.uk / 07964 407739.

Links

Measuring the Mountain: www.mtm.wales

SenseMaker: www.cognitive-edge.com/sensemaker/

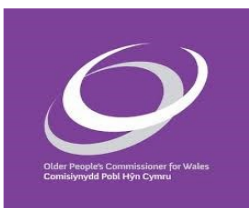
Spice: www.justaddspice.org

Written by Paul Swann Programme Development Officer (South Wales) for Age Cymru

Advocacy Quality Performance Mark—Link to new version of Quality Performance Mark Award is launched

The QPM has been reviewed and re-launched following consultation with advocacy providers, national stakeholders and commissioners. This, the 4th edition of the QPM which was formally launched in May 2018.

<https://qualityadvocacy.org.uk/2018/05/30/new-version-of-the-qpm-award-launched/>



Older People’s Commissioner for Wales—Making Voices Heard Report

Main findings:

- Statutory and non statutory Independent advocacy is not routinely offered.
 - Law isn’t always being implemented.
 - Advocacy not understood by professionals across the board.
 - Not enough understood about legislation right to IPA by professionals.
 - There is a lack of understanding of what advocacy is and confusion on what independent advocacy is.
 - Lack of understanding of what is an appropriate person.
- Need for advocacy in care homes especially for self funders who have no contact with social services.

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- Carers advocacy and specialist dementia advocacy - Specific skills needed to deal with this and special services.
- Carers assessments not being carried out and people not having access to advocacy.
- Effectiveness of current legislation - No data collected so this is unknown.
- Hospital discharge is a big issue.
- People not going through the system properly and not accessing advocacy services.
- Recognised gap in meeting people's needs from a health perspective.
- Welsh language not much demand for it in advocacy. Most providers are able to provide advocacy in Welsh if needed.
- No data available to show use of IMCA
- Felt that medical staff don't understand IMCA due to a high number of inappropriate referrals.
- Funding uncertain as are issues relating to that.

(Click for full document) http://www.olderpeoplewales.com/Libraries/Uploads/Making_Voices_Heard.sflb.ashx

Parliamentary Review. A Revolution from Within - Transforming Health & Social Care in Wales

The report contains 10 High Level Recommendations, detailed below:

1. One seamless system

It was felt there was a need to develop a clear simple vision about care in the future and how it would look and meet the needs of everyone. It was felt Care should work around the individual and their families and to take place as close to home as possible. The care should be preventative, easily accessed and high quality. Digital technology should play a clear part and deliver what users and the public feel really matters to them. It would hope the care should be seamless, taking down artificial barriers that previously existed between physical & mental health, primary & secondary care or health and social care.

2. The Quadruple Aim for All

Underpin the "one System" vision with four aims - the Quadruple Aim. That is, health and care staff, volunteers and citizens should work together to deliver clear outcomes, improved health and wellbeing, a cared for work force, and better value for money.

3. Models of Seamless Care

Move to a seamless new way of working in localities – guided by the vision and Quadruple Aim with national good practice principles. There should now be rapid acceleration of action to develop, implement, and evaluate: seamless care close to home in localities; proactive improvement of population health and wellbeing; and reoriented specialised care.

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4. Put people in Control

Strengthen individual and community involvement, through voice and control in health and care, and ensuring all ages and communities have equal involvement. The public rightly want a modern service in which they have much better information about health and care, shared decision making in treatment, choice of care and setting, and peer support.

5. A Great place to Work

Urgently align the workforce with new service models. Staff should be well trained, supported and engaged to deliver and continually improve a quality service consistent with the vision and Quadruple Aim. Wales should aim to be a great place to train and work.

6. A Health & Care System that's always learning

Significantly increase support so that the pace of improvement accelerates. Invest in support to the front line, service users and local leadership that nurtures team-based learning and the use of evidence and sharing of best practice. Develop and implement a strategy for quality improvement and continuous learning for health and care, enhancing the leadership and infrastructure required to support it.

7. Harness Innovation & Accelerate Technology & Infrastructure Development

Maximise the benefits of technology and innovation to pursue the Quadruple Aim and deliver more effective and efficient care. This needs the right culture, behaviours and leadership to embrace innovation, embed collaboration and support prudent risk-taking.

8. Align System Design to achieve results

Design the system better to achieve faster progress. Given the need for transformative change, at national level there should be focus on designing a more effective blend of incentives, regulation, planning, targets and performance management.

9. Capacity to transform, dynamic leadership & unprecedented cooperation

Increase capacity at a national level to drive transformation, and strengthen leadership nationally, regionally and locally to make progress in line with the vision and Quadruple Aim.

10. Accountability, progress & place

Publish progress against the vision, Quadruple Aim and new models in one year, three years and five years, and benchmark progress against the other three countries in the UK, and internationally.

Link to full document: <https://gov.wales/docs/dhss/publications/180116reviewen.pdf>

The Welsh Government has published three consultations relating to Phase 3 of implementation of the Regulation and Inspection of Social Care (Wales) Act 2016.

The Act establishes a new system of regulation and inspection of social care that upholds the rights of Welsh citizens to dignified, safe and appropriate care and support.

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We are consulting on improvements to the regulation of **fostering services, adult placement services** and, for the first time, of **advocacy services** in respect of children's statutory advocacy.

