

Public Report Delegated Officer Decision

Committee Name and Date of Committee Meeting Delegated Officer Decision – 29 August 2023

Report Title

Rotherham Advocacy Service Contract Extension Proposal

Is this a Key Decision and has it been included on the Forward Plan? No, but it has been included on the Forward Plan

Strategic Director Approving Submission of the Report Ian Spicer, Strategic Director of Adult Care, Housing and Public Health

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Ward(s) Affected Borough-Wide

Report Summary

Independent advocacy services are necessary to meet all the Council's statutory requirements under the Care Act 2014, the Mental Capacity Act 2005, the Mental Health Act 1983 and the Health and Social Care Act 2022. Statutory independent advocacy services provide support to people:

- who may require assistance throughout the care and support assessment and through the review process,
- who are the subject of an adult safeguarding enquiry or a safeguarding adults review and may experience difficulty in understanding the process,
- who lack mental capacity to make decisions about themselves.
- who are detained under the Mental Health Act,
- who require support to complain about services provided by the NHS.

In addition to statutory advocacy, non-statutory advocacy services are necessary for people who have difficulty articulating and negotiating their health and social care needs. This support empowers people to effectively navigate the health and social care system.

Advocacy involves taking action to help people say what they want, secure their rights, represent their interests, and obtain the services they need. Independent Advocacy can reach out to some of the most marginalised and disadvantaged people in the community.

Independent statutory advocacy and non-statutory advocacy (community) services in Rotherham are provided by Cloverleaf Advocacy, the service has been branded as Absolute Advocacy. Cloverleaf was awarded the contract following a competitive process and commenced service in April 2020 for an agreed term of 3 years + 1 + 1 year. In December 2022, a 12 month extension to 31 March 2024 was agreed.

The service operates a 'Lead Provider' model where Cloverleaf Advocacy as the lead organisation provides support to health and social care professionals to make referrals for both independent statutory advocacy and community non-statutory advocacy and to people who wish to self-refer for community advocacy or make enquiries about available support. As 'Lead Provider', Cloverleaf Advocacy ensure services are efficient, accessible and are supportive of people in the navigation of service options most appropriate to need.

The Lead Provider model has been successful in terms of offering streamlined access to all forms of advocacy, continuity for people who require multiple advocacy types, and in using capacity efficiently.

Cloverleaf Advocacy using the brand Absolute Advocacy deliver a high quality service, is compliant with the contract terms and conditions and provide both statutory and non-statutory advocacy effectively.

The current contract term concludes in March 2024 with the option for a further 12 month extension. The purpose of this report is to recommend that the Strategic Director of ACHPH approve the use of the optional 12-month extension to the contract term to provide continuity of service as allowed by the contract terms.

Recommendations

1. To approve a final 12-month extension of the initial contract term from April 2024 to March 2025 to enable Cloverleaf Advocacy to continue the service.

List of Appendices Included

Appendix 1 Record of Officer Executive Decision

Background Papers

Cabinet Report – 16 September 2019 - Adults Independent Advocacy Services - Commissioning and Procurement Approach.

Consideration by any other Council Committee, Scrutiny or Advisory Panel None

Council Approval Required No

Exempt from the Press and Public No

Rotherham Advocacy Service Contract Extension Proposal

1. Background

1.1 Independent advocacy services are necessary to meet the Councils statutory requirements:

Legislation	Statutory Responsibility	
Care Act 2014	Independent Care Act Advocacy	
Mental Capacity Act 2005	Independent Mental Capacity	
	Advocacy	
Mental Health Act 1983 (as amended	Independent Mental Health	
2007)	Advocacy	
Health and Social Care Act 2022	Independent Health Complaints	
	Advocacy	

Statutory independent advocacy services provide support to people:

- who may require assistance throughout the care and support assessment and through the review process,
- who are the subject of an adult safeguarding enquiry or a safeguarding adults review and may experience difficulty in understanding the process,
- who lack mental capacity to make decisions about themselves,
- who are detained under the Mental Health Act,
- who require support to complain about services provided by the NHS.

