

# Integration Joint Board 21 March 2019

Subject:	Advocacy Strategy	
Purpose:	The IJB to note progress in developing the Advocacy Strategy and Action Plan to meet the recommendations of the Mental Welfare Commission for Scotland.	
Recommendation:	The IJB to approve the Advocacy Strategy and Action Plan and to support further stakeholder engagement to develop a detailed delivery plan.	

Glossary of Terms:	
HSCP	Health and Social Care Partnership
IJB	Integration Joint Board
NHS AA	NHS Ayrshire and Arran

1.	EXECUTIVE SUMMARY
1.1	In June 2018 the IJB considered and supported the recommendations made by the Mental Welfare Commission regarding independent advocacy.
1.2	It was agreed that an Advocacy Strategy would be developed for the 31 <sup>st</sup> December 2018 deadline involving key stakeholders and a draft was sent to the Mental Welfare Commission for Scotland on the 31 December 2018 to meet the national deadline. This is attached in appendix one.
1.3	A higher level Advocacy Action Plan was then developed to outline key areas of work to be undertaken throughout the strategy as is attached at appendix four. After approval by the IJB this will be operationalised into a lower level action plan.
2.	BACKGROUND
2.1	<ul> <li>In June 2018 the IJB considered and supported the recommendations made by the Mental Welfare Commission regarding independent advocacy.</li> <li>Local authorities and health boards have a legal duty to provide independent advocacy for people who have a mental disorder (this includes people who have a mental illness, learning disability or personality disorder, and covers people with dementia and acquired brain injury) under the Mental Health (Care and Treatment) (Scotland) Act 2003. This is not restricted to people subject to</li> </ul>
	compulsory measures; "everyone with a mental disorder is entitled to access

	Under the Adult Support and Protection (Scotland) Act (2007) local authorities are required to "have regard to the importance of the provision of appropriate services (including, in particular, independent advocacy services) to the adult concerned". Therefore it must be considered whether advocacy is required for any adult subject to ASP procedures, however, as identified above advocacy must be offered to any adult subject to ASP who has a mental disorder. There is a range of legislation in Scotland that requires the local authority to give regard to the views of children, including the Children (Scotland) Act 1995, Children's Hearings (Scotland) Act 2011 and the Children and Young People (Scotland) Act 2014. This may involve the provision of advocacy to ensure children are able to express their views. Under the Mental Health (Care and Treatment) (Scotland) Act 2003 all children with a mental disorder are entitled to independent advocacy. Under the Equality Act 2010, local authorities and health boards have a statutory duty to ensure services provided are equitable and accessible and that any barriers to this are addressed. For people who are marginalised or face discrimination it is particularly important that they have access to independent advocacy to ensure equitable access to services. People may face discrimination or exclusion of the basis of age, gender, ethnicity, disability, sexual orientation, mental health or substance dependency. This duty requires consideration of the provision of advocacy on a wider basis than that required for people with a mental disorder.
	In addition to legal requirement, there is a range of policy and guidance that recommends access to advocacy for particular groups, such as Getting It Right for Every Child (2010) and Advocacy for Unpaid Carers, Guidance (2016).
2.2	<ul> <li>The Mental Welfare Commission made the following recommendations in its report:</li> <li>Ensure that there is clarity about which organisation will be responsible for coordinating the preparation of an Advocacy Strategy for its area.</li> <li>Ensure that an Advocacy Strategy is in place by the end of December 2018.</li> <li>Ensure that strategic plans are developed based on a local needs assessment and Information about unmet need and gaps in local provision.</li> <li>Ensure that advocacy planners carry out equalities impact assessments and develop approaches to monitoring and enabling access to advocacy which cover all the protected characteristics.</li> </ul>
	<ul> <li>Specific recommendations relating to services for children and young people included in the report are:</li> <li>Ensure there is clarity about where the responsibility lies for planning and commissioning independent advocacy services which are accessible for all children and young people under 18 with a mental disorder.</li> <li>Ensure that arrangements are in place for planning for the provision of independent advocacy;</li> </ul>

 services for children and young people include processes for assessing the projected need for these supports.

All of these issues have been included in the Advocacy Strategy and the Equalities Impact Assessment is attached at **Appendix 2**.

- 2.3 The Head of Mental Health Service convened a Pan Ayrshire short life working to support the development of an Advocacy Strategy. However South Ayrshire did not attend the group which resulted in an initial delay. As a result a North Ayrshire Advocacy Strategy has been developed with East mirroring this approach. The North Ayrshire Advocacy Strategy document has been shared with East and South Ayrshire for their input and comments. South Ayrshire HSCP provided comments via the Local Health Council representative at the Pan Ayrshire Mental Health reference group.
- 2.4 The short life working group developed a public engagement survey monkey which was opened on October 12th and Closed November 16th. We received 17 online responses.

