

OPAAL UK
OLDER PEOPLE'S ADVOCACY ALLIANCE

Quality Standards

**for the Provision of Advocacy Support
for Older People Affected by Cancer
(COPA)**

March 2016

Table of Contents

Section 1.	Acknowledgement.....	4
Section 2.	Introduction	5
Section 3.	Definition of Advocacy.....	7
Section 4.	Quality Standard Audit Process	8
Section 5.	Thanks to Our Volunteers	9
Section 6.	Organisational Standards.....	10
Section 7.	Partnership Standards	14
Section 8.	Monitoring and Evaluation Standards:.....	17
Section 9.	Service Provision Standards	20
Section 10.	Training, Supervision and Support Standards.....	24
Section 11.	Confirmation of Compliance	27
Section 12.	Details of Staff and Volunteer(s) Involved in Audit Process.....	28

Section 1. Acknowledgement

We wish to thank OPAAL's Cancer, Older People and Advocacy (COPA) delivery and parallel partners for their support and assistance in developing these standards. Organisations: Beth Johnson Foundation, Dorset Advocacy, Help & Care, Sefton Pensioners Advocacy Centre (SPAC), AgeUK Gateshead, Independent Community Advocacy Network North (ICANN), Knowsley Pensioners Advocacy Information Service (KPAIS), Age UK Bristol, Sandwell Advocacy, Oxfordshire Advocacy, Age Connects Cardiff, Impetus Brighton & Hove, AgeUK Northumberland and Advocacy in Barnet.

Thanks also to COPA Research & Development partners all of whom are OPAAL member organisations and participants in the Partnership Development Hub. Organisations: Support, Empower, Advocate, Promote (SEAP), Older Citizens Advocacy York (OCAY), Invicta, SWAN Advocacy, LAMP, Royal Deaf Society, Voices & Choices.

We would also like to thank Macmillan Cancer Support and in particular Mig Muller, for her really helpful input. Mig gave us real food for thought and we are very grateful for her support.

Section 2. Introduction

This document contains the standards that organisations providing an older people's cancer advocacy service under the auspices of the Cancer, Older People and Advocacy (COPA) programme, are expected to meet. Advocates, whether paid or unpaid, should act in line with these standards whenever they are supporting individual clients and when working in partnership with other organisations and services to provide a holistic and person centred approach to client needs. Within the context of the COPA programme these standards are neither negotiable nor discretionary.

These standards have been devised in partnership with **OPAAL** and its member organisations and are what clients should expect when they receive independent cancer advocacy services. They are the standards that are demonstrated on a day-to-day basis by good older people's cancer advocacy services across the UK.

As a membership organisation of **OPAAL** and deliverer of older people's cancer advocacy services you commit to upholding these standards. This commitment is fundamental and an intrinsic characteristic of a high performing and quality advocacy service.

The standards can be used by:

- Clients and their families to provide feedback to advocates and the organisation about the service they receive.
- Paid and unpaid advocates to promote safe and effective working practice.
- Organisations providing services to support their staff and volunteers to deliver services of a quality expected by individuals receiving those services.
- Trainers and educators involved in developing paid and unpaid advocates to help them to understand the importance of adhering to a benchmarked standard.

COPA Quality Standards

These standards should be viewed by **OPAAL** membership organisations delivering COPA services as a way of reinforcing and further demonstrating their professionalism and commitment.

Each standard contains a series of statements that, taken together, signify what a good older people's cancer advocacy service looks like. It puts the interests of clients first, is safe and effective and promotes trust through a professional and person centred approach.

Section 3. Definition of Advocacy

Advocacy supports and enables people who have difficulty representing their interests to exercise their rights, express their views, explore and make informed choices.

Independent advocacy supports the person regardless of the demands and concerns of others. It challenges the causes and effects of injustice, oppression and abuse and upholds human rights. (OPAAL National Forum 2008)

Older people's cancer advocacy services incorporate all of the above in supporting anyone over the age of 50 who has been affected either by their own diagnosis of cancer or by the diagnosis of someone else. Additionally, they promote opportunities for older people affected by cancer (OPABC) to train as cancer advocates thereby enabling them to support their peers.

