

**Advocacy Services**

**Statement of Purpose**

|  |
| --- |
| **Version control**  |
| **Version Number** | **Date** | **Author / Person Responsible** | **Update information** |
| V2 | 13.03.20 | SD | Updated to reflect feedback from mock inspection, including space for signature and version control.  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Statement of Purpose**

**1. Introduction, Aims and Objectives**

Users of our advocacy service and members of the public are entitled to expect the highest standards, from both our services and staff. The aim of this Statement of Purpose, is to ensure that anyone accessing or wishing to access TGP Cymru advocacy services knows what to expect.

In line with Regulation 4 of the Regulation and Inspection of Social Care (Wales) Act 2016:

4.1 The service provider must provide the service in accordance with the statement of purpose.

4.2 The service provider must

(a) keep the statement of purpose under review, and

(b) where appropriate, revise the statement of purpose.

4.3 Unless 4.4 applies, the service provider must notify the persons listed in 4.6 of any revision to be made to the statement of purpose at least 28 days before it is to take effect.

4.4 This paragraph applies in cases where it is necessary to revise the statement of purpose with immediate effect.

4.5 If 4.4 applies, the service provider must, without delay, notify the persons listed in paragraph 4.6 of any revision made to the statement of purpose.

4.6 The persons who must be notified of any revision to the statement of purpose in accordance with 4.3 or 4.5 are

(a) the service regulator,

(b) the individuals,

(c) service commissioners, and

(d) any representative,

unless it is not appropriate to do so or would be inconsistent with the well-being of an individual.

4.7 The service provider must provide the up to date statement of purpose to any person on request, unless it is not appropriate to do so or would be inconsistent with the well-being of an individual.

**2. Scope**

The provisions of the Statement will apply to TGP Cymru advocacy services and staff. For the purposes of this Code:

* The term ‘Advocate’ is used to collectively refer to all TGP Cymru staff working as an Independent Professional Advocate whether as a permanent member of staff, temporary member of staff or a casual worker
* The term ‘Young Person’ refers to all children and young people accessing TGP Cymru advocacy services.

|  |
| --- |
| **Section 1: The Provider** |
| **Service provider**  | TGP Cymru |
| **Address of provider** | 12 North RoadCardiffCF10 3DY |
| **Legal entity** | Registered Charity and Limited Company |
| **Responsible Individual** | Jackie Murphy |
| **Manager of service** | Sarah Durrant |
| **Name of service** | TGP Cymru |
| **Head Office Address**  | 12 North RoadCardiffCF10 3DY |
| **Other relevant address** | North Wales Advocacy ServiceUnit 3 Victoria DockBalaclava RoadCaernarfonLL55 1TH |
| **Other relevant address** | Mid and West Wales Advocacy ServiceMin y Mor BungalowWellington GardensAberaeronCeredigionSA46 0BQ |
| **Other relevant address** | Cwm Taf Morgannwg Advocacy ServiceThe FactoryWelsh Hills WorksJenkin StreetPorthRCTCF39 9PP |
| **Other relevant address** | Western Bay Advocacy Service14 Tawe Business Village Phoenix WayLlansamlet Swansea SA7 9LA |

|  |
| --- |
| **Section 2: Service Location** |
| The service provides four regional advocacy services, commissioned by four commissioning regions:North Wales: Anglesey, Gwynedd, Conwy, Denbighshire, Flintshire and Wrexham. Mid and West Wales: Carmarthenshire, Ceredigion, Pembrokeshire and PowysCwm Taf Morgannwg: RCT, Merthyr and Bridgend.Western Bay: Swansea and NPT.  |

|  |
| --- |
| **Section 3: Eligibility Criteria** |
| Eligibility Criteria for access to the Service is:1. Children or young people who are in receipt of care and support from Social Services either as a Looked After Child or a Child in need of Care and Support under the Social Services and Well-being (Wales) Act 2014 Sections 171 – 178 (formerly under the Children Act 1989).
2. Children and Young People Leaving Care - up to 21 years of age, or 25 if in further education under the Social Services and Well-being (Wales) Act 2014 Sections 103 – 115 (formerly under the Children (Leaving Care) Act 2000)
3. The Social Services and Well-being Act 2014 definition of a child in Part 1 (3) states [“child” means a person who is aged under 18]. However, it is recognised that very young children in the 0–5 years old category need to be dealt with on a case by case basis, dependent on the individual child, the issue/s being dealt with and the availability/suitability of other forms of advocacy support i.e. Formal/Practitioner advocacy or Informal/ Family advocacy.