There was also engagement with people who use independent advocacy services using focus group conversations in AIMS Advocacy Service, Housing Services and Children Services. The findings of the full survey monkey, Housing and AIMS advocacy focus group engagement are attached at **Appendix 3**. Further feedback is expected from Children Services.

These engagement methods were felt to be sufficient to inform the Advocacy Strategy, however, it was felt by stakeholders to be too light touch to inform the detailed action, which will underpin the strategic document, and additional conversations required to be undertaken. As a result the IJB is asked to approve the Advocacy Action Plan and to support further stakeholder engagement to develop a detailed operational action plan.

### 3. PROPOSALS

3.1 The IJB is asked to approve the Advocacy Strategy and Action Plan. This approved plan will be provided to the Mental Welfare Commission Scotland.

The IJB is asked to support further stakeholder engagement to develop a detailed delivery plan.

#### 3.2 Anticipated Outcomes

The proposals set out in this report will assist the Integration Joint Board to deliver against the following Strategic Objectives set out in the North Ayrshire Strategic Plan for 2018-21.

3.3	Measuring Impact

	The progress on implementation of independent advocacy will report using the HSCP Performance & Audit Committee process and form part of the HSCP annual performance report.		
4.	IMPLICATIONS		
Finano	cial:	The Advocacy Strategy will be underpinned by the commissioning of new services as required.	
Huma	n Resources:	There are no implications for NAHSCP staff	
Legal:		The HSCP will comply with the legal aspects of independent advocacy.	
Equali	ity:	A full Equalities Impact Assessment will be prepared as part of the exercise to develop a Strategic Advocacy Plan.	
Childr People	en and Young e	The Advocacy Strategic Plan identifies a gap in service for children and young People who have a mental disorder (where they are not on the child protection register or looked after and accommodated. It should be noted that children in kinship care are not currently covered under the looked after and accommodated group). The provision of advocacy for children and young people in North Ayrshire requires further review to inform commissioning and this work is underway.	
-	onmental & inability:	No environmental or sustainability issues arising as a result of the report.	
Key Priorities:		Advocacy Strategy will ensure equitable access to services and ensure any barriers to equitable provision are addressed meeting the objectives of the Strategic Plan.	
<b>Risk I</b>	mplications:	None identified.	
Comm Benef		Only applies to reports dealing with the outcome of tendering or procurement exercises.	

<b>Direction Required</b>	Direction to :-	
to Council, Health	1. No Direction Required	х
Board or Both	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

# 5. CONSULTATION

5.1	The draft Advocacy Strategy was shared with the Pan Ayrshire working group, the North Strategic Planning Group and the Pan Ayrshire Mental Health Reference Group for comment.
6.	CONCLUSION

6.1 The Advocacy Strategy forms an important foundation stone for the continued delivery of high quality independent advocacy services in North Ayrshire. The strategy recognises local need and current gaps which will be taken forward through the development of a detailed underpinning action plan.

For more information please contact Thelma Bowers on 01294 317803 or thelmabowers@north-ayrshire.gcsx.gov.uk

Appendix 1

North Ayrshire Health and Social Care Partnership



# **Empowering Inclusion**

Independent Advocacy Strategic Plan 2019-2021

In partnership with





North Ayrshire Council NHS Ayrshire & Arran TSI North Ayrshire Scottish Care

# **Document Control**

Document Name	Advocacy Strategy
Directorate	Partnership
Prepared by:	Annie Robertson
Authorised by:	Michelle Sutherland
Source Location	
Published Location	
Other documents referenced	Advocacy Plan
	North Ayrshire: Advocacy Scoping Exercise 2017
Related documents	
Acknowledgements	

### **Version Control**

Version Number	Date Issued	Author	Update Information
V0.1	30/10/18	Annie Robertson	Initial document
V0.2	21/10/18	Annie Robertson	Update
V0.3	7/11/18	Annie Robertson	Team feedback
V0.4	8/11/18	Annie Robertson	Plainer English
V0.5	20/11/18	Michelle Sutherland	Initial stakeholder feedback
V0.6	21/11/18	Annie Robertson	Stakeholder feedback
V0.7	28/11/18	Annie Robertson	SAHSCP feedback
V0.8	06/12/18	Annie Robertson	Advocacy Steering Group Meeting

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6. Evaluation and review	

## 1. Who are we and what do we do?

North Ayrshire Health and Social Care Partnership (the Partnership) provides community-based health and social care services for people throughout their life: from birth through childhood, teenage years and adulthood.