Section 4. Quality Standard Audit Process

OPAAL and the member organisations involved in developing the COPA Quality Standards do not wish to make the audit process an onerous one. We also want to encourage volunteers to be involved. With this in mind we have developed an audit document which can be used by staff and volunteers to internally audit the standards.

The involvement of volunteers in the audit process is intended to demonstrate a commitment by **OPAAL** and its members to valuing volunteers. Through this process we are able to demonstrate that volunteers are very much involved in the operational activities of the charity.

It is anticipated that between 1 and 3 volunteers should be involved in the audit process. This will depend on the size of the charity and interest of volunteers in taking part in the exercise.

It is advisable that a member of staff is available to support the volunteers. This may involve finding documents such as policies and procedures and with information about meetings or groups referred to in the various sections.

OPAAL will issue a certificate of compliance to those member organisations who submit, by email, confirmation that an internal audit has taken place. In order to confirm this, a scanned copy of the final page of this document should be sent to debbie@opaal.org.uk. The certificate will be sent to you within 28 days.

Section 5. Thanks to Our Volunteers

OPAAL, the Resource and Development Members and the Member Organisations would like to thank all volunteers who take part in the quality audit process.

With your help we are able to ensure that high quality standards of service delivery are maintained for all individuals who access advocacy support when affected by cancer.

Your time is precious and we value you and the time you contribute to support our charities and the people we serve.

Section 6. Organisational Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>1. The cancer advocacy service adheres to the Advocacy Charter¹ (and is working towards Quality Performance Mark attainment).</p>	<p>1.1 The organisation can demonstrate that its work is in line with the Advocacy Charter Mark stated guidelines for advocates and their managers by providing clarity, support and boundaries for their practice.</p> <p>1.2 Commissioners have been informed of the purpose of the service and what clients, as well as commissioners, should expect from the delivery of the service.</p> <p>1.3 Advocates are aware of what is and is not expected of an advocate in their day-to-day work with clients.</p> <p>1.4 A Quality Performance Mark is in place or the organisation is working towards those standards</p>		

¹ Action for Advocacy, 2002 <http://www.aqv59.dsl.pipex.com/Advocacy%20Charter2004.pdf>

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>2. The cancer advocacy service develops publicity and promotion materials that clearly describe its role. Where appropriate, clients, staff, volunteers and partner agencies recognise it as a distinct service within a wider organisation and, if it exists in the context of wider advocacy provision, it is noted as a separate specialism.</p>	<p>2.1 Promotional materials are in place and are accessible to clients and health and social care professionals in various formats including online and hard copy.</p> <p>2.2 Literature and website information detail the service as a distinctly separate service to other projects and services offered by the organisation.</p> <p>2.3 Publicity materials clearly show that the project is offered in partnership with OPAAL and Macmillan.</p>		
<p>3. The cancer advocacy service has a defined area of operation and eligibility criteria and these are clearly reflected in the service's publicity materials and promotional activities.</p>	<p>3.1 Eligibility criteria and areas of operation are clearly stated in publicity materials.</p> <p>3.2 All staff and volunteers engaged in the service know and can explain the eligibility criteria.</p>		
<p>4. All materials are explicit in explaining that the cancer advocacy service provides neither clinical advice nor any other type of advice. Advocates offer peer support that enables the person to speak up and reach their own decisions.</p>	<p>4.1 Publicity materials are fully explicit in identifying the service as non-clinical.</p> <p>4.2 The service does not offer advice of any type to clients and this is explained to clients at the first point of contact.</p> <p>4.3 Advocates ensure that clients are supported, through signposting and referral, to organisations and services</p>		

COPA Quality Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
	that offer access to information and advice that will enable them to make informed decisions.		
5. The cancer advocacy provided is free of charge and, to aid transparency, the service is clear about funding sources in its publications.	5.1 There is no charge for the service. 5.2 All publications state that the service is funded by Macmillan. 5.3 The Macmillan, OPAAL and any other funder logos are clearly shown on all publications.		
6. There is a clear Gifts Policy that is explained to all clients.	6.1 A Gifts Policy is in place and made easily available for reference to all staff and volunteers in paper based and electronic format as required.		
7. The cancer advocacy service's Confidentiality Policy is clear, concise and is provided and explained to all clients at the start of each advocacy relationship.	7.1 A confidentiality policy is in place and made available for reference to all staff and volunteers in paper based and electronic format as required. 7.2 The confidentiality policy is explained to all clients at the start of the advocacy relationship and is available in paper based and electronic format as required. 7.3 The confidentiality policy is written in formats that are appropriate for individual clients. 7.4 A written statement of confidentiality is left with clients for future reference.		