Non-statutory advocacy:

Non-statutory advocacy services are available to people living in Rotherham who have difficulty articulating and negotiating their health and social care needs. This support empowers people to effectively navigate the health and social care system.

1.2 Independent Statutory and non-statutory advocacy services in Rotherham are provided by Cloverleaf Advocacy t/a Absolute Advocacy utilising a lead provider model. They were awarded the contract following a competitive process and commenced service in April 2020 for an agreed term of 3 years + 1 + 1 year. The initial contract term concluded in March 2023, a 12 month extension from April 2023 to 31 March 2024 was agreed in December 2022.

1.3 Summary of activity 2023/23

Type of Advocacy	No. of new referrals	Hours delivered
Care Act	223	3066
Independent Mental Capacity	147	1477
Advocacy		
Relevant Person Representative / 1.2	191	4174
Rep		
Independent Mental Health Advocacy	481	2201
NHS Complaints	76	2175
Non-statutory advocacy	99	1497
TOTAL	1217	14590

1.4 The organisation is performing well and has shown to be reliable and responsive to dealing with any changing situations.

2. Key Issues

- 2.1 The initial contract term ended on 31 March 2023 with the first extension period activated from April 2023 to March 2024. The final extension period is from April 2024 to March 2025. There are currently no alternative plans in place other than to extend the contract for this final 12 month period. Should the recommendation to extend the contract be declined, a competitive reprocurement exercise will be required to secure a service from April 2024.
- 2.2 The Lead Provider model has been successful in terms of offering, streamlined access, continuity for people accessing the service who require various advocacy types and using capacity efficiently.
- 2.3 With regards to non-statutory advocacy, the provider has supported people to develop self-advocacy skills, e.g., by providing advocacy drop-ins. The provider is also developing ways to support peer advocacy (delivered by trained and supported volunteers) and group advocacy (people with shared experience coming together).
- 2.4 The Service, Absolute Advocacy, holds a stable position in the Rotherham market, delivers high-quality service and is technically competent. They regularly feed into wider consultations, for example they fed into the consultation on the Liberty Protection Safeguards (which has now been delayed beyond the life of Parliament).
- 2.5 A benchmarking exercise was carried out in March 2023. The Council pay £32.55 £36.85 per hour (depending on advocacy type) which reflects a reasonable market rate. Benchmarking undertaken on prices paid by other local authorities showed varying rates between £30 to £37 per hour.

A comparison on the number of statutory advocacy referrals was undertaken against a similar sized local authority (both by population and budget). This showed that Rotherham dealt with 18% more referrals over a 12 month period.

3. Options considered and recommended proposal

- 3.1 **Option 1** pursue a competitive tender to establish new services. The current contract ends on 31 March 2024. This option is unlikely to achieve any significant benefit in terms of cost or service efficiency and is therefore not recommended.
- 3.2 **Option 2** Utilise the final optional 12-month extension of the contract with the incumbent provider effective from 1 April 2024.
- 3.3 **Option 2 is the recommended proposal** for reasons outlined particularly in section 2 and 6 and throughout this report, this option would support the Council to continue to meet its statutory duties and develop a capable voluntary sector for vulnerable people who require assistance to articulate and negotiate the health and social care system.

4. Consultation on proposal

- 4.1 Adult Care and Integration, specifically the DoLS Team, CYPS and the incumbent provider have been consulted and support this recommendation.
- 4.2 Engagement carried out in July 2023

117 people from across Rotherham gave their views on the service:

- 71 users of the service,
- 46 professionals.

This response rate compares well with similar activities undertaken by other local authorities.

The feedback told us that overall, both service users and professionals view the service very positively.

• 98% of service users that responded said that using the Advocacy Service made a difference.

The top 5 ways that advocacy support helped with were:

- Understanding information and processes.
- To make a complaint.
- Speaking up for rights.
- Help with accessing health and social care services.
- Listening and helping people express themselves.

When asked what difference advocacy made:

- 68% said it gave them a voice to describe what they wanted to happen.
- 65% said it improved their confidence in raising concerns.

Ease of referral:

When asked how easy it is to make a referral on a scale of 1 to 5 (5 being easy), the average score was 4.46.