For further details please see the webpages for each consultation:

The Minister for Children, Older People and Social Care has issued a written statement which is available at: <https://gov.wales/newsroom/health-and-social-services/2018/olrights/?lang=en>

In support of these consultations we are holding information events:

- Wrexham, Wednesday 16th July 2018
- Cardiff, Thursday 19 July 2018

To attend contact RISCAct2016@gov.wales Spaces are limited and subject to availability.

The consultations close on Thursday 16 August 2018.



Announcement by Welsh Government

The Welsh Government have announced that they will be working with older people to take forward a programme of work that will support everyone to live healthy, prosperous and rewarding lives. Early work will involve supporting all older people to have voice and control over their health and social care, with a focus on commissioning, safeguarding and advocacy.

This will include:

- Revising the guidance relating to escalating concerns on care homes to ensure that older people are not put at risk due to the closure of the place where they live and call home. Where a closure is unavoidable, the guidance will ensure the care home is closed in a way that upholds the rights of residents;
- Improving the quality, consistency and availability of Independent advocacy services, that give a voice to people who feel their views are being ignored; Integrating the rights of older people into the process the Welsh Government uses to assess the impact its policies have on groups of people;
- Working with older people to deliver a new programme of work that will address barriers to ageing well.

The First Minister has also confirmed that to further demonstrate the Welsh Government's commitment to older people, the Minister for Children and Social Care will become the **Minister for Children, Older People and Social Care**.

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Alcohol consumption and alcohol-related harm is increasing in older adults, yet service design doesn't adequately represent this age group. In response, Drink Wise, Age Well was established in 2015 to help people aged 50+ make healthier choices about alcohol as they age. The five year programme is being delivered across 5 demonstration areas in the UK with Rhondda Cynon Taf and Merthyr Tydfil representing the Wales area.

'Older people are just as likely to benefit from treatment as younger people.'

Alcohol and ageing.

As we age our bodies no longer process alcohol as well. One reason for this is having more body fat which is less able to breakdown alcohol. As well as physical changes as we age, most of us will experience significant life transitions such as retirement; bereavement; children leaving home or a loss of sense of purpose to name a few. For some, this can lead us to drink a little more often, and a little more than we should. The popular image of the younger generation being more problematic drinkers persists despite research showing that one in five people over the age of 50 drink at increasing risk levels with alcohol problems often developing in later life. Further misconceptions and assumptions are reflected in treatment services which remain geared towards younger generations when it has been found that older people are just as likely to benefit from support as younger people.

'Age-related changes in the body mean older age groups are more vulnerable to the harms of alcohol.'

Direct support for those affected by alcohol.

Drink Wise, Age Well offers one to one support for adults over 50 and their families who are affected by alcohol. Appointments are offered in the community, usually at people's homes to ensure support is accessible and comfortable, taking account of physical and social changes that can occur with age. Structured support is tailored to individual needs and goals. Service users are supported to gain the tools and practical techniques to address their drinking and to cope better with life's challenges and transitions. Those concerned about someone else's drinking can also access the programme to help support their loved ones to drink more safely, or to cut down when they are ready with practical advice. Those concerned others are encouraged to build on support networks and can access other services through referrals.

Get in touch.

In addition, Drink Wise, Age Well actively campaigns in the community and with employers to educate and prevent alcohol issues. They also run a variety of social opportunities for over 50's to help build resilience in individuals and communities at risk of social isolation and harmful drinking. If you would like to access support or to find out more about Drink Wise, Age Well you can get in touch by calling our advice line on 0800 161 5780 or visiting our website <https://drinkwiseagewell.org.uk/> or email: wales@drinkwiseagewell.org.uk

Written by Jonathan Fisher of Drink Wise Age Well

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The link at the bottom of this page opens a copy of the May 2018 Newsletter "In Focus". The main points contained in this issue are as follows:

- Welcoming the new President of ADSS Cymru
- National Social Care Conference 2018
- Putting the Act into practice; learning and development for story-telling animals
- Parliamentary Review under discussion
- More of the same, or a recipe for real change—opinion piece
- All Wales Adults Service Heads (AWASH) : A new dawn for accountability
- News from the Workforce Leadership Group
- News from the Safeguarding Leadership Group
- The Truth Project
- Delivering Transformation Grant Programmes

Please click below if you wish to view the whole document

https://mailchi.mp/442ba9363ee3/infocus_front_16

Useful information leaflet—click on the link below to see an Easier read guide from Older People’s Commission in Wales on Mental Capacity.

http://www.olderpeoplewales.com/Libraries/Publications_2018_19/Mental_Capacity_An_Easy_Guide.sflb.ashx

Age Cymru’s free Advice Line

Age Cymru’s advice line can provides free, impartial advice to your constituents on a range of subjects.

Perhaps they may want advice about how much they should be paying for a loved one’s care? Or perhaps they may wants to know if they are eligible for Pension Credit and want help with claiming it?

Age Cymru can help with all these issues, and more – call us today on: **08000 223 444**

Contact us...

- **To subscribe to the newsletter**
- **If you have any comments or questions about the articles**
- **If there’s anything you would like to see in the next newsletter**

Email: sue.vaarkamp@agecymru.org.uk

Telephone Golden Thread Advocacy Programme 01352 706228

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