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
8. The cancer advocacy service complies with policies that are accessible to all clients, volunteers and staff and include the following: Compliments and Complaints, Data Protection, Equality, Health and Safety, Risk, Safeguarding, Whistleblowing.	<p>8.1 A comprehensive portfolio of policy documents is in place and includes: Compliments and Complaints, Data Protection, Equality, Health and Safety, Risk, Safeguarding, Whistleblowing.</p> <p>8.2 All policy documents are easily accessible to all staff and volunteers.</p> <p>8.3 Clients are able to access policy documents on request.</p>		

Section 7. Partnership Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>1. The cancer advocacy service identifies potential referring agencies and promotes the service to them.</p>	<p>1.1 All staff and volunteers are aware of the importance of identifying potential referring agencies and carry out awareness raising exercises such as, but not limited to, presentations at organisations’ team meetings, leaflet drops, posters, discussion with managers.</p> <p>1.2 The source of referrals is recorded for reporting purposes and to advise future awareness raising activities.</p>		
<p>2. The cancer advocacy service has procedures and timescales for dealing with referrals received from partner agencies or individuals, including inappropriate referrals, and all referrals are recorded on System for Advocacy Management (SAM) within 5 working days of receipt.</p>	<p>1.3 A clear procedure is in place for dealing with referrals.</p> <p>1.4 Inappropriate referrals are recorded and advised to the referring agency or individual and onward referral or signposting is carried out.</p> <p>1.5 Referrals are recorded on SAM within the allocated timeframe.</p>		
<p>3. Local partner agencies, especially referring agencies, receive at least annual information updates about the</p>	<p>1.6 The organisation informs partner agencies by including information in its annual report or newsletter and by</p>		

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>cancer advocacy service activities. These updates include number and source of referrals, anonymised client data, compliments and complaints statistics and, where appropriate, financial information about the service, and provides case studies reflecting outcomes achieved by clients.</p>	<p>ensuring partners receive a copy.</p> <p>1.7 Information about the cancer advocacy service activities is shared with partner agencies e.g. in the annual report or periodic newsletter.</p> <p>1.8 Information shared includes details of the number of staff and volunteers involved and the number of beneficiaries and examples of outcomes achieved.</p> <p>1.9 Case studies are submitted to OPAAL to outline activity and outcomes.</p>		
<p>4. Local partner agencies are represented on the cancer advocacy service's Local Cancer Champions Board (LCCB) and are able to influence and have a role in service planning, review and development.</p>	<p>1.10 Information is available to demonstrate partner agency involvement on the Local Cancer Champions Board.</p> <p>1.11 Records are available to show how partner agencies have a role in service planning, review and development for example through minutes of meetings.</p>		
<p>5. Volunteer cancer advocates are represented on the cancer advocacy service's LCCB and are able to influence and have a role in service planning, review and development.</p>	<p>1.12 Volunteer advocates are represented at LCCB meetings.</p> <p>1.13 There is evidence to show how volunteer advocates have a role in service planning, review and development.</p>		

COPA Quality Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>6. A local representative attends the national steering/advisory group on behalf of the cancer advocacy service and is able to influence and have a role in national service planning, review and development.</p>	<p>1.14 A local representative attends the national steering/advisory group. 1.15 Minutes of meetings show that a local representative is involved in and influences national service planning, review and development.</p>		
<p>7. The cancer advocacy service has procedures for passing on referrals to other agencies or services should it be unable to meet all client needs. This information is recorded on SAM.</p>	<p>1.16 Systems are in place to show referrals or signposting to other local or national agencies as appropriate. 1.17 Information to show onward referral is available through SAM recording.</p>		

