



# Joint Angus Advocacy

Strategic Framework | 2023-2026



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## Foreword

**Chair of Integration Joint Board, Angus Health & Social Care Partnership, Cllr Julie Bell, and Convenor of Children & Learning Committee, Cllr Lynne Devine**

Welcome to the first Advocacy Strategic Framework (the Framework) for Angus Health and Social Care Partnership (AHSCP) and Angus Council’s (AC) Education and Lifelong Learning and Children, Families and Justice services. It sets out our current commissioned advocacy services, where we have a statutory duty to provide independent advocacy, as well as our ambitions for improving opportunities for children, young people and adults in our communities to have their voices heard.

The Mental Health (Care and Treatment) (Scotland) Act 2003 imposed a duty on local authorities and health boards to collaborate to ensure the availability of independent advocacy services in their area. The responsibility for delivery of these services lies with AC for children and young people and AHSCP for adults.

This Framework outlines the provision of independent advocacy for whom we have a duty to ensure this is available, provided and promoted. It was written in collaboration with all key stakeholders from AC, AHSCP and those commissioned to provide independent advocacy services as well as those who provide advocacy support together with their other services. The three priorities identified within this Framework will ensure we meet our duty around independent advocacy provision in Angus. It is recognised that the need for advocacy support is increasing and there are other third sector organisations who provide advocacy support to different groups of people, although these are not commissioned by AC or AHSCP.

We look forward to progressing the delivery plan of the Framework, ultimately increasing awareness and delivery of all independent advocacy services and advocacy support available.

## What is independent advocacy?

Independent advocacy supports people to have their voice heard and their rights and interests protected in all matters relating to them. Services across Angus are committed to the delivery of independent advocacy and recognise the importance and value of this.



*Independent advocacy is about speaking up for and standing alongside individuals or groups; and not being influenced by the views of others. Fundamentally it is about everyone having the right to a voice, addressing barriers and imbalances of power, ensuring that an individual's rights are recognised, respected, and secured.*



Scottish Independent Advocacy Alliance 2019

Independent advocacy services are important because:

- Some people are more likely to be treated differently, either because of other people's prejudices, their own vulnerabilities or both
- Some people have no connections to family or friends or the wider community who could support them
- For some people family and friends might not be the appropriate support networks
- Supports people to have their voice heard in decisions that affect their lives

In Scotland, Independent Advocacy organisations can become members of the Scottish Independent Advocacy Alliance, and work to the [Advocacy Principles, Standards and Codes of Practice](#).

Our principal aim is to ensure that independent advocacy services are delivered across Angus in a strategic, collaborative and coordinated manner. When planning independent advocacy services, we need to ensure the following standards are adhered to:

**Independent advocacy is loyal to the people it supports and stands by their views and wishes as:**

- Independent advocacy follows the agenda of the people supported regardless of views, interests, and agendas of others

- Independent advocacy must be able to evidence and demonstrate its structural, financial and psychological independence from others
- Independent advocacy provides no other services, has no other interests, ties or links other than the delivery, promotion, support and defence of independent advocacy

**Independent advocacy ensures people’s voices are listened to and their views taken into account:**

- Independent advocacy recognises and safeguards everyone’s right to be heard
- Independent advocacy reduces the barriers people face in having their voice heard because of communication, or capacity, or the political, social, economic and personal interests of others

**Independent advocacy stands up to injustice, discrimination and disempowerment:**

- Independent advocacy recognises power imbalances or barriers people face and takes steps to address these
- Independent advocacy enables people to have more agency, greater control and influence
- Independent advocacy challenges discrimination and promotes equality and human rights

There are three components of independence in advocacy:

- **Structurally** – a separate organisation, has its own management structure and is different from other organisations and services
- **Financially** – has its own source of funding that does not cause any conflicts of interest and that does not compromise the work it does
- **Psychologically** – everyone involved in the organisation knows they are only limited in what they do by the principles of independent advocacy, resources and the law. It is important they recognise that although there may be conflicts of interest present, psychological independence is vital

Independent advocacy is vital in helping ensure that an individual’s human rights are respected and upheld, and advocacy practice is informed by the five PANEL principles: Participation, Accountability, Non-discrimination & equality, Empowerment and Legality.

**What is it not?**

Although independent advocacy and advocacy support are vital to ensure people’s voices are heard, these services are not to be confused with interpretation and translation services for those who have communication barriers. A person’s need for interpretation or translation support does not mean they lack capacity or are unable to advocate for themselves. Independent advocacy should also not be confused with informal advocacy or advocacy support and the choice a child or adult may make to have someone speak on their behalf in many different situations.

## What are the different types of independent advocacy?

There are two strands of independent advocacy – **individual** and **collective** advocacy.

**Individual or one-to-one advocacy** is also known as direct advocacy or issue-based advocacy and can be provided by paid, professional advocates or unpaid, volunteer advocates.

Professional advocates are often called Independent Advocacy Workers. In both paid and voluntary versions, the advocate will receive appropriate levels of training. Professional and citizen advocates work to a set of principles, standards, and codes of practice, undergo continuous training and development. Independent advocacy workers have specialist skills and knowledge.

Advocates will seek to form a partnership with the individual based on their specific needs and the issues they wish to explore. In issue-based advocacy, the support offered by an advocate tends to be shorter term.

