



Department
of Health &
Social Care

CONTRACT REF C51984 Notice of VARIATION

Provision of Services – Evaluation of Culturally Appropriate Advocacy Pilots

Variation No: 001 Account CIC

BETWEEN:

The Secretary of State for Health and Social Care acting as part of the Crown. ("the Customer")

and

Account CIC ("the Supplier")

Provision of Services – Evaluation of Culturally Appropriate Advocacy Pilots

To continue to deliver the services and requirements under the existing Terms and Conditions of the Short Form Contract signed by both Parties on 17th November 2021 with a total value of £42,750 exc. VAT.

Additional services included within this variation at a maximum cost of £21,375 exc. VAT, are as follows:

Summary of work

[REDACTED]

[REDACTED]

BME specific advocacy

An appraisal of quantitative data will provide insight to understand the value of BME specific (targeted) advocacy. More specifically, this will include:

- Identifying the service reach of Bristol's BME advocacy service from 2016-2019.
- A review of ethnic detentions by hospital trusts from 2016-2019
- Identifying two geographic locations or hospital trusts with similar ethnic detentions rates as Bristol
- Assessing the suitability of ethnic monitoring data of advocacy take up in Bristol and two comparison regions
- Appraising the data to ascertain the extent to which BME specific advocacy increases access to advocacy.
- To produce a briefing, incorporating the data review and conclusions.

Culturally specific advocacy

Mixed methods research will be employed in the evaluation of the culturally specific advocacy in Yorkshire. To ensure the nuances of this initiative are documented throughout its operational stages, ongoing liaison will take place with the partner organisation who will be the evaluation delivery partner as part of a social action research methodology. This will involve:

- [REDACTED]

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Codesigning culturally appropriate pathways

The partner organisation is currently working across areas of Yorkshire. Asian Muslim's have been identified as a population to take more coercive pathways into care and alternative helping-seeking routes, typically involving faith-based organisations (FBOs). Each of these factors are areas of concern as they can delay access to care. The evaluation will examine the codesign process to review this pathway into inpatient settings. Co-design meetings will be held to see where advocacy can be incorporated into the pathway to care, to explore the cost implications and to examine resource-based infrastructure needs, and the implications for blue-light services. FBO leaders will be engaged to understand the context of service users' needs when presenting to gauge the need for advocacy via this route.

To ensure this evaluation is carried out effectively we will:

- Observe pathway to care co-design meetings
- Conduct 3-5 interviews with potential delivery agents (e.g., FBOs blue light services and early intervention)
- Identify and document data pertinent to the pathway to care for Asian Muslims (e.g., S.135 admission).
- Wherever possible, data collection with service users.

The lines of inquiry for data collection will cover:

- Barriers and enablers to upscale of service.
- Resource requirements across pathway to care infrastructure (e.g., staff time and engagement practices and outcomes).
- Support needs in relation to delivery.
- Implications for effective commissioning.
- The most cost effective point to provide pathway to care advocacy
- The most effective point to provide advocacy on the pathway to care?

CTO engagement

Asian people have been identified as a group who are over-represented on CTOs. DHSC's scoping exercise identified how advocacy organisations had been inactive in reaching out and supporting people while on a CTO. This is a significant concern as it can contribute to unnecessary readmissions. The partner organisation will expand it's provision to engage Asian Muslims who are on CTOs to test the concept of proactive community advocacy. Delivering this initiative will offer insight into the advocacy needs of people on CTOs and the resources and structures through which this work can take place.

To ensure the evaluation is carried out effectively we will:

- Obtain feedback from 5-10 CTO engagements with Asian Muslims through case-based analysis.
- Identify and document data pertinent to the pathway to care for Asian Muslims (e.g., No, of people on CTO's by ethnicity and religion and local demographics).
- Interview local authority commissioner.
- Record data for clients on number of previous readmissions.
- Wherever possible, data collection with advocacy clients.

The lines of inquiry for data collection will cover:

- [REDACTED]

Evaluation Costs

Staff & Grade, list each individually)	Responsibility	Tasks to be Undertaken	Daily Rate £ (exc VAT)	Total Days	Total price per individual at each grade (exc VAT)
A [REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
			[REDACTED]	[REDACTED]	[REDACTED]

Non Staff/ Project Team Charges

ITEM	ITEM DESCRIPTION	COST
[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]
Total Cost		£21,375

Signed by an authorised signatory for and on behalf of the Supplier

Signature [REDACTED]

Date4.1.22.....

Name (in Capitals) [REDACTED]

Address359 Hanworth Road Hounslow Middlesex TW3 3SQ

.....

Signed by an authorised signatory to sign for and on behalf of the Customer

Signature [REDACTED]

Date 4th January 2022

Name (in Capitals) .. [REDACTED]

Address..... Quarry House Leeds LS2 7UE