Section 8. Monitoring and Evaluation Standards:

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>1. The cancer advocacy service ensures that SAM is up to date and the data it submits is of good quality.</p>	<p>1.1 A procedure is in place that states how and when SAM should be updated and this is adhered to by those responsible for data entry.</p> <p>1.2 Checks are made periodically to ensure the accuracy of data entry.</p> <p>1.3 Errors and omissions are amended as necessary.</p> <p>1.4 Accuracy of data is checked with clients and missing data is queried e.g. contact numbers, postcodes etc.</p>		
<p>2. The cancer advocacy service has effective monitoring and evaluation processes in place, using nationally agreed templates to gather information. These monitoring and evaluation processes provide feedback from clients to help inform the following:</p> <ul style="list-style-type: none"> • the level of satisfaction with the service they have received 	<p>1.5 Feedback is gathered regularly from clients in the most appropriate way for the individuals involved.</p> <p>1.6 Information on feedback forms is routinely analysed in order to assess client satisfaction.</p> <p>1.7 Changes to service delivery are made that reflect feedback and the use of identified best practice.</p> <p>1.8 Areas where clients are dissatisfied are appropriately addressed with the</p>		

COPA Quality Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<ul style="list-style-type: none"> • whether or not they would recommend the service to others • how far their desired outcomes, expressed at the start of the advocacy relationship, have been met • if the service has enhanced their ability to speak up for themselves 	<p>individual in compliance with organisational policies and procedures.</p> <p>1.9 Outcomes achieved are identified, recorded electronically and analysed.</p> <p>1.10 Feedback information is shared with OPAAL and COPA partners so that best practice can be shared and success celebrated.</p>		
<p>3. The cancer advocacy service actively participates in external evaluation where required under the terms of the contract.</p>	<p>1.11 Information is shared as required with external evaluators in line with the service contract.</p> <p>1.12 Records and reports are available for inspection and can be used as part of the evaluation process.</p> <p>1.13 Reports prepared by external evaluators are distributed and key findings and recommendations acted upon where appropriate.</p>		
<p>4. The cancer advocacy service uses findings from monitoring and evaluation to further refine and develop the service.</p>	<p>1.14 Copies of monitoring reports are available and there is evidence that these have been analysed and used in developing the service.</p> <p>1.15 The evaluation report is made available to staff and volunteers.</p> <p>1.16 The evaluation report is used to influence the development of the</p>		

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
	service and recommendations are implemented wherever possible.		

Section 9. Service Provision Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>1. The cancer advocacy service has established networks to reach eligible people who cannot request advocacy themselves.</p>	<p>1.1 Work has been carried out to engage with partner agencies and community groups.</p> <p>1.2 Awareness raising activities have been carried out to advise partner agencies and community groups of the service and the support it can offer to older people affected by cancer.</p> <p>1.3 A programme of awareness raising activities is in place.</p> <p>1.4 Efforts are made to access those clients who are identified as 'hard to reach'.</p>		
<p>2. The cancer advocacy service works to identify potential new clients and volunteers (e.g. through outreach, partnership working and promotional activities), monitors who is using the service and undertakes to target those who are not represented.</p>	<p>1.5 The organisation works with partner agencies and community groups to identify potential new clients.</p> <p>1.6 A programme of awareness raising activities details plans to promote the service at local events.</p> <p>1.7 Reports and electronic records detail sources of referrals and are used to identify agencies not referring into the service.</p>		

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
	<p>1.8 Identified under referral by local partner organisations is addressed through a range of activities including presentations, leaflet drops and networking and face to face discussion.</p>		
<p>3. The cancer advocacy service has procedures to ensure the quality of information/signposting provided to clients.</p>	<p>1.9 Cancer advocacy quality procedures are in place.</p> <p>1.10 Procedures are available for reference to staff and volunteers in paper based and electronic format as required.</p> <p>1.11 A process is in place to review policy documents periodically.</p> <p>1.12 All policy documents are agreed and ratified by the Board of Trustees.</p>		
<p>4. The cancer advocacy service has effective procedures for dealing with complaints or dissatisfaction from either clients or partner agencies.</p>	<p>1.13 A complaints policy is in place and is freely available.</p> <p>1.14 Clients are made aware of the policy and the procedure to make complaints if required.</p> <p>1.15 The complaints policy states clearly the timescales in which their complaint will be dealt with and who will be responsible for dealing with it.</p> <p>1.16 A record of complaints and outcomes is in place.</p>		
<p>5. The cancer advocacy service has</p>	<p>1.17 A procedure is in place detailing how</p>		