The volunteer version of one-to-one advocacy can be termed as **Citizen Advocacy**. Typically, this type of advocacy partnership matches people within communities and is based on the trust and quality of relationship made between the (individual) partner and the citizen advocate (volunteer). It is supported but not influenced by an advocacy organisation. Citizen advocates will support the partner through natural skills, experience, and abilities. The social aspect of this partnership gives partner's the opportunity to connect to their community, which in turn broadens their social circle to enable them to enjoy ordinary daily life despite the barriers they face. This will tend to be over a long term.

Citizen Advocacy is an equal and often reciprocal partnership which has a preventative function. Some partnerships have a safeguarding element which can help stop problems escalating to crisis point and potential need for legislative interventions from statutory agencies.

**Collective Advocacy** brings people together who have a common interest. It aims to provide a supportive environment in which a group can explore this interest, identify goals, and seek possible solutions. Examples of Collective Advocacy can be found in settings such as hospitals where a group of patients have advocated for changes to ward practices or in community housing, when tenants have advocated for widespread improvements.

Collective Advocacy uses people’s shared experiences to bring about change and can help service providers, policy makers and planners to be aware of and better understand inequalities, barriers to accessing services and discriminatory practices that may be present.

### **Approaches to Advocacy**

These different approaches below can be used by Independent Advocates:

**Peer Independent Advocacy** is an approach where people with lived experienced draw on this to understand and empathise with their advocacy partner often in a deep and meaningful way (e.g. recovery from substance use). This can be an extremely powerful and empowering advocacy approach.

**Non-instructed Advocacy** is considered when there are significant communication barriers and often when a person’s capacity is diminished and limits their ability to express their views or clearly instruct an advocate.

An advocate employs special techniques to understand the person’s rights, will and preference and seeks to ensure fair and equitable treatment for that person. Non-instructed advocacy is a last resort and requires a great deal of time and skill to achieve meaningful results and avoid tokenism.

In **self-advocacy**, self-advocates speak on behalf of themselves, often gaining confidence using either one of the forms of individual or collective advocacy. It can involve people working in groups and can lead to self-advocates becoming peer and/or citizen advocates. Self-advocacy is in keeping with the advocacy principle of enabling individuals to develop the skills and confidence to advocate for themselves.



## Why do we need independent advocacy for children and young people?

Independent advocacy for children and young people is important in supporting the child or young person to express their own needs and views to make informed decisions on matters which influence their lives.

Access to independent advocacy is becoming increasingly available around Scotland and we have seen an increase in investment and service provision of independent advocacy for children in Angus over the last few years. The duty to provide independent advocacy for children and young people with a mental disorder<sup>1</sup> was placed upon local authorities, as directed by the [Mental Health \(Care and Treatment\) \(Scotland\) Act 2003](#). For those subject to discussion in tribunal proceedings under the [Education \(Additional Support for Learning\) \(Scotland\) Act 2009](#), the duty was placed upon Scottish Ministers. The duty of the provision of independent advocacy is enshrined in legislation (see [Appendix 1](#)). Advocacy services offered to these children and young people must be independent and must be promoted to ensure those who have a right can access these services.

For children involved in the Children's Hearing System, there is no legal right to access independent advocacy however best practice guidance, *The Promise and Getting It Right for Every Child*, promote and encourage the local provision of independent advocacy services for children involved with the Children's Hearing System and for anyone who is looked after.

Independent advocacy has an important role in supporting disabled children and young people to express their views. Children with disabilities often face additional barriers that mean they are more at risk of social isolation. The Local Authority must ensure that, where possible, the child or young person in need of support can make informed choices about that support and the options available for the delivery of support.

<sup>1</sup> Section 328 of the Act provides that "mental disorder" means any mental illness, personality disorder, or learning disability, however caused or manifested.

Advocates should not share any information given by a child or young person without their knowledge or consent. However, there are exceptional circumstances where an advocate must share information in order to protect the child or young person from harm;

- where there is a concern the child or young person is at immediate risk of significant harm ([National guidance for child protection in Scotland](#))
- where there is a concern which is less serious, the advocate should consider whether or not to share information with the child's named person or lead professional

### **Support & issue-based Advocacy**

In comparison to advocacy for adults and older people, there is less legislation regarding the provision of independent advocacy for children and young people. However, there is considerable policy and guidance, most of which highlights the importance of ensuring that a child's views are sought and fully taken into account. The guidance highlights that in most cases a child's views do not necessarily have to be represented through formal independent advocacy services. If more suitable, a child's views could be represented by, for example, a parent, a lawyer, a teacher, a social worker, health visitor or third sector worker, instead.

The UN Convention on the Rights of the Child underpins Government Policy and Legislation in relation to children and young people. This details the rights of all children defined by the Convention as anyone under 18 years of age. Article 12 states the child's view must be considered and taken into account in all matters affecting him or her. Access to independent advocacy can help ensure that Article 12 is a reality for every child. It is therefore necessary to ensure that young people are aware of the advocacy choices available to them and how to access the appropriate supports and services.

## Why do we need independent advocacy for adults?

The importance of involving people in decisions that affect their lives is highlighted in much of the legislation listed in [Appendix 1](#). Independent advocacy has a vital role in supporting this.