Our services areas include:

- Adult health and community care services
- Children, families and justice services
- Mental health and learning disability services

Our teams include: allied health professionals (dieticians, physiotherapists, occupational therapists, speech and language therapists), addictions, care at home, care homes, child immunisation, community alarm and digital health, community link workers, money matters, nurses (including specialist nurses), psychologists and psychiatrists, social workers (across all age groups), residential child care and volunteers.

In addition, dentists, GPs, optometrists and pharmacists (primary care professionals) work hand-in-hand with us. We also work closely with local councillors, housing services, NHS acute hospitals, Police Scotland and many others.

We want to ensure people in North Ayrshire can contact the right health and social care professional, at the right time. We work together to provide high quality, safe and sustainable care, as seamlessly as possible.

#### Our vision is that all people who live in North Ayrshire are able to have a safe, healthy and active lifestyle.

The work we do focuses on five key priorities to help us reach our vision:

- Tackling inequalities
- Engaging communities
- Early intervention and prevention
- Bringing services together
- Mental health and wellbeing

You can find out further information about our priorities in our strategic plan, *Let's deliver care together*, and how we are working towards achieving them in our annual performance reports at <u>www.nahscp.org</u>.

### 2. Our advocacy strategic plan

North Ayrshire Health and Social Care Partnership (The Partnership) is committed to ensuring people have their voice heard, are able to express their needs, make informed decisions and have their rights and interests protected.

The Partnership recognises the importance of advocacy in:

- Empowering people to express their own needs and make their own decisions
- Enabling people to access information, explore options and make informed decisions
- Providing a voice for people who are unable to do so
- Ensuring a safeguard for vulnerable people

This has resulted in advocacy being available to adults with learning disabilities, adults affected by mental ill health, adults with addictions issues, adults with physical disabilities, adults with brain injury, children and young people, and older adults.

This new strategy will take us from 2019 to 2022 and has been influenced by the North Ayrshire: Advocacy Scoping Exercise 2017 and the views of our key stakeholders, from an online survey and individual conversations with people who use services.

The North Ayrshire: Advocacy Scoping Exercise 2017 resulted in an increase in funding for adult provision of advocacy in the area. In addition, it identified a gap in service for children and young people who have a mental disorder (where they are not on the child protection register or looked after and accommodated. It should be noted that children in kinship care are not currently covered under the looked after and accommodated group).

The online survey took place from 12 October 2018 – 16 November 2018, which received 17 responses. This reinforced that advocacy services should be independent, provide a voice for those that require it and have supportive staff. It also highlighted that advocacy services should be accessible to everyone that needs it, maintain or increase levels of funding and be expanded to more group e.g. children with a mental disorder.

In addition, individual discussions with people who use independent advocacy services in AIMS Advocacy Service, Housing and Children Services as well as the Pan Ayrshire Mental Health Reference Group took place. This reinforced that advocacy services

should be supportive, provide a voice for those that require it and have staff who can help them understand their issues. It also highlighted that advocacy services should stay as they are but perhaps include more group work.

In developing this plan, we have reviewed information and guidance from the Scottish Independent Advocacy Alliance (SIAA) and guidance from Independent Advocacy Guide for Commissioners from the Scottish Government 2013. Specifically we have focussed on:

- Legislative and policy frameworks
- What we do now
- Unmet need
- Local priorities

To ensure that we move forward we will develop an advocacy action plan to build robust advocacy approaches both locally and across Ayrshire and Arran. Our action plan will highlight the key steps that are required to develop meaningful advocacy to ensure people have their voice heard, are able to express their needs, make informed decisions and have their rights and interests protected.

## 3. What is independent advocacy and why do we need it?

Independent advocacy is about ensuring people have their voice heard, are able to express their needs, make informed decisions and have their rights and interests protected. Independent Advocacy Organisations operate at arm's length to commissioners and providers of services and support to provide impartial support to those who need it. An independent advocate supports Individuals or groups to get the information they need to make real choices and if needed, ensure these choices are communicated to others. In summary, advocacy gives weight to people's views, concerns, rights and aspirations.

Advocacy enables people to be involved in decisions which affect their lives. It helps them to express their views and wishes, to access information, to make informed choices and to have control over as many aspects of their lives as possible.