This is the provision of Statutory Advocacy as defined in the Social Services Health and Wellbeing Act 2014 and the National Approach to Statutory Advocacy Service Specification.The service also provides independent professional advocacy to all children and young people under 18 wishing to manage representation, raise a concerns, or make a complaint in relation to NHS services across Hywel Dda and Powys Teaching Health Boards. This is in line with Section 187 NHS (Wales) Act 2006.  |
| **Age range of people using the service** | 0 – 25 years |
| **Gender of people using the service** | All genders |
| **The number of people the service can support** | Based on the four regions we cover, we have guidelines of:1274 Issue Based Advocacy cases (issues) per year2175 Active Offer meetings per year. |

|  |
| --- |
| **Section 4: How the Service is Provided** |
| **Service Provision**The service comprises four regional advocacy services as detailed in section 2 above. Each regional serviceoperates on a peripatetic basis with advocates meeting young people in suitable, accessible locations of their choice, such as at school, at home or out in the community. **Referral Process**Young people access the service through referrals (self-referral, third party, or Active Offer) by phone, email, online referral form or face-to-face (including Active Offer meetings). A single administrative telephone number and email address operates for each of the services, clearly contained within all promotional materials. Auto-replies/voicemail highlight emergency/out-of-hours services (e.g. Meic Cymru).Referrals are coordinated by the Team Manager from the regional administration office. The service aims to contact children and young people within forty eight hours of referral receipt. Where this is not possible, a note explaining why is added to the young person’s case note. For third party referrals (Social Worker/ residential home /parent /foster carer/IRO/Child Protection Coordinator/ other professional), contact is also made with the referee to confirm receipt of referral and to confirm that contact has been made with the young person. Following receipt of referral and in responding to young people (or their representative, where there are communication barriers) we:* Note the young person’s initial issue;
* Establish eligibility: if ineligible, young people will be referred to other services such as Independent Mental Health Advocacy;
* Highlight any communication/access needs;
* Note any known risks shared by referee;
* Note any linguistic, cultural and/ or religious beliefs;
* Make an appointment with the young person for an initial face-to-face meeting with an IPA;
* Allocate the case to an IPA (main point of contact for the young person);
* Answer the young person’s questions;
* Open a record on Cygnet, our case management system.

**Suitability of Service**If, at point of referral, it is felt that the service cannot support the individual, we advise the young person or their representative as to the reasons why. If it is felt that the service can meet the advocacy needs of the young person, then the service proceeds. When allocating an Advocate, consideration is given to any linguistic, cultural and religious beliefs, allocating an Advocate from the service wherever possible, or enlisting the services of external professionals where necessary, e.g. interpreter. **Service Delivery**The first meeting, as per our peripatetic delivery model, takes place in a location of the young person’s choice. The meeting gains an understanding of the individual and the issues that they face, manages the young person’s expectations and explains: the role of advocacy and the service’s independent role in supporting young people’s participation in important decisions. We stress that the service is led by them and will not make decisions for them. The Advocate explains confidentiality, highlighting how we will treat the information they share with us (including our safeguarding responsibilities/procedures, in line with GDPR and the All-Wales Child Protection Procedures) and outlining how complaints can be made. This is supported by a welcome pack comprising our Service Guide and other relevant literature/contact details. **Advocacy Plan**The initial meeting is also an opportunity to develop the Issue-based Advocacy Plan. The Advocacy Plan is coproduced by the young person and the Advocate. It details the issue(s) requiring advocacy support, the young person’s wishes and feelings in relation to the issue(s) and how this will be tackled. The Advocacy Plan features a ‘to do’ list for both the young person and the Advocate detailing the actions each will undertake in order to progress the advocacy intervention and address the issue. The young person is provided with a copy of their Advocacy Plan which is written in their preferred language, appropriate to their level of communication and understanding. A copy is also added to the young person’s case file and shared with any other professionals, as advised by the young person. The Advocacy Plan is used by the young person and the Advocate to review progress, thus ensuring the young person remains central to the process. Similarly, if the young person's need for advocacy changes or if their instruction regarding an issue changes, the Plan is reviewed and updated accordingly. As the young person, supported by the Advocate, meets with service providers to discuss/reach a solution to their issue, the Advocacy Plan will be revisited to ensure that / to what extent the young person’s wishes/voice have been heard. **Ongoing Service Delivery**The advocacy relationship continues with the Advocate working with the young person, reviewing available options and planning the representations that they need to make, prior to progressing to making the representation itself. This can take one or several meetings depending on the issue. The service empowers young people, ensuring their voices are heard and that not only do they have a choice about their care and support but have options available to them by:* being led by the young person at all times
* focusing on rights and entitlements, not best interests.
* identifying the presenting issue(s) and providing issue based advocacy support in relation to this issue, not ongoing support work
* informing the young person of their rights and entitlements in relation to the presenting issue(s)
* offering choices to the young person regarding their presenting issue(s)
* exploring the outcomes of different options with the young person
* identifying the young person’s wishes and feelings, after consideration of all options, rights and entitlements
* sharing the young person’s wishes and feelings to others, as identified by him/her
* supporting young people at decision making meetings
* explaining process/terminology/rationale/discussions/decision maker and professional perspectives to the child/ young person, ensuring understanding
* discussing /agreeing contingency plans if discussions do not fulfil young person’s wishes;
* explaining decisions made and rationales for these.