Demand for mental health and wellbeing support and the complexity of people's needs has increased as a result of the COVID-19 pandemic. In Angus there has been a 29% increase in referrals to community mental health teams in the past year since April 2022. Adult support and protection referrals have increased 350% in past two years and there were over 700% more adult protection case conferences in the past two years. The Mental Welfare Commission for Scotland, Mental Health Act Monitoring Report 2020/2021 indicated that 'the rise is more than double the average over the previous five years' for compulsory measures under the Mental Health Act, and this impacts on the number of admissions. Short term detentions in Angus increased from 52 to 81 and Compulsory Treatment Orders increased from 35 to 39 in 2021. With this increased demand for mental health services, comes an increase in demand for independent advocacy services.

At the beginning of the COVID-19 pandemic in 2020, the Scottish Government issued 'stop the clock' guidance putting a pause, or extension, on all adult protection guardianship orders in place. This guidance was in place from 8 April 2020 to 30 September 2020 equating to 176 calendar days. As a result, all guardianship orders in place, and those due to expire during this time, were extended by up to 176 days. As we continue to remobilise after the pandemic, Guardianship order renewals will temporarily increase as a direct impact of the 'stop the clock' period. The increase in renewals may have an impact on the need for independent advocacy support. This will be in addition to the expected, urgent and routine demand for support.

The [Triangle of Care](#) is a working collaboration or 'therapeutic alliance' between the service user, professional and carer that promotes safety, supports recovery and sustains wellbeing. This approach is being rolled out in adult community mental health teams in Angus to develop a new system of working with carers and families to improve patient and carer pathways. Staff will be more aware of and responsive to carers needs, so that carers are identified and provided with information and enabled to be better involved in care planning.

Studies have consistently shown a high prevalence of co-morbidity of mental disorders in people experiencing problematic substance use and a clear association

with experiences of homelessness and the criminal justice system. People who use substances are more likely to face poverty and deprivation. They are also more likely to face stigma in society and from the services they use as well as self-stigma. As a result, they may find it much harder to have their voice heard by others, to stay engaged with services, to exercise their rights, or to know where to turn to resolve issues. Access to independent advocacy is an important tool to redress this power imbalance, challenge stigma and assist people who use substances to have their views heard, and participate more fully in processes that affect them. Work is underway to implement the Medication Assisted Treatment (MAT) Standards ([Standard 8](#)), across Angus. This will ensure that people have access to independent advocacy services where appropriate.

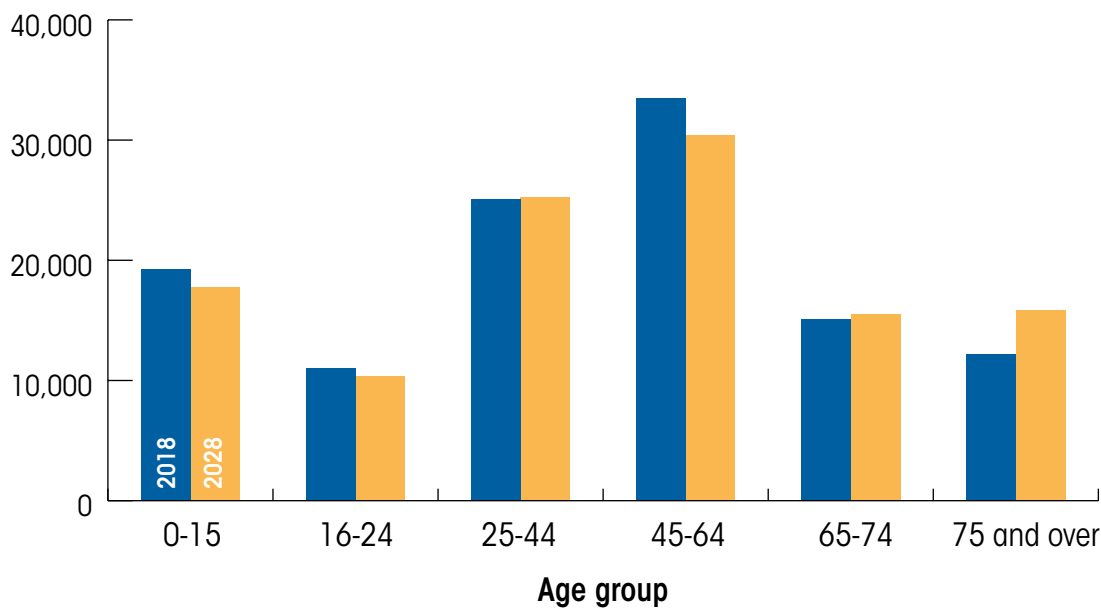
The **Discharge Sub Team** supports the timely discharge of adults from hospital and the management of complex care needs post discharge with the aim of reducing re-admission rates. The Sub Team will work in partnership with unpaid carers and families to support hospital to home transition to ensure that their loved ones are discharged from hospital with care and support in place.

## What is the local need for independent advocacy?

### Population Projections

Between 2018 and 2028, the 45 to 64 age group is projected to see the largest percentage decrease (-9.1%) and the 75 and over age group is projected to see the largest percentage increase (+30.3%). In terms of size, however, 45 to 64 are projected to remain the largest age group.

