



Andrea Matthews
Swyddog Cyswilt ac Ymgynghori
Bwrdd Cyngorau Iechyd Cymuned Cymru
c/o 103 Stryd Lammas
CAERFYRDDIN
SA31 3AP

Andrea Matthews
Consultations and Liaison Officer
Board of Community Health Councils in Wales
c/o 103 Lammas Street
Carmarthen
SA31 3AP

Mr. P. Harper
Welsh Assembly Government
Cathays Park
Cardiff.

23rd July 2007.

Dear Mr. Harper

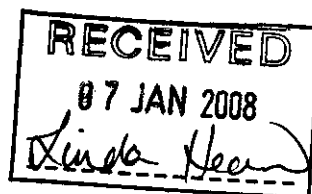
Response to Consultation on a New Service model for Delivering Advocacy Services for Children and Young People.

Please find below the response to the above consultation on behalf of the Board of Community Health Councils in Wales. The response is formulated from the views of individual Community Health Council members on behalf of the patients and public of Wales.

Yours sincerely,

Andrea Matthews.
Consultation & Liaison Officer.

Acknowledgements:
E. N. Cole.
P Johns.



Director: Mr. P. Johns.
Chairman: Cllr. J. MacLennan

Ffôn | tel: 0845 644 7815
Ffacs | fax: 01267 230443
e-mail/e-bost: andrea.matthews@chcwales.org.uk

Response:

General Questions.

Are the areas covered by the Draft Consultation on a New Service Model for Delivering Children's Advocacy Services comprehensive and pertinent? Are any critical issues not covered?

- The issue of Complaints Advocacy with regard to NHS Complaints. CHCs in Wales provide Complaints Advocacy for NHS Complaints; it is therefore, important that the child's advocate recognizes this and links with the CHC advocates for NHS advice and support.

Should any part of the draft document be changed and, if so, how?

- While the content of the document is welcomed, the comment has been received that the document has been written from the viewpoint of administrators in the State System rather than with consideration for the young client group.
- Comment received - *"If I were a young person who had been let down by "the System" and wished for my voiced complaints to be listened to, the last person I would trust would be someone imposed by "the System". As such a young person I think I would want helpful support from those I know, then from people recommended by my first contacts, and only then from state-regulated advocates"*.
- The Ministerial Forward contains the word "compliant" when the meaning is hopefully "complaint"!
- Page 3 "The Vision" – The second paragraph would carry more impact if its first sentence was shortened by 5 words which should then have a sentence of their own i.e. *"The Welsh Assembly Government's vision is that access to advocacy becomes a universal right for all children and young people. This will take time."*
- Page 3 "The Vision" – Third paragraph. Replace **"be modernized"** by **"evolve"**. This would give a sense that we will get something capable of changing to meet future demands rather than a one-off modernization scheme which risks becoming unfashionable tomorrow.
- Page 5 "Introduction" – last paragraph – last but one sentence. Decision makers should not just **hear** children's views but should **listen to** and **respect** them.
- Page 7. Comment within shaded box. The words *"to the benefit of children and young people"* add nothing. This phrase is repeated just as ineffectively in other sections of the document.

Are the key Actions proposed appropriate and relevant? Are there other Key Actions that could be included?

Key actions considered appropriate and relevant, no further key actions suggested.

We would welcome any practical examples that can be used to illustrate the text?

No comment.

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Chapter 3: Background and Rationale for Change.

Q1	Have we accurately summarized all the key national drivers for change and their findings or conclusions? The Board of CHCs in Wales is satisfied that the key national drivers for change their findings and/or conclusions have been accurately summarized.
Q2	Are there any that we should add, or give more weight? No that we are aware.
Q3	Do you agree with our vision and overall aims for advocacy services for children and young people in Wales? Yes
Q4	Should the key aspects be strengthened or amended in any way? Timescale – providing more advocacy services with all practical urgency, whilst monitoring particularly for effectiveness.
Q5	Do these arrangements meet the requirements for accessibility and independence? Adequate means for ongoing monitoring of accessibility and independence must be built in.

