



**ANNUAL
REPORT
2018**

WHAT IS INDEPENDENT ADVOCACY?



We all need an advocate at some time in our lives. It helps to have someone around to make a difficult phone call, someone who can help write a letter or someone to go with you to a difficult meeting.

In many cases, the advocate is a friend or a family member; in others it is a teacher, nurse or social worker. This is fine, but what if we don't have any of these people around? Or what if the problem relates in some way to your family, teacher, nurse or social worker?

This is where independent advocacy can help. This is when people are supported to speak up for themselves by a person who is only there for them and has no ties to the other agencies or people in their lives. Independent Advocacy is about helping people understand, access and protect their rights in all aspects of their lives in society, wherever they live and in whatever circumstances they find themselves.

The Advocacy Project employs staff to act as independent advocacy workers for people who have difficulty speaking up. The advocacy workers are well trained and supported by the Project.

They are all subject to PVG checks and are bound by a range of policies and procedures that include things like confidentiality and adult and child protection.

Unfortunately, independent advocacy workers cannot guarantee positive outcomes for everyone, but they can ensure that a person's voice is heard and their views considered in all situations.



CHAIRPERSONS REPORT



In reporting on the past year at the organisation, it can be described as a period of considerable change, presenting us with many challenges and opportunities along the way.

Our priorities from last year focussed on professional practice, both internal and external, structure and governance effectiveness, as well as service provision and continuity.

As a result of a procurement exercise at the end of 2017 our staff and service in North Lanarkshire were transferred out of the organisation, thus instigating a programme of change for us both operationally and strategically. It required us to stall existing plans for development and regroup to review our approach within these new circumstances.

I'm delighted to report that notwithstanding the reduction in service, we again increased the number of people we supported over the year and continued to provide a high quality service that is now back on track, introducing developments to further improve how we work.

SOME OF OUR HIGHLIGHTS HAVE INCLUDED:

Introducing a Leading Change Programme that involves all staff, management and board members to work together to address operational issues in relation to structure and service quality as well as more strategic issues like influencing and organisational identity. We are in the midst of this work but we are encouraged with the enthusiasm it has created and look forward to progress over the next few months.

Being more inclusive in engaging with the people we support by involving them in focus groups and reviewing how we gather their service feedback.

Learning and development remains a priority theme for the organisation and this year we have extended the scope of our Professional Practice

Award to offer a pilot programme across 4 advocacy providers in Scotland. The exercise has proved successful and is being independently evaluated. We are also trialling a trainee programme for Advocacy workers which we hope to present for accreditation in the future.

New developments we are delighted to report this year include an extension of service in South Lanarkshire to support carers in line with the legislation and Engagement and Involvement work with health and care providers to assist in user engagement and communication. More recently we were successful in securing additional government resources to support individuals going through the Self Directed Support process, for a 2 year project starting in October 2018.

As board members with a governance role, we continue to safeguard the financial and strategic interests of the organisation and have taken some time this year to reflect on our experiences and review our goals. We are confident about the future and direction of the organisation moving forward

My appreciation to all who support and contribute to the ongoing success of the Advocacy Project.

TOMMY MCGUIGAN
CHAIRPERSON



OUR SERVICES & SOME EXAMPLES OF OUR WORK...



GLASGOW

The Advocacy Project provides a free and confidential service that is independent of the NHS and Social Work. Independent advocacy can benefit those living at home, in care or in hospital. Our service provides independent advocacy to adults 16+ resident in Glasgow affected by:-

- Mental Health
- Dementia
- Learning Disability
- Physical Disability
- In-Patient Services, Community Services & Prison Healthcare

WHAT WAS LIFE LIKE BEFORE ADVOCACY GOT INVOLVED?

Mrs W has dementia and lives with son who supports her to live independently. Concerns were reported that the son was locking her in her house, and an ASP investigation was instigated to establish his ability to care for her safely. The social worker felt that the lady required independent support to understand the ASP process. The son seemed to be of the view that the social worker wanted to put his mum in a care home and they may seek legal powers to do so.

HOW DID ADVOCACY HELP?

The advocate attended an appointment at Mrs W's home, along with the son who had Power of attorney for his mum. The advocate informed him of the ASP process and outlined that, as part of their duty, social work services will only intervene into affairs where there are concerns about an adult's safety, or where there are identified risks of harm.

Mrs W was able to respond to short questions, and was clear that she wished to remain in her own home with her son looking after her.

Her son explained that before he locked his mum in the house, she had been wandering and was later found by police in a "confused state". He said this was why he had taken this action but now understood why it was causing concern, and acknowledged that it was not appropriate.

