

TITLE		Advocacy and the Duty to Consult Policy	
Policy ref:	R001P	Approval date	July 26
Owner	Customer Operations Director	Planned review date	July 29
Approved by	Customer Committee on behalf of the Board		

1 Background	Abbeyfield Living Society is committed to ensuring that all residents are actively involved in decisions about their care, support and living arrangements. We recognise that individuals are best placed to understand their own needs, preferences and aspirations, and we aim to support them to remain in control of their lives wherever possible. We also recognise that some individuals may require support to express their views, understand information or participate in decision-making. This may include informal support from family and friends or the involvement of independent advocacy services. For residents who lack mental capacity, Abbeyfield will ensure that decisions are made in line with the principles of the Mental Capacity Act (MCA) 2005, including the duty to consult with appropriate individuals and act in the person's best interests. This policy sets out Abbeyfield's approach to advocacy, involvement and consultation across all services, including care homes, extra care services and housing.
2 Objectives	The objectives of this policy are to: • ensure all residents are supported to express their views and be involved in decisions that affect them • promote access to advocacy, including independent advocacy where required • ensure compliance with the Mental Capacity Act 2005 and relevant regulations • clarify expectations for staff in supporting resident involvement and consultation • support a culture of person-centred care, inclusion and respect
3 Scope	This policy applies to all Abbeyfield Living Society staff, including employees, agency workers and volunteers, across:

	• care services • extra care services • housing and independent living services The application of this policy will vary depending on the nature of the service, particularly where legal duties under the Mental Capacity Act apply.
4 Policy	4.1 Definitions Advocacy refers to supporting an individual to express their views, wishes and choices, either independently or through another person. Key legal roles relevant to care and decision-making include: • Lasting Power of Attorney (LPA) • Court Appointed Deputy • Independent Mental Capacity Advocate (IMCA) • Relevant Person's Representative (RPR) Further detail is available within the Mental Capacity Act Code of Practice. 4.2 Core Principles Abbeyfield Living Society's approach to advocacy and consultation is based on the following principles: • individuals are supported to make their own decisions wherever possible • involvement in decision-making is meaningful and informed • communication is adapted to meet individual needs • advocacy is promoted where individuals require support to be heard • equality, dignity and respect are upheld at all times • restrictions on choice or freedom are minimised and justified Where individuals require support, appropriate assistance will be provided, including reasonable adjustments where needed. 4.3 Advocacy and Involvement Residents may be supported to express their views and participate in decisions through: • their own communication and involvement • support from family, friends or representatives • access to independent advocacy services Abbeyfield will promote awareness of advocacy services and support residents to access these where appropriate.

	Residents' wishes regarding who is involved in their care, support or tenancy must be respected where they have capacity to make that decision. 4.4 Service-Specific Application 4.4.1 Care Services Residents receiving regulated care services will be supported to: • participate in the development and review of their care plans • express their preferences, values and needs • be involved in decisions about their care, treatment and daily living Where a resident lacks capacity, decisions must be made in line with the Mental Capacity Act 2005. This includes: • assessing capacity in relation to specific decisions • consulting with appropriate individuals, including family, representatives or professionals • considering the individual's wishes, feelings, beliefs and values • making decisions in the person's best interests Where no appropriate representative is available, Abbeyfield will facilitate access to an Independent Mental Capacity Advocate (IMCA), in line with statutory requirements. 4.4.2 Extra Care Services In extra care services, residents retain independence while receiving varying levels of support. Abbeyfield will: • support residents to remain involved in decisions about their care and support • ensure that advocacy is available where needed • apply the principles of the Mental Capacity Act where care decisions are required • support consultation in relation to both care and aspects of their living arrangements • This ensures that residents' rights as both service users and tenants are respected. 4.4.3 Housing and Independent Living Services In housing services, residents are supported primarily as tenants rather than care recipients. Abbeyfield will:
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- support residents to express their views and preferences regarding their housing and services
- provide opportunities for consultation and feedback
- promote access to advocacy where individuals require support
- respect residents' autonomy and rights as tenants

The Mental Capacity Act will only apply in limited circumstances where decisions relate to care or support rather than tenancy arrangements.