#### Angus | Population by age group by year, 2018 and 2028



The Scottish Independent Advocacy Alliance (SIAA) have asked Scottish Ministers on the committee for the [National Care Service](#) to consider aspects of independent advocacy within the Bill, including the SIAA definition of independent advocacy and the right of access to independent advocacy and a duty to provide.

The [Children \(Care and Justice\) \(Scotland\) Bill \(December 2022\)](#) is currently the subject of consultation. It has been designed with the intent to support a presumption against under 18s in the Criminal Justice System, keeping them out of young offenders' institutions where possible and appropriate, while ensuring that victims receive the support they need and their voices heard. This will extend beyond

children in conflict with the law. Section 1 of this Bill will amend section 199 of the Children’s Hearing (Scotland) Act 2011 and define a “child” as someone who under 18 years old. As a result, all children aged 16 and 17 will have the opportunity to be referred to a children’s hearing, on welfare or offence grounds, not just those subject to a CSO. This will see an increase in the number of young people aged 16–18 supported through the Children’s Hearing system and a likely increase in demand for advocacy support.

Carers, particularly older carers, are vulnerable to the adverse health consequences of caring. Often invisible, many older carers provide care and support while their own health and wellbeing deteriorates resulting in poor physical and mental health and a breakdown in their ability to carry on caring.

Under the Carers (Scotland) Act 2016, it is a legal duty of local authorities to assess carers’ needs, including health needs, and to put in place a needs-based support. The newly published National Carers Strategy focuses on five key areas that will be the focus of the Scottish Government between 2023 and 2026:

- Living with COVID-19
- Recognising, valuing and involving carers
- Health and social care support
- Social and financial inclusion
- Young carers

The [Self-directed Support Framework of Standards \(2022\)](#) sets out the standards and actions for local authorities to build a framework of good practice in assessment for support, support planning and in the provision of care and support resources. Within these standards are a set of 12 core components and practice statements around the provision of advocacy services.

As independent advocacy services are free from conflict of interest, they are essential partners to improve service delivery resulting in positive outcomes for all including:

- supported people – allowing them to express their views and wishes, assisting them in accessing information, helping them to make informed choices and have more control over their lives
- service providers – by providing the voice of the lived experience advocates can help shape services of the future and improve outcomes for all
- commissioners – by providing information, data and feedback allowing commissioners to be focussed on those who are most vulnerable and at most risk

In order to understand the current level of service provision for Independent Advocacy and identify if there are gaps in provision, a strategic needs assessment will be carried out to inform future commissioning of supports and services. From available data and feedback, there are indications of some areas of unmet need already identified. These include:

- an indication that some people find it challenging to access mental health independent advocacy services
- concerns that children’s mental health independent advocacy is currently being provided by generic adult mental health services
- lack of clarity for independent advocacy support to carers
- informal concerns for lack of independent advocacy support to specific groups (e.g. homeless, asylum seekers, sensory impaired)

By carrying out a strategic advocacy needs assessment, we will be able to further explore if the areas identified represent a level of unmet need. A delivery plan to start to address these issues can be found in [Appendix 3](#).

Those who provide independent advocacy services, as well as those who provide advocacy support, have their own methods of gathering data and understanding the need for advocacy services in Angus in relation to the services they provide:

### **Commissioned independent advocacy providers**

**Angus Independent Advocacy (AIA)** work alongside those they support and local communities to better understand the need for independent advocacy in Angus. This includes using outcome tools based on national outcomes for advocacy (below) and seeking feedback from partners throughout the advocacy relationship.

- **Confidence** - Advocacy supports people to grow in confidence
- **Understanding** - Advocacy increases peoples understanding of their rights
- **Control** - Advocacy helps people gain control and agency over their own lives
- **Influence** - Advocacy supports people to have more influence in their own lives
- **Participation** - Advocacy encourages and supports the advocacy partner to participate in meetings.
- **Presence** - Advocacy supports people to have a valued presence in their local community
- **Involvement** - Advocacy encourages and supports advocacy partner’s active involvement. This may be in their own/family lives, the development of advocacy or other key areas that may affect and impact their life.
- **Information** - Advocacy supports people to access information in an appropriate format

Partners reported significant improvements across all 8 outcomes with independent advocacy support (2022/23).

AIA also monitors referrals for any unmet need and keeps up to date with policy developments (local & national).

### **Who Cares? Scotland**

Who Cares? Scotland is a national organisation who provide independent advocacy to Care Experienced children and young people in most local authority areas in Scotland. They also support children and young people in the Children’s Hearings system.

They strive to provide advocacy that helps young people feel respected, included, listened to, and understood.

Who Cares? Scotland also believe independent advocacy should be available to Care Experienced people, in some form, and is available as a lifelong offer through their Helpline.

Who Cares? Scotland is active in Angus and provide a support to care experienced children living at home, in kinship, foster, residential and secure care. The service supports Angus children living within Angus and those placed in other authority areas. Who Cares? works closely with Angus Council and Angus Independent Advocacy to ensure there is a choice of service for children and young people.

### **Commissioned services (for other purposes) who also provide advocacy support**

#### **Parent to Parent**

Parent to Parent’s support and advocacy services help parents, children and young people with a range of family issues when a child has an additional support need and/or disability and the family identify they would benefit from additional support. The family or young person worker will help build their confidence, empowering them to speak up in situations where they might feel unable to, and will provide continued support until they feel they are able to do so on their own i.e. ‘self-advocacy’. Demand for the service has increased substantially post-pandemic, with an 85% increase noted.