The service provides issue based advocacy intervention therefore it contributes to young people’s happiness, health, development and wellbeing in relation to specific areas of concern. However, advocacy excels in these areas when working in partnership with other agencies and key people in a young person’s life, as this partnership approach can help ensure long term benefits for young people. In order to assist with young people’s ongoing happiness and development, the service will also signpost to other appropriate services, projects and clubs (e.g. youth clubs) with the consent of the young person. On occasion it is necessary to obtain advice or assistance from specialists, e.g. legal advice. Where this is necessary, the young person is either supported to access legal/ specialist advice in their own right, accompanied by the Advocate, or anonymous advice is sought by the Advocate on behalf of the young person to identify if/ how the issue can progress. In line with National Standards, Advocates reflect the wishes of the young person for whom they advocate, even if this conflicts with the ‘best interests’ of the young person (unless safeguarding concerns are identified). **Service Endings**Once a decision has been made and the issue addressed, the advocacy relationship enters a period of conclusion, evaluation and closure. This ensures:* Young people have the opportunity to revisit/review their advocacy plan, assessing feelings around issues/outcomes achieved;
* Young people complete evaluation forms;
* Conclusions are shared with professionals;
* Case closure.

**Language and Communication**The service is available to young people in the language of their choice. TGP Cymru operates bilingually in Welsh and English with all literature and information produced about and for the service for both service users and professionals available bilingually. This includes promotional literature, website, referral forms and feedback forms. Young people can indicate their preferred language of communication at point of referral or at any time during the advocacy intervention. Staff actively offer the service through the medium of Welsh to all young people, even where this is not the preferred language at point of referral. In the event that a service user is initially allocated a non-Welsh speaking member of staff but having started to work with the Advocate, wishes to change to a Welsh speaker, this is facilitated. The service boasts a number of Welsh speaking staff to accommodate such requests. If the local advocacy service were not to have a Welsh speaking Advocate, an Advocate from an alternative service would be sourced. Due to our presence across much of Wales, TGP Cymru operates a Cross Project Working Protocol, allowing Advocates with skills in specific areas, including language skills, communication skills and expertise in certain areas, for example emotional wellbeing or mental health, to be deployed across multiple services. Children and young people whose first language is neither Welsh nor English also receive the service in their preferred language. The service will organise translation and interpreter service to accommodate such requests, as per our contract and National Approach Service Specification. For young people those with severe learning/communication needs, we have a range of augmented communication methods (and staff trained to use them), including Picture Exchange Communication Systems (PECS) and Makaton. Literature about the service is also available in Makaton. For young people who are unable to provide any instruction, we provide Non-Instructed Advocacy as per the Watching Brief. TGP Cymru has recently developed a complete training suite in relation to Non-Instructed Advocacy which will be delivered to all advocates across Wales. The provision of Non-Instructed Advocacy takes place when a young person has a clearly identifiable advocacy issue but is unable to share their wishes and feelings in relation to the issue with an Advocate, due to communication limitations. Non-Instructed Advocacy enables an Advocate to observe a young person in a number of settings and report back independently to a referrer/ decision maker, hence providing an independent voice for the young person in relation to the specific situation. **Confidentiality and Safeguarding** The service is confidential, sharing information only with those the young person wishes to share with/ instructs the Advocate to inform. Every young person accessing the service is informed of the confidential nature of the service at the beginning of the advocacy relationship. Young people are also told, that despite operating in a fully confidential manner, should they disclose anything the advocate considers to place them or any other person at risk of significant harm, then that information will have to be shared with others. This is in line with the All Wales Safeguarding Procedures. In practice, the Advocate reminds all young people of both confidentiality and safeguarding at regular intervals during the advocacy relationship, thus ensuring the young person feels safe and protected from abuse. When a young person makes a safeguarding disclosure, the Advocate reminds them again and informs them that they need to share the disclosure with their manager. Wherever possible the call to the manager takes place with the young person present to ensure transparency. Advocates ensure reassurance takes place throughout the disclosure process, taking care not to make promises regarding the next steps.  |