Comments from people accessing the service:

"Highly recommended, I went from feeling confused, alone and isolated, to supported and understood and heard."

"The advocate was a good listener and understood what I wanted; they helped me a lot to do something I couldn't do before."

"We cannot thank Advocacy enough for their care and support. It is a precious aid when you have hit the brick wall so many times, just to know someone actually cares."

Comments from professionals:

"Patients speak very highly of the service and support they receive from the advocates. They are made to feel that they are well supported and are important as individuals."

"For me it's not just about the service, it's about the people that deliver it. The advocate that visits our ward is so passionate about their role. Their communication and openness to patients is absolutely amazing."

"I trust the service and all the staff I have come into contact with. Always feel that the person who has been deprived of their liberty will receive a positive, efficient, and appropriate safeguard to represent and advocate on their behalf. Professional and friendly service."

The survey responses provide affirmation that overall, the service is working well which supports the recommendation to extend the current contract term.

4.3 The findings from the surveys will also be used in any future re-commissioning activity.

5. Timetable and Accountability for Implementing this Decision

5.1 The contract extension will be agreed and issued to Cloverleaf Advocacy immediately should the recommendations in this report be approved. The Council's Adult Care Strategic Commissioning Team will monitor the expected outcomes and outputs.

6. Financial and Procurement Advice and Implications

6.1 The current gross budget is £433,047 (2023-24). Hourly rates reflect the wider market. However as this is a demand led service the amount of spend could increase. Total spend in 2022/23 was £449,289 and therefore an overspend in this budget area is highly likely unless demand for the service decreases.

6.2 The original procurement was undertaken in accordance with the Public Contracts Regulations 2015. As the 12-month extension was included for within the original procurement activity, it can be confirmed that the recommendation detailed in this report would be compliant with the Regulations.

7. Legal Advice and Implications

- 7.1 The Council's statutory duties to provide rights to advocacy are set out in the following:
 - Care Act 2014 sections 67 68
 - Mental Capacity Act 2005 sections 35 41
 - Mental Health Act 1983 section 130
 - Health and Social Care Act 2012 section 185
- 7.2 A contract extension as proposed within the report is provided for in the contract with Cloverleaf Advocacy. Therefore, as there are no concerns with the performance of the provider in relation to the contract, the recommendation to extend the contract is reasonable and sensible.

8. Human Resources Advice and Implications

8.1 None for the Council

9. Implications for Children and Young People and Vulnerable Adults

- 9.1 Since August 2022, Children and Young People's Services have made and funded referrals through this framework agreement to provide advocacy support to parents in relation to looked after children, child protection cases. If this contract was not in place, alternative arrangements would therefore need to be made in relation to CYPS referrals.
- 9.2 The current contract arrangement supports vulnerable adults with needs relating to physical disabilities, learning disabilities, neurological development disorders, mental health, acquired brain injury and complex needs. This recommendation would enable advocacy support to continue to be made available to potentially vulnerable adults.

10. Equalities and Human Rights Advice and Implications

10.1 Advocacy involves taking action to help people say what they want, secure their rights, represent their interests, and obtain the services they need. Independent Advocacy can reach out to some of the most marginalised and disadvantaged people in the community.

11. Implications for CO2 Emissions and Climate Change

11.1 This proposal has no additional impact on emissions.

12. Implications for Partners

12.1 Statutory advocacy is commissioned by the Council for recipients of health care i.e., people who are detained under the Mental Health Act, receiving Continuing Health Care, have a diagnosis of dementia, etc.

Health partners from South Yorkshire ICB and Rotherham Doncaster and South Humber Mental Health Trust participated in the co-production activity to support the development of the current service delivery model and would be consulted on any changes and re-tendering activity.

13. Risks and Mitigation

13.1 Risks:

Cloverleaf Advocacy does not accept the proposed 12-month contract extension.

13.2 Mitigation:

Cloverleaf Advocacy have indicated that they would agree to the contract extension.

14. Accountable Officers

Scott Matthewman - Assistant Director, Strategic Commissioning

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