The advocate suggested that he should involve and consult his mum where possible to participate in future care planning if it is deemed she is no longer able to live safely at home, particularly if he recognises he is struggling. He agreed to organise an appointment with the social worker and his mum in order to arrange some time at a care placement.

The advocate promoted Mrs W's right to be fully involved and consulted about her care planning, her right to exercise autonomy, and that any intervention deemed necessary to protect her from harm, should be the least restrictive measure which respects her wishes and freedom.

WHAT WAS THE OUTCOME FOR MRS W AND POA?

A social worker was allocated and the family agreed to visit a care home local to where they live. The visit went well; Mrs W was engaging with the staff team, joining in with the residents and the activities at the home. The son reports that he feels relieved and agreed for his Mum to be added to a waiting list for when a placement becomes available.

OUR SERVICES & SOME EXAMPLES OF OUR WORK...



EAST RENFREWSHIRE

Our service provides independent professional advocacy to adults 16+ resident in East Renfrewshire that are affected by a learning disability, mental health, and physical health conditions.

WHAT WAS LIFE LIKE BEFORE ADVOCACY GOT INVOLVED?

Greg has a physical health impairment, and dementia. He was subject to ASP concerns as there were reports he was at risk of self-neglect as a result of deterioration of his cognitive insight, and ability to look after his care needs.

He was admitted to hospital but there were reports that staff were not managing him; he is saying that he wishes to leave but there are concerns about him returning home. His views were inconsistent in relation to whether he wished to move into a care home.

HOW DID ADVOCACY HELP?

The advocate met with Greg on the ward. He stated that he did not wish to stay in hospital as he did not like it. The advocate discussed the proposal by the social worker about his future care needs, and he agreed that he would like to explore this further.

A discussion was then organised with the social worker, Greg and the advocate regarding the possibility of moving to a nursing home. He was accepting of this as he felt it would be a better place than being in hospital.

He was supported by his advocate to understand his choices, understand and support his decisions, and participate throughout the care planning process. He stated he would like the opportunity once settled in his new home to buy a new suit and to travel down to London for a holiday.

WHAT WAS THE OUTCOME FOR GREG?

Greg moved into his care placement, supported by his advocate to attend the care placement review. Greg reports that he has settled in his placement and is planning a shopping trip in preparation for his holiday.



OUR SERVICES & SOME EXAMPLES OF OUR WORK...



SOUTH LANARKSHIRE SERVICE:

Our South Lanarkshire service supports adults and older people affected by mental health issues and mental capacity to be involved in their care, treatment and support. This is particularly related to supporting people affected by applications for statutory orders which result in compulsory treatment in hospital or the community and lead to people being restricted in their liberty.

Our role is to ensure they are supported to have a voice in the court or tribunal, get access to legal advice and representation, and promote their rights to challenge measures which restrict their individual freedoms.

WHAT WAS LIFE LIKE BEFORE ADVOCACY GOT INVOLVED?

Paul contacted The Advocacy Project as he had been given 1 day's notice that his Compulsory Treatment Order was being renewed the following day at a Mental Health Tribunal. Paul was very concerned that his rights were being disregarded and he did not have time to access legal advice and representation to have a voice in his tribunal.

HOW DID ADVOCACY HELP?

The case was responded to the same day we received it, and the advocate met Paul in his home to discuss his concerns in a matter of hours. Paul told the advocate he had asked for the tribunal to be delayed, but had been informed that it was not possible as that was the only day the doctor could make it.

Whilst with Paul, the advocate called the Tribunal Service and reiterated Paul's request for a postponement to access legal advice and representation, and followed this up formally with an email. The tribunal was postponed that afternoon and Paul was supported by the advocate to access a solicitor and be represented at the rearranged hearing a week later.

WHAT WAS THE OUTCOME FOR PAUL?

Paul felt that advocacy support led to his views being listened to when requesting a delay to the hearing, and without it the tribunal would have gone ahead without him having the chance to have his rights safeguarded and upheld.



OUR SERVICES & SOME EXAMPLES OF OUR WORK...



SOUTH LANARKSHIRE CARERS ADVOCACY SERVICE

This year The Advocacy Project have started a new Advocacy Service for Adult Carers in South Lanarkshire who are caring for Adults with Mental Health issues. This is linked to the changes in The Carers (Scotland) Act 2016 which has seen increased rights for unpaid carers.

Some of the issues we have been able to support clients of The Carers Service with have included accessing carers assessments & respite budgets, support with hospital discharge planning processes and support to link in with the relevant services and to understand what is available and what their rights as a carer are.