COPA Quality Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>established procedures for the recruitment and selection of volunteer cancer advocates. In recruiting individual peer advocates, services will be mindful of Macmillan’s guidance that people should wait 2 years after their cancer experience before volunteering.</p>	<p>volunteers are recruited to the cancer advocacy service.</p> <p>1.18 Volunteer cancer advocates are advised to wait for 2 years following the end of their cancer experience and are not recruited to this project within this time period unless in justifiable exceptional circumstances.</p>		
<p>6. In assisting the person to understand and reflect on clinical information, the advocate will, at all times, be mindful of the non-clinical nature of their role. They will take the utmost care to avoid promoting, or appearing to promote, particular clinical pathways.</p>	<p>1.19 Staff and volunteer advocates undergo training to ensure they understand the importance of the non-clinical nature of their role.</p> <p>1.20 Advocates do not, under any circumstances, promote a particular clinical pathway.</p> <p>1.21 Supervision is in place and is carried out to encourage advocates to reflect on their own practice.</p>		
<p>7. OPABC are represented on the cancer advocacy service’s Local Cancer Champions Board and are able to influence service planning, review and development.</p>	<p>1.22 Volunteers and clients are advised about the Local Cancer Champions Board and representatives are invited to attend meetings.</p> <p>1.23 Volunteers and clients influence service planning, review and development.</p>		
<p>8. All case study subjects, whether clients or volunteers, must give written permission, by signing a media release</p>	<p>1.24 Records are available for each case study subject to show permission has been given to document their</p>		

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>form, for the publication of their stories in whatever media form is planned. The cancer advocacy service must be satisfied that the case study subject understands the implications of their permission.</p>	<p>experience e.g. signed media release form.</p> <p>1.25 Clients are advised of and understand the benefits of written case studies.</p> <p>1.26 Clients receive an explanation of how case studies will be used.</p>		
<p>9. Stories must be sufficiently anonymised to ensure the subject cannot be identified except with the stipulation from the client that they are happy for personal details to be divulged. Anonymity is considered as waived where the case study subject understands, agrees to be filmed and signs a media release form.</p>	<p>1.27 Case studies are routinely anonymised unless specific permission is given to the contrary or unless the client agrees to be filmed.</p>		
<p>10. Clients and volunteers must give written permission on a media release form before their photographs can be used by the cancer advocacy service.</p>	<p>1.28 Media release forms are signed by all clients who are the subject of photographs used by the organisation.</p>		
<p>11. Signed media release forms will be retained securely by the manager of the cancer advocacy service.</p>	<p>1.29 Media release forms are stored in a locked filing cabinet or scanned and stored electronically.</p>		

Section 10. Training, Supervision and Support Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
<p>12. The cancer advocacy service arranges for a comprehensive induction-training programme for all new advocates within an agreed national timeframe and provides cancer specific training. Feedback from this training is used to gauge an understanding of roles, responsibilities, boundaries, and where support and advice can be sought if needed. A national cancer specific training package is provided for this purpose.</p>	<p>1.1 A comprehensive induction programme is in place. 1.2 The national cancer specific training programme is used to train all new volunteer advocates. 1.3 Training is given to all new advocates within the specified time frame following their recruitment. 1.4 Feedback from the training is captured and used to continually develop the induction programme.</p>		
<p>13. Cancer advocates receive group or one-to-one supervision/support at regular agreed intervals. Supervision meetings will be held regularly and in line with the organisation’s policy.</p>	<p>1.5 Group and/or one to one supervision takes place with all advocates at regular and agreed intervals. 1.6 Supervision is documented, the notes shared with advocates and advocates have the opportunity to agree note content.</p>		
<p>14. Supervisors are knowledgeable and experienced in cancer advocacy and themselves receive</p>	<p>1.7 Third parties responsible for supervision sessions are knowledgeable and experienced advocates with the</p>		