|  |
| --- |
| **Section 5: Staffing Arrangements** |
| **Numbers and qualifications of staff:**The following staff structure for the service(s) is in place. A number of casual advocates support the employed staff detailed below: |
| **North Wales Advocacy Service** |
| Team Manager  | Full time | Will complete agreed qualification and register with SCW once this is available.  |
| A team of advocates, comprising both full time, part time and casual staff. Advocates are facilitated to obtain the City & Guilds Level 3 Cert in Advocacy after successful completion of two years’ service. The above mentioned qualification will be amended in line with RISCA requirements once these have been finalised.  |
| Administrator  | 40 hours (job share) |  |
| **Mid and West Wales Advocacy Service** |
| Team Manager  | 37 hours | Will complete agreed qualification and register with SCW once this is available.  |
| A team of advocates, comprising both full time, part time and casual staff. Advocates are facilitated to obtain the City & Guilds Level 3 Cert in Advocacy after successful completion of two years’ service. The above mentioned qualification will be amended in line with RISCA requirements once these have been finalised. |
| Administrator  | 20 hours |  |
|  |
| **Cwm Taf Morgannwg Advocacy Service** |
| Team Manager | 18.5 hours | Will complete agreed qualification and register with SCW once this is available. |
| A team of advocates, comprising both full time, part time and casual staff. Advocates are facilitated to obtain the City & Guilds Level 3 Cert in Advocacy after successful completion of two years’ service. The above mentioned qualification will be amended in line with RISCA requirements once these have been finalised. |
| Administrator | 17.5 hours |  |
|  |

|  |
| --- |
| **Western Bay Advocacy Service** |
| Team Manager | 18.5 hours | Will complete agreed qualification and register with SCW once this is available. |
| Administrator  | FTE |  |

|  |
| --- |
| **Supervision and Support Arrangements** |
| On commencement of employment with TGP Cymru, all staff receive two inductions: one at the service which focuses on the role, the team and practice standards, and a second at our head office in Cardiff which acts as a formal introduction to the organisation. Accompanying the induction is TGP Cymru’s safeguarding training, again delivered in head office by our Learning and Development Manager. All new staff complete a six month probationary period. This comprises a review at three months and a second at five months. If it is not possible to meet these target dates (e.g. due to illness, diary clashes), HR are informed. At each review, the line manager must review progress and evidence to support progress against the job description before signing off, making recommendations for improvement or ceasing the staff member’s employment. During the probationary period, intensive support is offered to new staff in addition to monthly supervision. Staff are buddied with experienced team members, initially to observe practice and subsequently to be observed by both experienced staff and the line manager. Following successful completion of the probationary period, all staff receive supervision from their line manager every eight weeks. If it is not possible to meet this frequency (e.g. due to illness, diary clashes), this is noted on the staff member’s supervision notes. Supervision is an opportunity for staff to discuss their cases and also to receive support in relation to their wellbeing. Supervision discusses current and forthcoming priorities, identifies what is going well, which cases require additional support, learning and development needs and role specific administration tasks such as ensuring case notes are up to date and timesheets are submitted in a timely manner. TGP Cymru is currently undertaking a large piece of work to ensure induction, probation, supervision and annual appraisals all link, and track the ongoing development of staff. Annual appraisals also take place with all staff. This offers the opportunity to reflect on the past year and to agree targets and areas for both personal and professional development. Due to the regional nature of our advocacy services, face to face contact between the Team Manager and staff does not take place on a daily basis, but advice, support and guidance is accessed by telephone, email or skype between face to face supervision sessions. All staff are advised during their induction that if they are unable to contact their manager and require urgent support then they can contact any other manager to request this support. In addition, all staff have access to the Employee Assistance Programme provided by Health Assured, which provides a free 24 hour confidential helpline to support with any issues, whether they be work related or otherwise, such as stress, financial worries, dependency issues. In addition this service provides a number of free and confidential counselling session for staff.  |
| **Staff Training** |
| TGP Cymru understands that our staff are our most valuable resource. In order to maintain a fulfilled and effective staff team robust, effective systems and practices for identifying and meeting learning and development needs are essential.The process of continuous professional development begins at induction and progresses through the employee’s probationary period and onwards throughout their career at TGP Cymru.**Induction Pack** All members of staff are given an ‘induction pack’ when they join TGP Cymru. This contains a ‘Task Analysis’ and ‘Target Setting’ exercise which encourages the individual to consider the tasks involved in their role and how they feel about completing them. This sets the tone for ongoing discussion of gaps in knowledge or experience through informal discussion or Supervision with the individual’s line manager. In addition the induction pack contains an ‘Induction Checklist’, which all new staff must complete and return to HR. This guides the individual to keep a record of the information they’ve received and to seek out any that they feel they need as part of the induction process. **Mandatory Learning*** **Head Office induction**