WHAT WAS LIFE LIKE BEFORE ADVOCACY GOT INVOLVED?

Joanne had been trying to arrange a respite care break for her husband Bill who she cares for, she had been awarded a budget but wasn't sure if there could be alternative options other than a respite placement in a care home which can be unsettling for Bill. Joanne was finding it difficult to understand some of the information she had been given and felt uncomfortable discussing this with Bill's Social Worker.

HOW DID ADVOCACY INVOLVEMENT HELP?

Advocacy helped Joanne understand her rights and the options available and spoke with the social worker to clarify this. Advocacy had meetings with Joanne to explain this and Joanne decided she would like to look at arranging respite care at home.

Advocacy attended a meeting with Joanne and the social worker to look at details for this and start planning for this to be put in place. Advocacy also helped to link Joanne in with a service that provide information on using direct payments.

WHAT WAS THE OUTCOME FOR JOANNE?

Joanne feels that she has a better understanding of what the options are and the planning process is moving ahead. Joanne also feels more able to contact social work about difficulties she and Bill are having, and knows of other services that can offer support, Joanne has said she feels like "they have more hope for the future".



HOW WE DID



IN THE YEAR 2017-2018 THE ADVOCACY PROJECT WORKED WITH

3684 PEOPLE



89%
OF THOSE WE SUPPORTED WERE AFFECTED BY A MENTAL HEALTH CONDITION, COGNITIVE BRAIN INJURY, AUTISTIC SPECTRUM DISORDER, DEMENTIA OR LEARNING DISABILITY.



"THE ADVOCACY WORKER WAS PERSON CENTRED AND RESPECTFUL IN ALL HER INTERACTIONS. SHE SPENT A GREAT DEAL OF TIME WITH THE PERSON ELICITING THEIR VIEWS."

"HAVING AN ADVOCACY WORKER IN ATTENDANCE AT REVIEWS REINFORCED THE PERSON'S WORTH"

LAST YEAR

2381 PEOPLE



WERE REFERRED TO US

"I THINK IF SOMEBODY NEEDED SOME HELP & GUIDANCE, OR JUST SOME SUPPORT OR ADVICE, THE ADVOCACY PROJECT WOULD BE A GREAT CHOICE. I FOUND IT REALLY BENEFICIAL AND A GREAT SERVICE."

54%

OF ALL THOSE WE WORKED WITH WERE SUBJECT TO STATUTORY INTERVENTION WARRANTED BY MENTAL HEALTH (CARE & TREATMENT) (SCOTLAND) ACT 2003, ADULTS WITH INCAPACITY (SCOTLAND) ACT 2000, AND ADULT SUPPORT & PROTECTION (SCOTLAND) ACT 2007.



HOW WE DID



100%

OF STAKEHOLDERS SAID THAT ADVOCACY SUPPORT WAS HELPFUL FOR THE INDIVIDUAL AND RESPONDED TO THEIR NEEDS

"I FELT THAT I WASN'T ALONE IN HOSPITAL AND ANYTHING THAT I WAS WORRIED ABOUT MY ADVOCACY WORKER CHECKED ON AND CLEARED IT UP."

"MY ADVOCATE WAS EXCEPTIONAL IN HIS ROLE AND SUPPORTED ME IN HAVING MY VOICE HEARD DURING THE TRIBUNAL. HIS PATIENCE AND GUIDANCE WERE CENTRAL TO MY EXPERIENCE THROUGHOUT."

"IT WAS REASSURING TO KNOW THAT THE ADVOCACY PROJECT WAS THERE AND THEY HELPED PUT THINGS INTO A BETTER PERSPECTIVE"

"IT MADE A SIGNIFICANT DIFFERENCE AS IT FELT THAT NO MATTER WHAT EMOTIONS BECAME OVERWHELMING DURING THE TRIBUNAL I HAD SOMEONE WHO COULD RELAY MY VOICE AND OPINION IF NEEDED."

30% OF ALL REFERRALS LAST YEAR WERE ALLOCATED AN ADVOCACY WORKER THE SAME DAY.



"MY ADVOCATE GAVE CLARITY TO THE SITUATION AND HELPED ME TO UNDERSTAND MY RIGHTS"

"IT WAS VERY IMPORTANT TO FEEL LISTENED TO BY SOMEONE WHO UNDERSTOOD THE MENTAL HEALTH SYSTEM"

"THE ADVOCACY WORKER ENSURED THAT THE PATIENT'S VIEWS WERE HEARD THROUGHOUT THE PROCESS"

"THEY HELPED TO EXPLAIN MY RIGHTS AND GAVE A LOT OF INFORMATION ABOUT MY RIGHT TO APPEAL. I FELT SUPPORTED BY MY ADVOCACY WORKER. I FELT LIKE I WAS TRULY GETTING LISTENED TO FOR ONCE."