Independent Advocacy - Guide for Commissioners Scottish Government (2013)

The Partnership recognises the benefits of advocacy in:

- Empowering people to express their own needs and make their own decisions
- Enabling people to access information, explore options and make informed decisions
- Providing a voice for people who are unable to do so
- Ensuring a safeguard for vulnerable people

Advocacy has two main aims

- Speaking up for people who are not being heard, helping them to express their views and make their own decisions
- Safeguarding individuals who maybe at risk.

Advocacy is about ensuring justice, equality and fairness. This is particularly important for people who may lack capacity, face prejudice or who may be more vulnerable than other members of our communities.

Family, carers and friends, as well as health and social care staff often act as advocates for people however, it is often difficult for them to be impartial due to their own views and feelings or their responsibilities to the organisation they work for. Independent Advocacy is about ensuring the person is given independent objective support, while fully respecting and representing the person without conflict of interest.

### 4. Types of Advocacy

The aim of advocacy is to help people gain increased confidence and assertiveness so that, where possible, they will feel able to self-advocate (if they are able to) when the need arises. Advocacy promotes an independent person-centred approach. There are many types of advocacy, both voluntary and paid, to support people in a range of situations. The following are the most common types of advocacy:

#### **Self-advocacy**

Self-advocacy is the ability of a person to express their own views and concerns about the things that are important to them. Selfadvocacy means people are able to ask for what they need and want, and they are able to tell people about their thoughts and how they feel. Self-advocacy means people are able to communicate their choices and decisions about their life.

#### **Citizen advocacy**

Citizen advocacy is one to one, medium to long term support for people who cannot speak up for themselves. Citizen advocacy is based on a relationship of trust and understanding between two people – the advocate and the person seeking support. Citizen advocates are often supported by independent advocacy organisations. These organisations ensure people who are advocates use clear principles and standards and receive on-going training and support. Citizen advocates are unpaid.

#### **Collective (or group) advocacy**

Collective advocacy happens when a group of people with similar experiences or challenges support each other about an issue that affects them all. The group has a unified voice that is often difficult to ignore. This group support can often increase an individual's self-confidence and self-worth and can help to reduce social isolation and stigma.

#### **Peer advocacy**

Peer advocates share their own significant lived experience, e.g. age, gender, ethnicity, diagnosis, service experience or issues, with an individual or a group. They offer understanding, empathy as well as information and assistance to the people they support. Peer advocacy helps to increase people's self-awareness, confidence and assertiveness so that they can begin to speak out for themselves. It is different to citizen advocacy.

#### **Professional advocacy**

Professional advocacy is also known as one-to-one or individual advocacy. It is provided by paid and unpaid advocates, mainly through an independent advocacy organisation. The advocate supports the person to express their views and make choices and decisions on issues that affect them. This support (providing information, not advice) can be short or longer term, depending on the complexity of the issues.

#### Non-instructed advocacy

Non-instructed advocacy happens when a person who needs an independent advocate cannot express their wishes to the advocate. This can happen where the person has complex communication issues or has a long term illness or disability that prevents them from being able to state their needs and wishes. The advocate will take time to get to know the person and explore the use of alternative methods of communication, e.g. people's behaviour and actions, to enable the person to express their views. The advocate will also get to know the person's family, carer and friends. This will help to support decision making and ensure the person's rights are upheld. The advocate will often challenge service providers in order to promote a person-centred independent approach.

### 4. Advocacy services in North Ayrshire

**AIMS Advocacy** provide independent advocacy in North Ayrshire for people over 16 years who require independent advocacy and who are eligible to receive a community care service. This includes people who experience mental ill health or disabilities. AIMS Advocacy provides professional advocacy services to individuals and also supports group advocacy when appropriate. Advocacy support is provided in the community as well as hospital settings.

The Carers Centre in North Ayrshire provides a range of Advocacy support for adult and young carers.

**For Children** a dedicated independent advocacy support service is currently being commissioned. This new service will provide practical information and protection for children as well as support for survivors of abuse, neglect, and other traumatic events in childhood, to recover.

### 5. Enhancing our advocacy approach

North Ayrshire Health and Social Care Partnership is committed to ensuring that advocacy continues to be developed across North Ayrshire in a planned, and collaborative way. This includes providing services for vulnerable people to have their voice heard, express their needs, make informed decisions and have their rights and interests protected where there is no one else and/or it is not appropriate for others to do this on their behalf.