All members of staff are required to attend the Head Office Induction session as soon as possible after starting their role (these are held quarterly). This session introduces the individual to the organisation, its values, history, structure and expectations as well as what staff can expect from the organisation in terms of support and communication.* **Safeguarding**

All members of staff are required to attend Safeguarding training as soon as possible after starting their role (this session is frequently delivered back-to-back with head office induction over 2 days). TGP Cymru’s Safeguarding Awareness session is based on the All Wales Basic Safeguarding Awareness Training. Where individuals feel they would like to attend further learning they are encouraged to attend the local authority’s safeguarding training and/or further specific training relating to their role (e.g. self-harm, suicide intervention, child sexual exploitation).* **Workrite**

All members of staff are required to complete a series of e-learning modules which relate to key underpinning knowledge. The relevant combination of the following modules are undertaken within the first month of joining the organisation: Assessrite (Display screen equipment and work environment) GDPR/Data Protection Act Equality and Diversity  Fire Rite (Fire safety) Handle Rite (Manual Handling) OHSA (Office Health and Safety) OHSALM (Office Health and Safety for Line Managers) Mobilerite (Lone working and mobile working) Dyslexia Screening (optional)**Role-Specific Learning** Whilst all new staff are required to attend the mandatory training programme, further learning and development is also offered, which is more specific to each role.Project-based induction: During the first few weeks of employment, individuals will undergo project-based induction relating to the specifics of the project at which they’re based. This has an overlap with some of the criteria on the Induction checklist outlined under ‘Head Office Induction’ above, and is designed to ensure that the individual feels settled in to their environment and understands their role as quickly as possible. This would usually be delivered by a project leader or Senior Practitioner, but could be delivered by an experienced Administrator or other team member.Team Managers: Team Managers are expected to complete a Leadership and Management qualification. However, we are aware that the training requirements for both Managers and Advocates will change in line with RISCA and await confirmation of these requirements. Advocacy Workers: Understanding Advocacy (Accredited), Advocacy Skills (Accredited), Non-Instructed Advocacy (just completed pilot phase - planned accreditation in 2019) Following 2 years of service (or sooner if nominated by their line manager), advocacy workers are required to complete the City and Guilds Level 3 Certificate in Independent Advocacy with Children and Young People. This is currently provided by Gower College under Skills for Industry funding.Administrators: Following completion of their induction, Administrators are offered the opportunity to spend a few days alongside a colleague in a similar team. Here, the basics of the role and systems are covered and the individual has an opportunity to see an Administrator ‘in action’. Following this, the experienced Administrator acts as a ‘buddy’ to offer peer support to the new employee.**Ongoing Learning and Development**Ongoing learning and development needs are identified by the individual in discussion with their line manager through TGP Cymru’s Supervision and Appraisal systems. The recording forms for supervision and appraisal each have a section which prompts discussion and recording of gaps in skills and/or knowledge. Where a gap is identified, the individual, their line manager and/or the learning and development manager will explore and identify potential ways of addressing this gap. This may take the form of formal learning but equally may involve coaching, shadowing, self-directed learning or a combination of these.Occasionally, changes and developments in social care in Wales may require TGP Cymru to respond quickly and efficiently to relay these changes, their impact and related learning. As a relatively small organisation TGP Cymru is able to meet this need through existing communication systems alongside the roll-out of staff workshops or training sessions as necessary. An example of this would be the changes to advocacy brought about by the introduction of the National Approach to Statutory Advocacy, where all advocacy practitioners and managers were trained to embed new elements of practice into their day-to-day roles within the space of a few months. **Recording Learning and Development Activity**All learning and development activity (with the exception of Workrite modules) is monitored and recorded using ‘You Manage’ software. This allows individuals to electronically request and receive authorisation from their line managers whilst simultaneously notifying the Learning and Development department of the activity, its duration and cost. All Workrite information (e-learning) is held securely within the Workrite system and is reported as required by individuals, managers or the Learning and Development department.Information from You Manage and Workrite is collated and discussed with individuals at supervision and annual appraisals, as well as providing an overview of learning and development activity in each team, region and department. |