81% OF ALL REFERRALS LAST YEAR WERE ALLOCATED AN ADVOCACY WORKER WITHIN A WEEK.



THE ENGAGEMENT & INVOLVEMENT SERVICE



The aim of our Engagement and Involvement Service is to support a co-productive approach in which service providers, people who use services, family and carers can work together to create a service that works for everyone, improving the quality of life for people and their communities.

WHAT WE DO:

SUPPORT PEOPLE WHO USE SERVICES TO BE MEANINGFULLY INVOLVED IN HAVING A SAY IN HOW THEIR SERVICE IS DELIVERED.

ENCOURAGE ORGANISATIONS TO LISTEN TO THE PEOPLE WHO USE THEIR SERVICES WHEN CONSIDERING CHANGES OR IMPROVEMENTS TO THAT SERVICE.

PROMOTE AN ETHOS AND CULTURE OF EMPOWERMENT, MEANINGFUL PARTICIPATION AND COPRODUCTION WITHIN SERVICES THAT WE ENGAGE WITH.



EXAMPLES OF OUR WORK:

FACILITATION OF A PATIENT ENGAGEMENT GROUP TO SUPPORT AND EMBED A CO-PRODUCTIVE, PERSON CENTRED APPROACH WHICH WOULD ENHANCE THEIR REHABILITATION EXPERIENCE - NHS LANARKSHIRE

COORDINATION AND SUPPORT FOR VARIOUS COLLECTIVE ADVOCACY GROUP MEMBERS TO ATTEND AND PARTICIPATE IN THE SCOTTISH LEARNING DISABILITIES VISUALISATION PROJECT.

PROVIDE INDEPENDENT FACILITATION TO COLLECTIVE ADVOCACY GROUPS WITH A VIEW TO BUILDING CAPACITY AND CONFIDENCE AS WELL AS BETTER INFORMING AND IMPROVING THE SERVICES THEY USE. THESE INCLUDE:

- **THE ACE GROUP FROM ENABLE GLASGOW**
- **THE DREAM TEAM FROM FAIR DEAL**
- **THE IONA GROUP AT NHS LANARKSHIRE**
- **THE KELVIN AND CAMPSIE GROUPS AT SUREHAVENSUPPORT**



LEARNING & DEVELOPMENT



PPA - INTERNAL

The organisation continues to embed the Professional Practice Award (PPA) as a core learning programme for advocacy worker staff. The PPA is the only credit rated practitioner programme of learning in professional advocacy in Scotland which provides advocacy skills learning applicable to all care groups. The award is credit rated by Napier University at SCQF L7 and is comprised of 4 core units:

- Engaging People with Complex Needs
- Communication Access for People with Complex Needs
- Promoting the Rights of People With Complex Needs
- Management & Learning in Case Work

The PPA is a work based learning (WBL) program and draws upon the experiences & learning which is required to deliver excellence in service delivery to the people we support. The award also recognises the excellent work our advocates undertake and verifies its quality.

We have progressed all advocate post holders on to the award with a number now practicing as qualified advocates. The award has been undergoing independent evaluation and we look forward to receiving the finalised report soon, which will inform our ongoing review of the qualification.



PPA - ALL SCOTLAND PILOT

In addition to our internal learning, the organisation has collaborated with a number of advocacy service providers across Scotland to test whether the PPA fits with advocacy learning needs at 5 pilot test sites. In total, 7 external candidates have each just completed one unit of the PPA.

PPA PILOT EXTERNAL PARTNERS:

- Ceartas Advocacy - East Dunbartonshire
- Forth Valley Advocacy - Central Scotland
- Independent Advocacy Perth & Kinross
- Partners in Advocacy - Edinburgh City
- Partners in Advocacy - Glasgow City

We have assessed the pilot through an independent evaluation of its efficacy and initial feedback has been very positive. The full evaluation report will be available soon & we will take time to reflect upon its findings with our pilot partners, and consider the range of resultant learning priorities & opportunities identified in the report.

CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD)



This has been a very busy year for professional development across the organisation for all staff & Board posts. Our CPD program combines both personal/professional opportunities with organisational growth & development. Some of the key learning activities have been:

- Participation for all operational staff in HSCP statutory Adult Protection Training.
- Training 5 staff in the new credit rated PPA Training & Development award, increasing our pool of qualified trainers and capacity to deliver learning.
- Enrolling 10 staff on workplace mentoring learning to support new staff joining the organisation, increasing our capacity for peer support & workforce skills development.
- Five senior staff completing the SQA L&D9Di workplace assessor award. We intend to add to this with further opportunities for staff to undertake workplace assessor training in 2019.
- All existing staff completing the SQA DN 3474 CPD Unit which demonstrates a commitment to CPD. We have joined up with Training Enterprise & Development Scotland and will be accessing their new credit rated CPD qualification @ SCQF L8, with 9 staff enrolled for September 2018.
- Enrolled 3 staff to complete SQA accredited Self-Directed Support training
- Staff have also completed training on Safe-Talk, Advanced Autism, Time Management, GDPR, Talking Mats, BSL L6, Inclusive Workplaces, ASIST, MHFA.
- Developed a 'New to Advocacy' learning program for people new to professional advocacy with the option to credit rate the program in 2019.



PARTNERSHIP WORKING



In addition to the ongoing delivery of services, The Advocacy Project is committed to the benefits of consultation, representation and networking at a local and national level.

As an organisation we believe that the voice of people who use services should be integral to their design and delivery at all levels. We recognise that many of the people who access our services, due to failing health and limited capacity are unable to contribute meaningfully to future planning processes. We feel it is important to represent our clients within these groups.

Over the year our ongoing involvement at a local level has included the membership of and involvement in:

SOUTH LANARKSHIRE

- South Lanarkshire Adult Support and Protection Committee
- ASP Quality Assurance Group
- Camglen Mental Health / Addiction Thematic Group

GLASGOW

- Adult Support & Protection
 - Committee
 - Locality steering groups
 - Training Sub Group
 - Financial Inclusion Partnership
 - Large Scale Investigation
- NHSGG&C Equalities in Health
- Autism Network Scotland, Scottish Government consultation, Glasgow
- North West Primary Care Health Team, Glasgow
- Visibility, Glasgow
- Purdon Street Day Centre, Glasgow
- FAIRER together project, Glasgow
- TRFS Planning event, Butterbiggins service, South
- Community Carer Development Forum, North East
- Dementia community link workers, Glenkirk Centre
- Cornerstone Counselling services

EAST RENFREWSHIRE

- Adult Support and Protection Committee
- ASP Continuous Improvement Group
- ASP large scale investigation

NATIONAL

- Scottish Independent Advocacy Alliance
- Centre for Mental Health and Capacity Law Seminar - Learning Disability and the Mental Health Act
- Alzheimer Scotland's Annual Conference 2018
- Head Injury Information Day, Digby Brown
- Trading Standards Scotland, Call Blocking Equipment
- International Human Rights Day 2017, Scottish National Action Plan, The Human Right to be Free from 'Degrading Treatment' Strathclyde University

BACKGROUND



The Advocacy Project was established in April 1992 to provide a community based, independent advocacy service for disabled people in the South East of Glasgow. It was set up by disabled people and others working in the field, who recognised a need for individuals to be supported to ensure their voice was heard. Since then it has grown to provide independent advocacy across a number of local authorities. The Advocacy Project is a rights based organisation, committed to ensuring individuals are as involved as they can be in decisions that affect their lives. It aims to raise awareness of peoples' rights and ensure they are safeguarded in instances where people are unable to do so themselves.

Our support is guided by individual rights enshrined in mental health law, disability rights promoted by the United Nations, European Human Rights and most importantly the person's views and feelings about their life.

In line with the United Nation's 'Convention on the Rights of Persons with Disabilities' our service adopts a 'supported decision making' approach and we are committed to taking appropriate steps to support those with disabilities to exercise their legal capacity which seeks to ensure respect for an individual's autonomy in their life when living with an impairment or disability.

We are full members of the Scottish Independent Advocacy Alliance and abide by their Principles, Standards and Code of Practice.

The organisation is a registered charity and company limited by guarantee. To maintain its independence it is managed by a Board of Directors comprising of individuals with an interest in, and commitment to the work of the Project. The Board hold a strategic role within the organisation. It has a responsibility to oversee effective governance by ensuring the Project meets it's legal and corporate obligations.



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GLASGOW HEALTH & SOCIAL CARE PARTNERSHIP

SOUTH LANARKSHIRE HEALTH & SOCIAL CARE PARTNERSHIP

EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP

THE SCOTTISH GOVERNMENT



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