There are a number of key pieces of legislation that outline a requirements for independent advocacy and therefore the Partnership prioritises the following groups:

- Older People (including people living with dementia)
- People with a mental illness or
- People with learning disabilities or a related condition
- Children and young people (including people who need additional support for learning)
- Adult Support and Protection
- Adults with Incapacity
- Child Protection

There are also a number of other groups that would benefit further development of independent advocacy. We will continue to consider the best ways to support these groups by working with individuals and organisations already supporting them, including:

- Carers, including young carers
- People with drug and/or alcohol problems
- People with a brain injury/physical disability (and have communication support needs)
- Children and young people (under the age of 16) who have a mental disorder (where they are not on the child protection register or looked after and accommodated).
- Young people with forensic level mental health problems (as part of the National Secure Adolescent Inpatient Service)

While we acknowledge that we have made good progress with advocacy over the last few years, we recognise that our approach to advocacy will continue to evolve as the Partnership develops.

We are keen to support the development of different types of advocacy, including self-advocacy, by providing access to information via a range of methods. In addition, we will work with local people to develop compassionate communities to provide new types of advocacy to ensure people have a range of advocacy options that best suit their needs and preferences and that promote active community involvement.

We will therefore develop an Advocacy Action Plan to build robust advocacy approaches both locally and across Ayrshire and Arran. Our action plan will highlight the key steps that are required to develop a meaningful advocacy to ensures people have their voice heard, are able to express their needs, make informed decisions and have their rights and interests protected.

## 6. Evaluation and review

The Pan-Ayrshire Mental Health Programme Board will be responsible for the direction, implementation and review of our Advocacy Strategy. This group provides a basis for stakeholder representation within the Partnership and makes recommendations to North Ayrshire Integration Joint Board (responsible for the direction, effectiveness and efficiency of North Ayrshire Health and Social Care Partnership) for implementation

We believe that robust monitoring and evaluation will improve the quality of the services provided and drive up standards in promoting greater accountability.

- We will regularly review advocacy services and provision against the Scottish Independent Advocacy Alliance's Principles and Standards for Independent Advocacy<sup>1</sup> and in line with Scottish Government's Independent Advocacy - Guide for Commissioners<sup>2</sup>.
- We will undertake an on-going annual review of the Advocacy Action Plan to ensure we continually develop the best ways to support local people.

The strategy and action plan will be reviewed annually. We monitor and evaluate the effectiveness of advocacy across Ayrshire and highlight any gaps or identify future needs. These issues will be reported to North Ayrshire's Strategic Planning Group and highlights will appear in our annual performance report.

<sup>&</sup>lt;sup>1</sup> https://www.siaa.org.uk/wp-content/uploads/2013/11/siaa\_principles\_and\_standards\_2010.pdf

<sup>&</sup>lt;sup>2</sup> https://www.gov.scot/publications/independent-advocacy-guide-commissioners/

WORKING TOGETHER IN PARTNERSHIP

#### Appendix 2 – EQIA

#### Equality and Children's Rights Integrated Screening Form

The public sector equality duty requires that we demonstrate that we are making decisions in a fair, transparent and accountable way. The Council must show that it has considered the needs and rights of people with protected characteristics. In addition where decisions affect young people, we must consider the 'Rights of the Child', under the United Nations Convention on the Rights of the Child (UNCRC).

The duty requires that the Council assesses the 'equality impact' of proposals thoroughly before any decisions are taken. This should be proportionate to the decision that is being made.

This form should assist in assessing whether a more detailed Equality and Children's Rights impact assessment is required.

1. Proposal		
Title	Enabling Inclusion – Independent Advocacy Strategic Plan (2019-21)	
Budget reference no. and heading if	Not a budget proposal	
appropriate (or not a budget proposal).		
Amount (£) of saving if appropriate (or N/A)	N/A	
Service	Health & Social Care Partnership	
Lead Officer	Thelma Bowers	
Others Involved	Michelle Sutherland/Scott Bryan	
Date Completed	21 November 2018	
2. What are the anticipa	ted outcomes of the proposal?	
The Advocacy Strategy represents the Partnership's ongoing commitment to engaging with local people who require health and care services. The recognises the work that has been done to date in relation to providing independent advocacy support to local people, but also re-enforces the need to ensure the voices of all people in North Ayrshire are listened to and considered when accessing services, regardless of their condition or mental status. It is anticipated that this strategy will lead on an improvement of the availability and accessibility of advocacy services in the future.		
3. What data, research or other evidence was used for this screening?		
The Advocacy Strategy has been developed under the steerage of a multi-agency working group with representation from, Mental Health Services, Housing Services, Public Health and Children, Families and Justice.		
It has been informed by advice from the Scottish Independent Advocacy Alliance (SIAA) and Scottish Governments Independent Advocacy Advice for Commissioners.		