Parent to Parent use an evidence-based outcome measurement using meaningful language for the child/young person or the parent/carer. These are then translated in to local and national strategic outcome measures. A robust conflict of interest policy is in place along with advocacy service agreements between Parent to Parent, the parents/carers and the children/young people.

#### **Angus Carers Centre**

The Scottish Health Survey (2022) indicates that 13% of the Angus population are unpaid carers, or around 15,000 people. Angus Carers Centre currently supports around 2,000 carers across Angus (March 2023) indicating that around 13,000 carers are not known to services. COVID-19 has had an unprecedented impact on people with the most recent national study indicating that 1 in 5 adults provide some form of unpaid care to family, friends or neighbours.

Over the last two years, Angus Carers Centre has seen unpaid carers self-isolating due to fear of contracting the virus and passing it on to their cared-for person,



their support networks have disappeared, yet they persevere and show incredible resilience and determination to continue looking after the ones they care for.

Research suggests that the need to identify and provide support to unpaid carers before they reach crisis point is more urgent than ever before, with the nature and level of caring support significantly rising due to the pandemic.

Angus Carers Centre's internal data, official statistics and findings from participatory reflective sessions, suggest that our rural communities (approximately 40% of Angus) as well as people with protective characteristics (eg Black, Asian and Minority Ethnic (BAME) populations) are disproportionately disengaged from our services and miss out on personal, economic, social, technological, environmental and legal opportunities to realise their potential, whilst being most in need.

Independent  
advocacy supports  
people to have  
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in all matters  
relating to them.



## What services are available locally?

Currently, in the Angus area, there is a mix of advocacy provision which is supported by AHSCP and Angus Council. This includes independent advocacy organisations, **Angus Independent Advocacy** and **Who Cares? Scotland** together with two other specialist agencies; **Parent to Parent** and **Angus Carers Centre** who provide advocacy support as well as other services.

### **Angus Independent Advocacy (AIA)**

Angus Independent Advocacy are members of the Scottish Independent Advocacy Alliance.

AHSCP commission Angus Independent Advocacy to provide services to adults those who have a right to independent advocacy if they:

- are affected or are at risk of being affected by the Mental Health (Care and Treatment) Scotland Act 2003
- have a mental illness
- have dementia
- have learning disabilities
- are frail and older
- have an acquired brain injury

and:

- they are unable to act for themselves
- have no one to act for them
- are at risk of being ignored, exploited or abused

AIA also receive funding from Angus Alcohol and Drugs Partnership (ADP) & Angus Councils Children, Families and Justice services to provide support to:

- children & young people
- individuals affected by substance use
- families (parents affected by processes such as child protection)

### **Angus Carers Centre**

Angus Carers Centre supports all unpaid young and adult carers from all walks of life across Angus. It is a relationship and rights-based charity working with local private, public and third sector organisations. Angus Carers Centre aims to:

- ensure that carers are recognised and supported as expert care partners
- support carers to have a life outside of caring
- improve carers mental health and well-being
- support carers to address their financial needs
- ensure that young carers are able to maximise their full potential and are supported in their role as young carers

Angus Carers Centre is commissioned by AHSCP to support carers from aged 8 and upwards. Based in Arbroath, they provide a wide range of information and independent advice to support carers. They adhere to advocacy principles however they are not commissioned specifically to deliver any advocacy support by Angus HSCP.

### **Who Cares? Scotland**

Who Cares? Scotland is a national voluntary organisation working with care experienced young people and care leavers across Scotland and is a member of the Scottish Independent Advocacy Alliance. They are based in Glasgow, with a regional office in Dundee and are active in the Angus area. Angus Council commission Who Cares? Scotland to provide independent advocacy and participation service for children and young people who are care experienced up to the age of 26.

### **Parent to Parent**

Parent to Parent is a voluntary organisation based in Dundee who provide services across Tayside to supports parents of children with additional support needs, whether physical, learning, sensory or behavioural which is associated with the disability. They also offer support and advocacy to parents/carers and young people. They also have a robust conflict of interest policy and follow principles of the Scottish Independent Advocacy Alliance.

Angus Council commission part-funding for a Family Support Worker and a Young Person's Advocacy Worker. These workers represent and/or support parents/carers of children and young people with additional support needs to have a voice at meetings and appointments. Equally the Young Person Advocacy Worker represents and/or supports the children and young people to have a voice when decisions are being made about their lives. They will support and prepare a young person for school reviews, children's hearings and/or help them to speak for themselves and provide advocacy when necessary.

The table below shows at a glance the available advocacy provision:

Access factor	Independent Advocacy (SIAA Member)		Advocacy Support	
	Angus Independent Advocacy	Who Cares? Scotland*	Parent to Parent**	Angus Carers Centre
Independent Advocacy	✓	✓	✗	✗
Age range	From infancy	Up to 26 yrs	Birth to 18 yrs	From 8yrs upwards
Mental health illness	✓	✓	✓	✗
Learning difficulties	✓	✓	✓	✗
Dementia and related conditions	✓	✗	✗	✗
Carers	✗	✗	✓	✓
Care experienced children and young adults	✓	✓	✓	✗
Non-care experienced children	✓	✗	✓	✗
Children’s hearings	✓	✓	✓	✗
Family support	✓	✗	✓	✓
Substance use	✓	✗	✗	✓

\* Who Cares? Scotland will provide support to any care experienced child or young person with any of the vulnerabilities listed

\*\*Parent to Parent supports the parents of children with the vulnerabilities listed

Although within Angus there are no explicitly commissioned services to support those who are homeless or an asylum seeker, they can access independent advocacy services should they have a mental disorder.

