



Annual Report 2023

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A Message from Ann Marie Docherty

Welcome to our 31st annual report.

The Advocacy Project was established in 1992 to provide independent advocacy to disabled people in the East End of Glasgow. We are currently working across three local authorities – Glasgow, South Lanarkshire and East Renfrewshire. We continue to provide services with key focus areas in mental health care and treatment, self-directed support, adult support and protection, adults with incapacity and problematic alcohol and drug use. In addition, we continue to develop our engagement and involvement services.

It has been a busy and productive year and I would like to welcome Jacqueline Norwood as our interim Chief Executive. This year we have managed significant change within the organisation, and the Board and staff have worked together to move forward as one team.

As an organisation, we have adopted a hybrid working model and we are currently reviewing the benefits of this for the people we work with.



This year's significant achievements include:

- Moving forward with ECLIPSE, a new data management system.
- Progressing with our application to the European Foundation for Quality Management (EFQM), ensuring our desire towards continuous improvement and achieving excellence moves forward.
- Implementing Xero, a software accounting system.
- Maintaining a high quality service

I would like to take this opportunity to thank Jacqueline Norwood for her commitment and support, and extend my thanks to our leadership team and staff for their ongoing support. I would like to welcome our new board members Doreen and Olga.

Finally, I would like to thank my colleagues on the board for their support to me and the organisation: without their breadth of knowledge, experience, vision, clarity, and tenacity we may not be where we are today.

Ann Marie Docherty
Chairperson

A Note from Jacqueline Norwood

It has been my pleasure to work with the board and staff over the past few months, and we have been busy during that time.

The board has worked tirelessly this last year to ensure the well-being of the organisation and its staff. They have taken on additional responsibilities and often gone beyond the time commitment they may have expected. We are joined by two new board members this year Doreen and Olga and they are already making an impact and bringing a wealth of knowledge and skills to the board. As well as the board there are now three sub-committees to allow the organisation's decision-making to be transparent and effective.

The board is led by our Chair Ann Marie supported by Vice-Chair Fiona and Treasurer Heather, and I wish to thank them for their time and patience in helping me understand the business. The board has laid out a clear direction for the organisation over the next year and will be creating a new business plan for the next three years, which will reflect excellence for everyone that uses our service and create a culture where staff know they are appreciated and supported by the board and leaders of The Advocacy Project. The board will in 2024 carry out recruitment for our new Chief Executive.



Our staff are key to our success and the team continues to work tirelessly ensuring that people who have requested our support receive it and have their views heard.

Our Response Team, initially a pilot started in June 2022, will remain a feature of our structure. I want to record my thanks to the Senior Management Team and all the staff for their hard work and resilience this year.

To have comfort that we are achieving excellence, we will be working toward accreditation from EFQM (European Foundation for Quality Management) with staff training taking place before the end of the year.

We continue to work closely with the local authorities that commission our services to ensure that we are meeting all our obligations, and importantly we are achieving good outcomes for the people we are working with.

However, the most important thing that we do is provide advocacy support and we will continue to do this and learn from our practice and experience so that we achieve excellent outcomes.

Jacqueline Norwood
CEO

What we do

The Advocacy Project supports people to have their wishes and views taken into account; to increase their choice and control; and to be fully involved in decisions that affect their lives. Our service is free and confidential and we are independent of social work, NHS and other services.



We provide one to one, professional independent advocacy across Glasgow, South Lanarkshire and East Renfrewshire. We also support service user involvement and participation through our Engagement and Involvement Service. We work on the principles that any person has the right to:

- Be consulted about their needs;
- Be involved in decisions that affect their lives;
- Be treated in a dignified manner and valued as equals;
- Be treated in accordance with the Human Rights Act 1998.

In line with these principles, we support people on an individual or group basis to:

- Ensure that their views are heard and their wishes and preferences are known and acted upon;
- Ensure they have as much influence as possible over decisions that affect their lives;
- Ensure they have access to resources and information to support empowerment and participation.



Our Services

Our core activities across East Renfrewshire, Glasgow and South Lanarkshire are funded by each Health and Social Care Partnership (HSCP) in accordance with the duties set out in the 2003 Mental Health Act to make advocacy services available.

Across our service area, we provide one-to-one, professional, independent advocacy to adults with disabilities and long-term conditions in hospital and community settings who find themselves: subject to statutory interventions that impact their rights and freedoms; involved in decision-making processes relating to health and social care service provision; experiencing difficulty accessing the services and support they need to maintain their dignity and quality of life.