This also followed on from a public engagement/scoping exercise which took place in October/November 2018

	Yes	No
Does the proposal affect service users, employees or the wider community? (The relevance of the proposal will depend not only on the number of people affected, but also the significance of the effect on them).	~	
Does the proposal have any relevance for Children's Rights? (please see guidance)	~	
Is it a major proposal, significantly affecting how services are delivered?		√
Will it have a significant effect on how other organisations operate?		√
Does it relate to services that have been identified in the past as being important to particular protected groups?	~	
Does it relate to an area where there are known inequalities?	✓	
Does it relate to a policy where there is significant potential for reducing inequalities or improving outcomes?	~	

Protected Group	Positive Impact	Negative Impact	Neutral Impact	Comments
Age (young*/old people)	· ·			The strategy reflects on the key groups who would benefit from Advocacy support. This includes Older people, particularly those with dementia and children and young adults, perhaps those in the care system or with additional support needs. Being supported by an advocate would mean that the voice and wished of these individuals are heard which should lead to better outcomes.
Disability (Physical & learning)	✓ 			Again, the strategy identifies people within this protected group a being beneficiaries of independent advocacy. This includes, those with a learning disability, mental illness or acquired brain injury.
Gender Re-	✓			It has been evidenced in the
assignment				past that the trans community

	may face particular barriers
	when accessing services. In
	addition, research has shown
	that many trans people require
	support from Addictions
	services. As such, there is a
	potential that they could benefit
	from the support provided by an
	advocacy service.
Pregnancy &	<ul> <li>✓ While advocacy services will be</li> </ul>
Maternity	open to all, it is not anticipated
Materinty	
	to have any adverse impact on
	individuals covered by this
	protected characteristic.
Race & ethnic origin	✓ While advocacy services will be
	open to all, it is not anticipated
	to have any adverse impact on
	individuals covered by this
	protected characteristic.
Religion or belief	<ul> <li>✓ While advocacy services will be</li> </ul>
	open to all, it is not anticipated
	to have any adverse impact on
	individuals covered by this
0	protected characteristic.
Sex	✓ While advocacy services will be
	open to all, it is not anticipated
	to have any adverse impact on
	individuals covered by this
	protected characteristic.
Sexual Orientation	✓ While advocacy services will be
	open to all, it is not anticipated
	to have any adverse impact on
	individuals covered by this
	protected characteristic.
Other (Poverty, ✓	There is a potential that
homelessness,	accessing advocacy support
rural, carers, part-	could benefit Carers of service
time workers, etc)	users, who may require
	additional support when trying
	to communicate the needs of
	the care for person.
	Further, through advocacy
	support, the needs of people
	will be better represented which
	could lead to a number of
	positive outcomes for
	individuals, including support to
	address poverty or access
	employment.
	omploymonta

#### 6. Have any cross cutting impact been identified from other Council Services or Partner Agencies (multiple discrimination or accumulated effects of multiple proposals)?

None identified.

# **7.** If a negative impact has been identified how will you modify it? None identified.

#### 8. Has there been any consultation on the (budget) proposal?

The strategy is in the initial draft stage. To support its development a scoping exercise was carried out in October/November 2018 which gathered views from a number of stakeholders.

#### 9. What are the monitoring and review arrangements?

Strategy will be reviewed on a regular basis. The strategy will see the development of an Action plan that will be reviewed, updated and report through appropriate structures.

# 10. What are the recommendations and further action resulting from this Equality Screening?

Full Equality Assessment (or) -

Full Equality Assessment and Children's Rights Impact required.

Screening Only (Please explain)

# 11. If relating to a Budget proposal, the Screening and/or Full EIA should be attached to Committee Report and published on the Council's external website Equality pages

YES

\*If a potential impact is identified for people under the age of 18, the CRIA screening questions in Appendix 1 should be answered

#### Appendix 1 – Children's Rights Impact Screening Form

#### **CRIA - Screening Questions**

# 1. What aspects of the Policy/measure will affect children and young people?

(The articles of the UNCRC and the wellbeing indicators under the Children and Young People (Scotland) 2014 apply to all people under the age of 18, including non-citizen and undocumented children and young people). More information can be found –

(Appendix 1 of the full form)

(Children & Young People's Commissioner Scotland)

The strategy covers all service user groups who are unable to speak for themselves. This will cover children and young people. This includes young people subject to child protection processes, those in care and those with disabilities or additional support needs.