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
supervision/support from third parties.	any necessary qualifications required to supervise cancer advocacy services.		
15. All cancer advocates are given access to, and are expected to attend, relevant on-going training opportunities.	<p>1.8 Ongoing training opportunities are available to all cancer advocates.</p> <p>1.9 Cancer advocates attend ongoing training opportunities.</p> <p>1.10 Records of training attended are maintained for all cancer advocates.</p> <p>1.11 Records of refresher training requirements are maintained for all cancer advocates.</p>		
16. The cancer advocacy service holds regular team meetings/volunteer group meetings. These should be quarterly as a minimum.	<p>1.12 Team meetings are held at least quarterly.</p> <p>1.13 Notes are taken and distributed to all staff and volunteers.</p> <p>1.14 Action points from meetings are documented and progress followed up.</p>		
17. All new cancer advocates are trained and supported to use SAM wherever they feel confident to do so or are supported to enter data.	<p>1.15 All cancer advocates are familiarised in the use of SAM.</p> <p>1.16 Cancer advocates enter data where they feel confident to do so.</p>		
18. At induction, all cancer advocates are provided with copies of relevant organisational policies to include: Confidentiality, Lone Working, Safeguarding and Gifts.	<p>1.17 Cancer advocates receive copies of relevant organisational policies and procedures at induction.</p> <p>1.18 Cancer advocates are advised how and where to access policies and</p>		

COPA Quality Standards

Standard	To achieve this the organisation must demonstrate and show evidence that:	Achieved Y/N	Comments by Volunteer(s) carrying out audit process eg type of evidence seen
	<p>procedures.</p> <p>1.19 A process is in place to distribute and/or advise all staff and volunteers when policies and procedures are updated.</p>		
<p>19. At induction, volunteers are given information on how to claim out of pocket expenses.</p>	<p>1.20 All volunteer advocates are given information on how to claim out of pocket expenses.</p> <p>1.21 A form to claim out of pocket expenses is in place and easily available to cancer advocates.</p> <p>1.22 Records of out of pocket expenses claimed are maintained for audit purposes.</p>		
<p>20. The cancer advocacy service has procedures in place to support volunteers if they are encountering difficulties with their role or to help them withdraw from the scheme if they prove to be unsuited to the cancer advocacy role.</p>	<p>1.23 Procedures are in place to enable cancer advocates to withdraw from the scheme should they wish to do so.</p> <p>1.24 Cancer advocates are advised of support available to them if they experience difficulties in their role.</p> <p>1.25 Alternative volunteering opportunities are made available wherever possible.</p> <p>1.26 Clients are made aware of any change in their known volunteer advocate.</p>		

Section 11. Confirmation of Compliance

Once compliance has been confirmed page 28 of this document should be completed by the volunteers who have taken part in audit process. A scanned copy should then be sent to **OPAAL** by email to debbie@opaal.org.uk. If it is not possible to scan the page then please mail a photocopy to:

Debbie Woodward
Older Peoples' Advocacy Alliance
c/o Beth Johnson Foundation
64 Princes Road
Stoke on Trent
ST4 7JL

Please ensure that the name and address of your organisation is entered in full.

The COPA Quality Standards certificate will be issued within 28 days.

Once page 28 is signed and dated by volunteers it should be retained by the cancer advocacy service manager for future inspection as and when required by OPAAL.

Section 12. Details of Staff and Volunteer(s) Involved in Audit Process

Name of Organisation	
Address	

All staff and volunteers involved in the COPA Quality Standards audit process should please sign below:

Volunteer 1 Details			
First Name		Last Name	
Signature		Date of Signing	

Volunteer 2 Details			
First Name		Last Name	
Signature		Date of Signing	

Volunteer 3 Details			
First Name		Last Name	
Signature		Date of Signing	

Details of Staff Member Supporting Volunteers			
First Name		Last Name	
Signature		Date of Signing	