With the implementation of the homelessness prevention legislation in 2023, public bodies will have a responsibility to prevent homelessness. Homelessness prevention pathways will be embedded which will include access to independent advocacy services for those who require this.

## What feedback to do we have?

Within any organisation, the voice of lived experience is invaluable in gaining and understanding of how the services provided truly impact on people's lives and meet their needs. Each provider has their own methods of obtaining feedback from those who access their services. Here are some examples of feedback they have received.

“ You have been an enormous support and brilliant during this difficult period. Just knowing you were on my side made a huge difference to my time in hospital. ”

Advocacy Partner, AIA

“ It's great knowing that we can turn to Angus Carers Centre and especially my worker who always has the wellbeing of the carer in mind. Thank you very much for all your help. ”

Carer, Angus Carers Centre

“ I am happier at school, I feel settled, I can talk to my teachers better. I have a better relationship with my mum & gran. ”

“ She has kept me sane and helped me be heard at meetings. She is very honest and knows her job. Thank you for letting me have her. ”

Parent from - Parent to Parent

“ I honestly would recommend advocacy to anyone who lacks confidence to say their views. Because of my worker, I gained confidence to express my views either written down or speaking. ”

Service User, Angus Carers Centre

## What community engagement activities have taken place?

AHSCP and AC have a legal obligation to engage with the public to shape services of the future. Independent advocacy and advocacy support play a vital role in this to remove communication barriers and allow people to have their voice heard and interests protected.

The need for independent advocacy services is becoming more evident as services improve and undergo redesign as well as developing new legislations/guidance. It is therefore important to raise awareness of independent advocacy services, and advocacy support available and how to access these. Each provider will raise awareness with communities in a number of ways.

Since March 2020, engagement events and marketing have been significantly impacted due to the COVID-19 pandemic. No face-to-face events could take place resulting in providers having very few means to share information with the public and service users.

**Angus Independent Advocacy** has held community engagement activities to raise awareness of their service including:

- on-line and in person awareness raising sessions on children’s independent advocacy to stakeholders
- on-line lunchtime learning sessions on independent advocacy via Protecting People Angus
- engagement events at shopping centres, schools, colleges, libraries, care homes
- talks to local groups and charities
- information sessions for newly qualified social workers and students
- open days at AIA offices
- newsletter, rebranded leaflets, and website
- short films on advocacy
- attendance at the Promise Hangouts (care experienced young people)
- recruitment campaigns for Citizen Advocacy
- meeting one to one with new workers in the third sector
- awareness raising on an ad-hoc basis, i.e. phone calls when the referrer does not have an understanding of what independent advocacy is and the reason they are referring
- during the recruitment process Development Workers engage with members of the community having on the spot conversations about Citizen Advocacy

**Who Cares? Scotland** continually hear from children and young people about how important independent advocacy has been to them, by making sure that they are heard and by helping them feel that they have someone on their side who is just for them. They use a tool for ongoing feedback from children and young people which helps them reflect on how their voice has been heard and acted upon, whether they understand their rights and how they feel independent advocacy has benefitted them.

They also:

- offer to visit to Social Work teams to talk about the benefits of independent advocacy
- Who Cares? Scotland website which includes online referral form and other information about independent advocacy, membership and participation activities
- awareness raising postcards are distributed locally
- in 2023 will be holding virtual awareness raising sessions for corporate parents
- independent advocates visit places where children are living in group settings to talk to them about advocacy and their rights
- involvement in the Promise Hangout
- info sessions for students/newly qualified staff

**Parent to Parent Ltd** is committed to ensure that everyone that accesses our support and services are at the centre of everything we do.

Participation and engagement is not achieved by standalone pieces of work such as surveys, one off consultations, or attendance at meetings. It is an ongoing process that demonstrates the commitment to hearing and listening, recognising and acting on the voices, stories, contributions and ideas of people to improve pathways and outcomes for the health and wellbeing of the individuals that access our support and services. It is fundamentally about creating the conditions for an open and honest dialogue that leads to and supports trust, confidence and respect.

**Angus Carers Centre** is the lead organisation for participatory and meaningful engagement with unpaid carers in Angus. Over the last six months, Angus Carers Centre has been developing a variety of engagement opportunities aimed at shaping the new Local Carers Strategy:

- one-to-one interviews with unpaid carers from urban and rural areas
- engagement surveys
- local community café style workshops in Forfar, Arbroath, Monifieth, Montrose and Kirriemuir
- online focus groups
- analysis of internal recording systems including testimonials and observations from carers



## What are our plans for the future?

We know we still have some work to do across our communities. We aim to make independent advocacy services accessible to children, young people and adults who have a right to this support.