2. What Likely Impact (direct or indirect) will the policy have on children and young people – considering any positive, negative or neutral impacts. (Direct impact, where changes directly impact the young person, e.g. education, child protection etc or Indirect Impact, where although not directly aimed at young people, will still have an impact, e.g. welfare reforms, parental leave, housing supply etc

Accessing advocacy support when needed will have a positive impact on young people, particularly on those who have difficulty in communicating.

The strategy relates to articles 3 and 12 of the Convention on Rights of the Child related specifically to the representation of children's voices:

3 – Children and young people have the right to have their interests considered in any decision being made about them.

12 - Children and young people have the right to speak up and have their opinions listened to and be taken seriously.

# 3. Are there particular groups of young people who are more likely to be affected than others?

('Children' can refer to individuals, groups or children in general, and can also be related to the range of characteristics under the Equality Act – disability, race, religion or belief, sex, sexual orientation. It also includes those that are eligible for special protection, including pre-school children, children in hospitals, rural areas, looked after children, victims of abuse, young people who offend, child asylum seekers, children living in poverty)

Yes, those subject to social work procedures such as Child Protection or those looked after.

# **4. Will this require a full Children's Rights Impact Assessment?** (please state why?)

Full CRIA required	Screening only	
No	Yes	
Explain your reasons	Explain your reasons	
Authorisation		
Policy Lead/Manager	Date 21/11/2018	
Michelle Sutherland		
Head of Service	Date 21/11/18	
Thelma Bowers		

### Appendix 3

#### Advocacy Consultation Results Survey Findings (October 12<sup>th</sup> to November 16<sup>th</sup>)

# Q1 What is important to you about advocacy (Please identify the 3 most important aspects)

1

Easy access into services - money matters/carers centre giving vulnerable clients a voice Support to very vulnerable individuals to express their views Help On my side local access Knowing you matter Independent Independent an independent voice Clear understanding of the role Quality of service support Time to think Knowledge knowledge of court process

### 2

Access to current, accurate information. ensuring clients are being delivered good support and talking up if they arent Someone independent who can look at a situation without a vested family or service interest and speak clearly Speaking up Trust short waiting time Someone who can speak your views Person centred Objective working with and for people who are vulnerable Availability of service Independence of the organisation expertise Confidentiality Representation being my voice

#### 3

Support from Advocacy to attend health and benefits interviews. they are independent of all other agencies Support to vulnerable individuals to consider all possibilities and make an informed choice Advocate Support independent Being listened to Ability to challenge Providing a voice not provided by the local authority Consistency of worker Free at the point of delivery independence Saying my words Good service having a whole overlook of situation

# Q2 What would you like to see happen with advocacy in North Ayrshire over the next few years?

- Carers Advocates offering assistance with easier access into services and support linking with all partner agencies e.g. Link Workers, Social Services and Third Sector etc. to navigate S.D.S. Carers Support Plans and Carers Direct Payments. Helping Carers to access and effectively utilise services open to them via the available Carers Act Funding.
- Is this survey for real? Is this how you are consulting with people? Really?
- I would like advocacy to be properly funded for the great work they do. They are often the only voice speaking up for a vulnerable client. It is a resource which goes above and beyond for its client group. they should receive the funding they deserve
- Routine access for vulnerable individuals to advocacy services, so that they have someone by their side to ensure they understand their options and are able to express their wishes and have them heard.
- Easier to access
- More advocates
- At least, current service level maintained. Ideally increased funding/ provision
- Everyone to have the opportunity to this important support
- To improve and expand particularly for children and young people affected by health, mental health, disability, poverty, drugs/alcohol and those at risk, on statutory supervision or in care/hospital or prison
- Better access to Independent Advocacy for adults who require this.
- Advocacy for all children involved with Social Services
- Availability of workers who have a clear understanding of their role in order to best support their service users
- Enough of it to meet need. Greater awareness and understanding in other services and wider community
- Better opening hours limited at present
- Being there and not disappearing like other projects
- expanded to other towns