|  |
| --- |
| **Section 6: Facilities and Services** |
| **Storage of Records**The service operates from a number of regional offices (detailed in section two above). Each regional office functions as the main administrative office for the regional service. The Team Manager and Team Administrator are based in the regional offices, along with a small number of other service staff. All referrals are directed to the administrative office as is any other service related paperwork and documentation such as contracts, invoices, staff expense claims and supervision notes. All documentation relating to staff, including HR information (personnel files detailing personal details, next of kin details, any disciplinary action, annual appraisals and working pattern) and financial information (relating to salary) is stored in our head office in Cardiff. Advocacy referrals, once received are added to Cygnet, our Case Management System, and are then deleted or destroyed (shredded). Cygnet is a server based system accessed through a secure VPN and with a double password entry system. Cygnet is set up in such a way that Advocates only have access to service user files from the counties in which they work, while Team Managers and Team Administrators have access to all counties in the region and senior management have access to all service users. This ensures staff only see information relevant to their service. The service keeps only very limited paper files in relation to service users as our Case Management Systems allows for the files to be stored electronically. In the event that a paper file is created, this is kept in a secure filing cabinet and added to Cygnet when necessary, before being shredded. Other service related documents, such as invoices, budgets and financial recording are kept in both electronic and paper format. The service uses Office 365 to ensure that important documents can be accessed by the manager from any location and reduces the need for paper files. However, where paper copes exists they are stored in lockable filing cabinets. The service is fully complaint with GDPR and a full data audit was undertaken for GDPR compliance in 2018. All staff receive training in GDPR on a rolling basis via Workrite. **Meeting with Service Users**All four regional offices offer private meeting rooms to enable service users to meet with staff. However, due to the peripatetic nature of the service, this happens very rarely. In some regional offices, a meeting room must be booked in advance as it is shared with other organisations. In order to comply with health and safety requirements all visitors must sign in an out of the buildings and in the event that a service user chooses to meet with an Advocate on site, we ensure there is another member of staff on site to comply with health and safety requirements. **Meeting with Staff / Staff Training** Regional offices, for the most part offer private meeting rooms to enable the Team Manager to meet with and supervise staff in a private and confidential manner. In some offices the meeting room must be booked in advance as it is shared with another organisation. In regional offices where there is no private meeting room on site, an alternative private meeting room is sourced for such reasons as supervision. Team meetings and some staff training takes place from regional office locations. However, due to the nature of the service the majority of staff training is accessed via an online e-learning system (core training modules which are completed every three years), takes place in our head Office in Cardiff or is accessed externally.  |