### **Our priorities for 2023-2026 are:**

- to raise the profile of independent advocacy services and advocacy support and how to access these across Angus
- ensure those who have a right to independent advocacy can access services and that those services meet their individual needs
- ensure all commissioned independent advocacy services are members of the SIAA and deliver services in line with principles and standards
- ensure everyone entitled to advocacy is involved in their own care with shared decision making

### **How will we know what we are doing is right?**

Both AC and AHSCP meet regularly with all providers to review service delivery and future plans including discussion on financial position, unmet need and the voice of lived experience.

Independent advocacy service providers, and those who provide advocacy support, regularly gather feedback from service users. This feedback aids to shape services of the future.

AIA use an outcome tool which is completed at the start and end of an individual's advocacy partnership. They also use a feedback survey which advocacy partners can complete confidentially online or by using a QR code. This survey is also linked to the above outcomes and explores what is working well, what changes have happened because of advocacy support and what could work better.

Angus ADP will be continually gathering experiential information from people who access Medical Assisted Treatment (MAT) services, their family/carers and service providers. The survey includes questions on whether people were informed of independent advocacy services. Referrals to AIA and Angus Carers Centre are monitored via Service Specification Agreements.

Who Cares? Scotland use a national IT system to record all information relevant to an advocacy relationship. This provides detailed metrics on outcome of advocacy

for children and young people. This information is provided regularly via contractor reports.

### **Governance**

Children, Families and Justice Directorate keep oversight of the local provision of advocacy for children and young people. The provision of advocacy for Children's Hearings is part of a national contract and is not managed locally however there is good local level partnership working between advocacy partners and Angus Council. Similarly, AHSCP maintain oversight of advocacy for Mental Health, and this includes arrangements for children who meet the criteria. There are good local level partnership arrangements to share information and identify unmet need. Advocacy partners are also represented on the Angus Integrated Children's Services Partnership and routinely report on key themes emerging from individual and collective advocacy as well as national developments.

For adult services, AHSCP will provide governance through the Executive Management Team and Strategic Planning Group as a key forum to explore advocacy issues.

The quarterly contract monitoring meetings provide a governance structure around delivery of commissioned services by AC and AHSCP for children and adult services respectively.

Each service provider has their own governance structure to ensure national standards are being met and set outcomes achieved.

The Advocacy Planning Group (see [Appendix 2](#) for membership) meet at regular intervals throughout the year. The group has responsibility for progression and delivery of the delivery plan detailed in [Appendix 3](#).

## Appendix 1 Adult Independent Advocacy Provision Legislation

[The Adults with Incapacity \(Scotland\) Act 2000](#) was introduced to protect individuals who lack capacity to make all or some decisions for themselves. The Act supports the individual's family and carers in managing and safeguarding the individual's welfare and finances. The Act also aims to support an individual's involvement in making decisions about their own lives as far as they are able to do so.

[The Adult Support and Protection \(Scotland\) Act 2007](#) places a duty on local authorities to support and protect adults who may be unable to safeguard themselves by introducing multiagency Adult Protection Committees in each council area. These committees are made up of senior staff from the council, NHS, police and third sector organisations.

[The Mental Health \(Care and Treatment\) \(Scotland\) Act 2003](#) placed a duty on local authorities and health boards to collaborate to ensure the availability of independent advocacy services in their area. The Act gives everyone with a mental disorder the right to access independent advocacy support (adults, children and young people).

[The Mental Health \(Scotland\) Act 2015](#) adds a requirement for health boards and local authorities to provide the Mental Welfare Commission with information about mental disorder advocacy services available, how these services have been provided over the last two years and plans in place to provide services over the next two years. The information provided from each health board/local authority is collated into [The Right to Advocacy Report](#).

The Carers (Scotland) Act 2016 requires each local authority to establish and maintain an information and advice services which must provide information and advice in respect of advocacy for carers.

The [Social Care \(Self-directed Support\) \(Scotland\) Act 2002](#) sets out the principles and standards for delivering self-directed support (SDS) across Scotland. Standard 1 of the framework sets out the need for people to be offered independent advice, support and advocacy to have choice and control of their social care and support to exercise their human rights.

The Scottish Government's expectation set out in the [Independent Advocacy: Guide for Commissioners \(December 2013\)](#), is that every health board and local

authority will have a local strategic advocacy plan developed, outlining services provided in their area for adults, children and young people.

The [Medication Assisted Treatment \(MAT\) Standards Scotland](#) (Standard 8) outlines the need for independent advocacy support for those who are experiencing problematic drug use. Those with substance use issues may find it harder to have their voice heard by others, to stay engaged with services, to exercise their rights or to know where to turn to resolve issues. All people should have access to independent advocacy and support for housing, welfare and income needs, with clear pathways to support people through their recovery journey.

### **Children and Young People Independent Advocacy Provision Legislation**

The [Mental Health \(Care and Treatment\) \(Scotland\) Act 2003](#) placed a duty on local authorities and health boards to collaborate to ensure the availability of independent advocacy services in their area. The Act gives everyone with a mental disorder the right to access independent advocacy support (adults, children and young people).

The need for high quality independent advocacy services for children and young people is being increasingly recognised across Scotland. The Government's approach to supporting children and young people ([Getting It Right For Every Child \(GIRFEC\)](#)) highlights the importance of children being placed at the centre of services and being listened to when decisions are being taken which affect them. It is therefore important that children, young people and their families are supported to understand what help is possible and what their options are.