#### AIMS Findings

#### Q1 What is it about advocacy that is most important to you?

- Getting help and to find advice.
- Going along to groups and being involved in things.
- You can always find a way around.
- Coming to groups was an achievement.
- Makes me feel secure with going to other places would be different would I go back to square one?
- Getting more help all different ways, help here and help within self.
- Helping hand/advocacy- helps have achieved more rather than facing alone.
- I get thinking things through not rushed.
- Speaking for me when I'm too emotional or angry i.e. Children's Hearings and Social Work meetings.
- Advocacy is a secure place.
- Been a support, which is always important.
- Understanding (advocates and whole service).
- Valuable over the years.
- Know it's always there as an option.
- Helping sort out my letters and bills as I forget what/who I am paying.
- Not telling me what to do.
- You can always find a way round.
- It helps me communicate with people as I cannae communicate.
- It helps with my stress too.
- It takes a lot of the load off me.
- The advocate talks, listens and helps me.
- Talking with my advocate.
- Advocate <u>helping</u> me to speak up.
- My advocate helps me and listens to me.
- My advocate helps me to speak up at my reviews
- Advocacy helps me socialise.
- I look forward to coming and attending.
- It has helped me with my mental health issues and I feel more confident.
- Talking's good.
- Peace of mind if I don't know something.
- Only person I feel I can ask "What do you mean?"
- Like a friend who can't give advice but can help me to understand
- The ways my advocate listens and understands me.
- Some people/professionals etc. get frustrated explaining themselves a few times, my advocate doesn't, and they are patient and take things at my pace.
- 1000x more patient, kind and helpful than others.
- Don't know where I would be without them.
- Gives me confidence it's like my advocate helps me but doesn't take my independence away (as though they are always walking behind me?)
- I appreciate how if my advocate doesn't understand or know an answer to a question they can get the help of other staff or a boss, I imagine it as a whole team that is supportive rather than competitive, and although I only have one advocate it is like the whole team helps me as well.

- Makes me feel I can face the world.
- I don't panic before an appointment with my advocate as I do with other things.
- I have been coming here for years and I find the service very good and it has done a lot for me over the years. I find all of the staff amazing and Sally is amazing at her job.

#### Q2 What would you like to see happen in advocacy over the next few years?

- Struggling to survive.
- More/ different range of groups, activity based.
- Learning to do new things and being in a group environment.
- Advocacy is alright the way it is. No need to change it.
- I think they should continue as they are, they do great work.
- More of the same.
- Nothing bad to say (although I know criticism can be helpful) and can't think of any way to improve.
- Big question!
- Can't see it going anywhere near the club (Buccleuch House) and wouldn't want it to.
- Might come to camera/ photography day would be interested in more things like that (NOT SINGING!), and trips things to bring people together and to do activities.
- More advocacy workers.

#### Online Survey Major Themes

#### Q1 what is important to you about advocacy

- 1. An independently delivered service
- 2. Providing a voice for those that require it
- 3. Supportive staff

# Q2 what would you like to see happen with advocacy in North Ayrshire over the next few years?

- 1. Access Everyone who could benefit from advocacy services will to be able to access them
- 2. Expansion Expansion of Advocacy Services, particularly for children.
- 3. Funding Increased levels of funding to maintain the high standards delivered

#### AIMS Major Themes

#### Q1 what is important to you about advocacy

- Supportive The Supportive nature of the service offered. Help offered in a variety of different ways, such as reminding people to pay bills and reducing the feeling of panic whilst attending meetings.
- 2. Understanding The role the advocate plays in helping service users understand the processes and procedures around the care they receive
- 3. Providing a Voice The role the advocate plays in speaking up for services users when they feel they aren't able to

# Q2 what would you like to see happen with advocacy in North Ayrshire over the next few years?

- 1. No need for change The predominant theme from these responses was a desire for no changes to be made. Service users are happy with the service they have received.
- 2. Group Work There was however some suggestions that further group work opportunities would be beneficial.

# Appendix four

# Advocacy Action Plan 2019 - 2021

Date	Action	Outputs	Who
January 2019	Children and Young People's Advocacy Service	Begin commissioning for new service	Thelma Bowers
February 2019	Advocacy Steering Group	<ul> <li>Discuss plan format and style</li> <li>Agree Providers session</li> </ul>	Thelma Bowers
March 2019	Advocacy Providers Session	<ul> <li>Discuss plan outline</li> <li>Agree questions for current users/future users</li> </ul>	Thelma Bowers
April- May 2019	Engagement with Current Users and Public	<ul><li>One to one sessions</li><li>Online questionnaire</li></ul>	<ul> <li>Advocacy Steering Group</li> </ul>
June 2019	Analyse and Present Feedback	<ul> <li>Analyse feedback</li> <li>Present to MH Programme Board</li> <li>Agree plan outline</li> </ul>	Performance Team
June 2019	Advocacy Steering Group	Finalise Plan	Thelma Bowers
July 2019	Children and Young People's Advocacy Service	New Contract Start	Thelma Bowers
July 2019	IJB	Sign off Commissioning Contract	Thelma Bowers
June 2020	Adults Advocacy Service	Review contract for re-commissioning or extending	Thelma Bowers