Glasgow

In Glasgow we provide an integrated service for adults affected by: mental health conditions; learning disability; physical disability and long-term conditions; and problematic alcohol and drug use. We work across hospital and community settings and within HMP Barlinnie.

We also sit on the Glasgow Adult Protection Committee (APC), participate in a number of multi-agency steering groups and contribute to learning and development for social work staff. Our Engagement and Involvement service has carried out extensive consultation and evaluation work for the partnership.



East Renfrewshire

East Renfrewshire we provide independent advocacy support for adults with mental health conditions, learning disability and physical health conditions.

We also sit on the East Renfrewshire APC and participate in several steering groups and working groups, including a Service User Engagement Committee. Our Engagement and Involvement Service facilitates a lived experience panel that supports people with problematic alcohol and drug use to engage directly with East Renfrewshire Alcohol and Drugs Partnership and influence policy.

South Lanarkshire

In South Lanarkshire we provide independent advocacy support to adults with mental health conditions and older people.

We have thematic involvement with South Lanarkshire APC and contribute to adult protection council officer training for social work staff. Our Engagement and Involvement Service has evaluated people's experience of the Adult Support and Protection process on behalf of the APC, presenting their findings to the committee.

In-patient Learning Disability

We work across the three units that form NHS Greater Glasgow and Clyde's in-patient learning disability service, supporting and promoting the rights of adults with complex needs in relation to a range of issues including ongoing care and treatment and discharge planning.

Response Team

The Response Team started in June 2022 as an innovative way of managing demand and using our resource more efficiently.

The team consists of five advocacy workers and an operations manager and is responsible for dealing with incoming enquiries, processing referrals, providing signposting information, and delivering immediate one-off and short-term support. This model allows us to focus on preventative interventions at the time of contact, providing responsive independent advocacy support to people when they need it, and largely avoid waiting times.

The team also co-ordinate our promotion and outreach work. In the last year this work has focused on engaging with adults with lived and living experience of problematic alcohol and drug use. This has included regular engagement with the Glasgow Drug and Alcohol Crisis Centre, Stabilisation Service, Recovery Oriented System of Care (ROSC) events, recovery cafes and community events across our service area. We've been able to ensure The Advocacy Project are known among alcohol and drug services and embedded in the community, and have provided effective assertive outreach to this group.

Over the last year the team responded to a total of 4852 calls. 292 people were signposted to the organisations and services best suited to help with their issues, and 430 people received direct one-to-one advocacy support.



Casework Team

The casework team delivers our core advocacy activities across the service areas. Its focus is on working in partnership with the people who use our service to promote meaningful participation and collaboration in key processes and decisions that will significantly affect their lives and potentially impact their rights. The work aims to ensure people understand their choices and feel more in control, contributing to improved outcomes and increased confidence and autonomy.

The team's priority is supporting those who find themselves in circumstances where rights, liberty and quality of life are most at risk. This includes hospital detentions authorised by the mental health act, guardianship applications - where another person is authorised by the court to make substitute decisions - and adult protection interventions - where local authorities have a legal duty to act to protect an adult's well-being.



Self-directed Support

Our Self-directed Support (SDS) project began in 2018 and is funded by the Scottish Government through Support in the Right Direction (SiRD). We provide independent advocacy support with all aspects of SDS, from taking the initial steps to access social-care services, support needs assessments or reviews, outcomes-based support planning through to challenging budget decisions, changing options and support with formal complaints.

Engagement and Involvement

The Engagement and Involvement (E&I) Service aims to ensure that people who use services, families and carers have the opportunity to have their say about how services are delivered. The E&I service works alongside organisations to design, deliver and evaluate bespoke projects. Each project is unique; designed to suit the needs of the people that will be involved and ensuring the principles of independent advocacy are embedded throughout.

In 2022-2023, some of the projects we have delivered include:

- A consultation project for the Simon Community regarding the support provided by their Hub for people affected by homelessness, to inform their future planning and developments.
- Delivering evaluation support for Help Yourself Grow, a gardening and cookery project for adults with Learning Disability.
- Consultation and facilitation of ongoing resident engagement forums in The Oak's, Abbeydale, and Abbey Lodge care homes.
- Continuation and development of the Lived Experience Panel, supporting people who have experienced problematic alcohol and drug use to be directly involved in the East Renfrewshire Alcohol and Drug Partnership service planning.

In 2022/23...