Chapter 4: The New Service Model

Q6	Do you agree with the proposed staged approach to collaborative commissioning and have we correctly identified the areas which require priority attention within the New Service Model? Agree with the staged approach conditional on existing services all being allowed to evolve. Identified priority areas appear reasonable.
Q7	Do you agree with the principle of moving towards a more integrated model of provision? Agree
Q8	In what circumstances do you consider advocacy services should be available to schools? Whenever a student feels the need for advocacy support, the school should be able to arrange the first contact with an independent, acceptable, trusted adult.
Q9	How can we define a serious complaint and in what circumstances do you feel advocacy support would be important? Surely the complainant's view of seriousness has to be considered? His/her first contact has a duty to listen and needs to be educated either to give adequate support or recognize when a more highly trained person is needed.
Q10	Are there other groups of children and young people that should be included in the service model? Most probably - therefore, a review process needs to be built into the process to ensure continuous improvement aimed at supporting those who need support whilst avoiding denial of support due to poor funding or resourcing.

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Chapter 6: A Framework to Implement the New Service Model.

Q 11	<p>Is the proposal for collaborative commissioning across local areas the most realistic and best way forward to achieve improved access to, independence and quality of advocacy services to children and young people?</p> <p>Not necessarily – if there is evidence of best practice in commissioning available then consideration should be given to copying/sharing the methods used.</p>
Q12	<p>How might collaborative partnerships be defined across Wales? Are there any existing partnerships relevant to your area and/or to advocacy services that could be used for further developed for this purpose?</p> <p>No Comment.</p>
Q13	<p>What other influences on commissioning or commissioning drivers relevant to children and young people's services do we need to take into account?</p> <p>Evaluation – how to measure effectiveness.</p>
Q14	<p>How might the lead Children and Young People's Framework Partnership for collaborative commissioning be selected?</p> <p>No comment – although there is some disagreement with the concept of "leads".</p>
Q15	<p>What are the barriers to establishing a lead CYPP and lead commissioner for advocacy services, and how might they be overcome?</p> <p>Bureaucracy, staff career progression, financial constraints, pace of change, politics, local authority election to name but a few.....</p> <p>The suggestion has been made that as much responsibility as possible should be transferred to the voluntary sector to manage, monitor and provide advocacy services.</p>
Q16	<p>Which structural model outlined in section six do you prefer and why: model one or model two?</p>
Q17	<p>Are there any other models that you think we should also consider, and what are their key characteristics?</p> <p>Consider a model whereby a number of CYPPs link individually to a CYP Advocacy Steering Group which then links to the Lead Commissioner who will be expected to have the detailed local knowledge. Consult with the CYPPs to determine the number of steering groups needed and who links with whom.</p>
Q18	<p>Are the roles and responsibilities of key commissioning partners outlined in section six sufficiently clear and robust?</p> <p>The elements of monitoring and evaluation are missing.</p>
Q19	<p>Are the commissioning principles outlined in section six sufficiently clear and robust?</p> <p>Probably, but there is still a need to review, scrutinize and audit thoroughly on a regular basis. Annually??</p>
Q20	<p>Are the proposals for governance and performance management sufficiently robust?</p> <p>Yes</p> <p>Are there any that we have missed?</p> <p>No</p>

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Chapter 7: The Role of a Children's Advocacy Unit.

Q21	Do you agree that we have identified the support and development needs to ensure the delivery of the service model proposed? <i>Agreed.</i>
Q22	What additional forms of support might be necessary? Effective networks and training in networking, partnership working and development of a culture to promote best practice.
Q23	Are the timescales for implementation of commissioning service under the New Integrated Service Model (by 2008 for Stage One and Two) achievable? Are there any constraints? <i>Ambitious timescale but achievable with an evolutionary approach towards long term goals.</i>
Q24	What will be the impact and cost implications on your business in introducing the New Service Model? Not applicable.
Q25	Do you consider we should set up an Advocacy Unit as suggested above? Yes
Q26	Would it be advantageous to set up a Board i.e. to monitor progress and advise Assembly Government Ministers? Yes
Q27	What do you feel would be the minimum representation membership on the C&P Advocacy Advisory Board? A partnership of decision-makers from the statutory sectors and a balancing number of elected voluntary sector representatives. In addition, the Children's Commissioner (or representative) should have a key role.

Chapter 8: Workforce.

Q28	Should advocacy services/providers be regulated? Yes.
Q29	Should advocated be a recognized profession? <i>While understanding the rationale some CHC members are of the view that advocacy need not necessarily be a recognized profession. The reason given is that the ability to communicate with young clients is of utmost importance and the "professional" label could be a huge barrier for vulnerable children.</i>
Q30	What are the implications to your service in requiring registration and regulation of advocacy providers? No comment.

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