4.5 The Duty to Consult (Care and Extra Care)

Where a resident lacks capacity to make a decision, Abbeyfield has a duty to consult with appropriate individuals in order to inform best interest decisions.

This may include:

- individuals previously identified by the resident
- family members or friends
- those involved in the individual's care
- legally appointed representatives (LPA, Deputy)
- an Independent Mental Capacity Advocate (IMCA), where appropriate

Consultation must be meaningful, and the individual's wishes and values must remain central to decision-making.

4.6 Decision-Making and Best Interests (Care and Extra Care)

Where residents lack capacity, decisions will be made in their best interests, following the principles of the Mental Capacity Act.

Abbeyfield will ensure that:

- capacity is assessed appropriately and is decision-specific
- individuals are supported to participate as far as possible
- decisions reflect the person's past and present wishes
- the least restrictive option is considered

Staff will not make decisions beyond their scope or authority, particularly in relation to medical treatment or financial matters.

4.7 Managing Disagreements and Concerns

Where disagreements arise in relation to decision-making or best interests:

- concerns should be escalated to the Manager
- advice may be sought from senior management or appropriate professionals
- legal advice may be obtained where necessary

	The aim is to ensure that all decisions are lawful, appropriate and in the best interests of the resident. 4.8 Recording and Documentation Abbeyfield will ensure that involvement, consultation and decision-making are appropriately recorded. This includes: • the views of the resident • who has been consulted • decisions made and the rationale for them Accurate recording supports transparency, accountability and continuity of care and support. Abbeyfield will ensure that information relating to any formal or informal representatives, including legally appointed roles such as Lasting Power of Attorney, Deputies or advocates, is appropriately recorded and kept up to date. Abbeyfield may verify the status and scope of legal representatives, including Attorneys and Deputies, through appropriate documentation and recognised external sources where required, to ensure that decision-making arrangements are lawful, current and accurately recorded. 4.9 Training and Competence All relevant staff will receive training appropriate to their role to enable them to: • understand advocacy and its importance • apply the principles of the Mental Capacity Act • support residents to participate in decision-making • recognise when additional support or advocacy is required
5 Finance, Value for Money & Social Value	Supporting residents to make informed decisions contributes to improved outcomes, reduced risk and enhanced quality of services.
6 Linked policies	Mental Capacity Act Policy Consent to Care and Treatment Policy Safeguarding Adults Policy Equality, Diversity and Inclusion Policy Autonomy and Choice Policy

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7 Relevant Legislation / Regulation	Mental Capacity Act 2005 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – Regulation 9
8 Guidance	Mental Capacity Act Code of Practice Social Care Institute for Excellence (SCIE) Advocacy organisations (e.g. Age UK, Citizens Advice) Power of Attorney Factsheet and Decision-Making Support (Resident Information)
9 Review	This policy will be reviewed every three years or sooner in response to regulatory or legislative change.
10 Procedure(s) 10.1	Supporting Decision-Making and Duty to Consult SOP (Care and Extra Care Services only)
11 Process Map(s)	N/A

Version	Purpose/change	Resident Panel Involvement	Author	Date
1.0	Previous policy effective January 2015		Divisional Director (North)	Approved January 2015
2.0	1. Reviewed and updated. 2. Corrected reference to CQC fundamental standards. 3. Updated Linked Policies Significant changes to order and to wording to reflect current best practice		L Garrett	Jan 2019
3.0	Reviewed and updated.		L Garrett	05/03/2022
4.0	Policy reviewed and restructured to improve clarity and alignment with current practice. Clear differentiation between service types introduced, with operational detail moved to a supporting SOP and strengthened focus on advocacy and MCA compliance.		H Gilbert	09/06/2026

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5.0	Verification of legal authority service details added.		H Gilbert	13/08/2026
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