91% of people we supported
felt their
**rights
were
respected**
as a result of our
advocacy support

98% of people we supported
felt listened to

99% of stakeholders felt we
responded appropriately to the
person's needs

We supported

2646
people
across our independent
advocacy services

76% of people we supported
were subject to
statutory
interventions under
the Mental Health,
Adults with
Incapacity or Adult
Support and
Protection Acts

Discrimination in Education

An autistic woman made contact with our service. She explained that she was having difficulties at college. She had made a complaint about her lecturer, whom she felt was being physically and verbally threatening to her. This complaint led to a meeting being arranged, at which the college decided that, for the protection of both the student and the lecturer, she would not be allowed to attend unless she had a support worker present. Her social worker informed her that the local authority would not fund this, as they did not believe this level of support to be needed.

Our worker met with the woman, discussed the situation, and offered to provide support at a further meeting with the college. This was declined as the woman did not feel able to participate herself. The worker supported her to think about other options, and informed her that a legal remedy might be possible. A solicitor was contacted, who was happy to be noted as stating that the measure may constitute discrimination, as it would not be applied to a person without a disability.

Our worker again offered to support at a forthcoming meeting, but the woman felt confident to take her issue forward so declined this. In preparation, our worker suggested that the woman could ask her social worker to be invited. At the meeting, the woman and her family also explained to the college that legal advice had been sought and that they were considering taking action. The college immediately withdrew the condition and invited her to return to complete her studies in the next term.

Outcome:

Ultimately the woman decided not to complete her studies. Despite this, our support helped her to understand her rights and develop the confidence to assert them. As a result, she felt more in control of her situation and was able to make an informed decision to withdraw from the college on her own terms.

Discharge Planning, Guardianship

A woman was referred to our service towards the end of a hospital admission. She had been diagnosed with Alzheimer's Disease, and the social worker's assessment concluded that she would need 24 hour support and that her home would no longer be suitable for her. There was also discussion ongoing around whether guardianship would be necessary as she had been assessed as lacking capacity to make welfare and financial decisions. She had a brother who was interested in applying for this.

Our worker met with the woman and built a rapport over several meetings. Through conversation and observation, she understood that the woman would consider moving to residential care, but that her preference would be for somewhere quiet with an open outlook and a nice view. They also discussed help with decision-making, and the woman was clear that she did not want her brother involved with this.

A case conference was arranged. Initially, the woman intended to take part but on the day she became overwhelmed because of the amount of people in attendance. They agreed that the advocate would attend the meeting, put forward her wishes and preferences and plead her case.

At the conference, the woman's cousin - with whom she had a good relationship - agreed to make a guardianship application. The chair suggested that the cousin apply jointly with the brother. The advocate made clear that the woman had consistently said she does not want her brother involved in decision-making and also put forward the woman's wishes and preferences around the environment she would like to live.

Outcome:

The woman's cousin took forward the application in her sole name. A care placement close to her cousin's home, and with an open outlook and view, was identified as suitable for her.

Our involvement ensured that, despite her capacity issues, the woman's wishes, preferences and choice were taken into account and acted upon.

Service-user feedback

My advocacy worker was very good, very caring and she listened...She made such a difference to my life.



He helped me all throughout the meetings...He's an amazing worker...It gave me confidence to speak up.

I can't thank my advocacy worker enough for listening to me and empathising...It was reassuring knowing she was there when I needed someone to express my views.



She seemed to genuinely care and understand my case...having advocacy support did help my confidence and this helped my overall wellbeing.

Stakeholder feedback



The advocacy worker was very supportive towards service user who can find it difficult to communicate...She clearly spent time with him, explored his views and communicated these effectively.

The advocacy worker was very supportive and proactive...leading to an improvement in [the person's] mental health, more manageable risks...a process where discharge becomes realistic.



Patient was exceptionally well supported...it was a complex case. [The advocacy worker] worked hard to show her that her views mattered. Without [advocacy] assistance, the patient would not have attended their tribunal and made their views known.

What the future holds

- We are working on a timeline to implement the Eclipse Case Management system in February 2024. The system will revolutionise the way we record and evidence the work we do and will streamline our casework process, freeing up resources to better support the people who use our service.
- We have developed a new outcomes framework to be implemented in early 2024. This will allow us to better measure and analyse the impact we have on the lives of the people we support, their communities, the services they use and how we deliver our own service.
- The Participation Panel continues to develop its remit with support from our engagement and involvement team, empowering and supporting the members to influence and shape the way in which we deliver our service and our strategic direction.
- The current intake of learners are due to complete our in-house qualification - the Professional Practice Award in Independent Advocacy - in 2024, after which we will have a fully qualified operational advocacy team.



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