|  |
| --- |
| **Section 7: Governance and Quality Monitoring Arrangements**  |
| We ensure service quality through a number of ways:**Responsible Individual**The Responsible Individual (RI) will undertake quarterly visits to the service as defined in the Regulation. Other tasks associate with this role are delegated to the Director of Advocacy Services (DOS), although the RI maintains accountability. The DOS will ensure the manager follows organisational policies and procedures in relation to providing a high quality, suitable, effective and safe service. TGP Cymru has robust Finance, HR and Learning & Development teams, which work with the DOS and Team Manager to ensure sufficient resources and appropriately trained staff. Each Team Manager is supervised by the DOS. Supervision takes place as detailed in section 5 above. In the event that the Team Manager is absent from work, the DOS will ensure that a suitably qualified manager is identified to manage the service. All managers at TGP Cymru are trained to the same standards and deliver services that operate via an agreed model. Any temporary manager would naturally ensure ongoing and consistent service delivery, quality and compliance with minimum disruption to the service.As a member of the Strategic Management group, the DOS has oversight of all aspects of service delivery. In regular contact with head office teams, she is aware of staff turnover, sickness levels, complaints, safeguarding issues and reports. Following each quarterly visit, the RI will meet with the DOS to action any findings from the report as well as from any other external feedback received, including complaints. **Service Structure**The four regional services are overseen by the Director of Advocacy Services who is responsible for the line management of all Team Managers, ensuring a consistent approach to service delivery. The Director of Advocacy Services is line managed by the CEO (RI). Day to day line management of regional service staff, the budget and service provision is delegated to the relevant Team Manager. The Team Manager is involved in processes such as recruitment and selection and staff disciplinary processes but in consultation with the DOS and the Senior Management Team. **Review meetings**Contract review meetings with regional commissioners take place on a quarterly basis. Meetings allowing for the sharing of information in relation to the service, including management, changes to the way the service is delivered/ managed and any urgent matters that need sharing. Reports are provided to commissioners on a quarterly basis and are reviewed in the quarterly meeting with commissioners. Reports collate information around service data, performance and delivery. **Complaints**TGP Cymru has a complaints policy and leaflet. Information about how to complain and a complaints leaflet is shared with all young people accessing the service during our first meeting with them. A Complaints Officer investigates all formal complaints. While we firmly believe in informal resolution as this boasts significant benefits for all parties, we are aware that there are times when formal complaints arise and we investigate these fully. We embrace the learning we acquire as the result of complaints, both formal and informal and strive to address issues raised and make changes as a result. In addition young people being able to complain, any external parties who are unhappy with our service, are entitled to make a representation.All complaints received are recorded at Service level and formal complaints are also collated centrally and reported to Trustees on a quarterly basis. **Service User Involvement** As an organisation which focuses on ensuring that the voice of young people is heard in decisions which are made about them, it is right that these young people (CYP) have a voice in determining the quality of the service that they receive. This is achieved in a number of ways:* Young people accessing the service have the opportunity to evaluate their experience in the evaluation phase of the advocacy journey. Evaluation feedback is recorded at the service and forms part of our quality checks and reporting process to service commissioners
* Young people have the opportunity to take part in an annual service user survey. This information is reported to service commissioners as part of our annual reporting process
* Young people are involved in decisions made about the project e.g. staff recruitment.
* We consult with young people about service resources, such as marketing literature and information.

**Staff Involvement** Our staff team is our most important resource, central to the continual improvement of delivery and monitoring. In particular:We ensure that staff can access training to keep them abreast of changes in policies and legislation, thereby providing an accurate service. We also ensure staff are aware of the targets and reporting requirements for the service, to ensure they strive to ensure quality of service provision.The service organises regular team meetings, which provide the opportunity for peer support, practice exchange and sharing of information regarding policies, procedures and targets. Team meetings are also used to consult with staff about changes to policies and service delivery. We are aware that staff undertaking direct work with young people have knowledge about what will/ won’t work with young people as well as what is important when undertaking case work, and value their feedback. Effective staff management, annual appraisals, bi-monthly supervision and regular management reviews ensure that staff work to managed expectations and are supported to achieve targets. This process is upheld through a wide range of policies which are available to all staff. In addition, staff participate in conferences, working groups and forums which seek to support knowledge transfer, identification of best practice and continued improvement. TGP recognise that all staff have a voice to contribute to quality improvement and we operate an open door policy where staff are encouraged to contribute ideas and evidence from their own practice that will link to performance improvement.**Other Stakeholder Involvement**Compliments, complaints and representations are collected from stakeholders, service users and any other person who comes into contact with the service during the course of the year. These are collated by the RI and shared with Trustees on a quarterly basis to help shape and improve service quality and delivery. Both the CEO and the DOS are accessible to all individuals wishing to comment on the service, indeed the DOS has a bespoke email address for this purpose. In addition staff email signatures offer the facility for anonymous feedback via a ‘Suggestion Box’ facility. Feedback from commissioners is obtained via regular contract monitoring meetings and is essential to service monitoring and improvement.  |

**Signature** ****

**Name:** Sarah Durrant

**Position:** Director of Advocacy

**Date:** 13.03.2020