[Section 27 of the Children's Hearings \(Scotland\) Act 2011](#) relates to children having the opportunity to express views, section 122 describes the provision and availability of specialist advocacy services in order to support children in their involvement in a children's hearing. The National Practice Model for Advocacy in The Children's Hearings informs of the elements required for a sustainable model of advocacy to realise the policy intention of section 122.

Article 12 of the United Nations Convention on the [Rights of the Child \(UNCRC\)](#) states that every child has the right to say what they think in any matters affecting them and to have their views taken into account. Advocates support children and young people who, for whatever reason, would not otherwise be able to share their views. All of the child's rights are underpinned by four principles, of which advocacy plays an important role;

- that all the rights guaranteed by the UNCRC must be available to all children without discrimination of any kind
- that the best interests of the child must be a primary consideration in all actions concerning children
- that every child has the right to live, survival and development
- that the child's view must be considered and taken into account in all matters affecting him or her

The [Education \(Additional Support for Learning\) \(Scotland \) Act 2009](#) places a legal duty on Scottish Ministers to provide an advocacy service on request and free of charge to families and young people who make a reference to the Additional Support Needs Tribunal (Health and Education Chamber of the First Tier Tribunal for Scotland) against an education authority’s decision regarding the provision of educational support.

In 2021 the [National Independent Care Review report \(The Promise Plan 21-24\)](#) was published. The Promise has 5 foundations, which provide clarity of vision, a shared purpose and a clear direction for care experienced children and young people. The first of these foundations is voice: Children must be meaningfully heard and listened to in all decisions about their care.

The [Social Care \(Self-Directed Support\) \(Scotland\) Act 2013](#) provides a variety of options for the provision of support. It requires local authorities to ensure that, where possible, the child or young person in need of support has the opportunity to make informed choices and the options available for the delivery of support.

## Appendix 2 Key Stakeholders

The following key stakeholders collaborated to create this Advocacy Strategic Framework and are members of the AHSCP Advocacy Planning Group.

- Programme Manager - AHSCP
- Planning Officer - AHSCP
- Planning Officer - AHSP (Carers)
- Chief Executive Officer - Angus Independent Advocacy
- Senior Practitioner - Children’s Services, Angus Council
- Team Leader - Procurement, Angus Council
- Development Officer - Mental Health and Wellbeing, AHSCP
- Contracts Officer - Procurement, Angus Council
- Advocacy and Participation Manager - Who Cares? Scotland
- Head of Service - Parent to Parent
- CEO, Angus Carers Centre - Angus Carers Centre
- Senior Planning Officer - Angus Alcohol and Drug Partnership

We recognise that we do not have representation from anyone with lived experience within the key stakeholders at present. This has been reflected in the delivery plan (see [Appendix 3](#)) with a view working in equal partnership going forward.

## Appendix 3 Delivery Plan

Action	Responsible Lead	Timescales			Progress Measure Tool
		2023	2024	2025	
<b>Voice of Lived Experience</b>					
People with lived experience have the opportunity to be involved to influence and shape future advocacy service design in equal partnership with the Advocacy Planning Group	- AHSCP - Angus Council	✓	✓		- Key stakeholders list
<b>Unmet Needs</b>					
Carry out formal strategic advocacy needs assessment across Angus <ul style="list-style-type: none"> <li>• Mental health</li> <li>• Children and young people</li> <li>• Carers</li> </ul>	- AHSCP - Angus Council	✓	✓		- Feedback - Analysis report
<b>Commissioning</b>					
Explore options for joint commissioning of independent advocacy services (ensuring they are members of the SIAA)	- AHSCP - Angus Council	✓	✓	✓	- Angus Advocacy Planning Group - Performance reports to AHSCP - Performance reports to Angus Council
<b>Transition</b>					
Create pathways for seamless transition from children to adult services	AHSCP Angus Council	✓	✓	✓	- Feedback - Angus Advocacy Planning Group

Action	Responsible Lead	Timescales			Progress Measure Tool
		2023	2024	2025	
<b>Performance</b>					
Collect data on referrals from Angus	<ul style="list-style-type: none"> <li>- AIA</li> <li>- Parent to Parent</li> <li>- Who Cares? Scotland</li> <li>- Angus Carers Centre</li> </ul>	✓	✓	✓	<ul style="list-style-type: none"> <li>- Performance reports to AHSCP</li> <li>- Performance reports to Angus Council</li> </ul>
<b>Outcome Measures</b>					
Measure and provide data in line with national outcomes set out within SIAA toolkit	<ul style="list-style-type: none"> <li>- AIA</li> <li>- Parent to Parent</li> <li>- Who Cares? Scotland</li> <li>- Angus Carers Centre</li> </ul>	✓	✓	✓	<ul style="list-style-type: none"> <li>- Performance reports to AHSCP</li> <li>- Performance reports to Angus Council</li> </ul>
<b>Training</b>					
Identify common training delivered by all providers and opportunities for shared learning	<ul style="list-style-type: none"> <li>- AIA</li> <li>- Parent to Parent</li> <li>- Who Cares? Scotland</li> <li>- Angus Carers Centre</li> </ul>	✓	✓	✓	<ul style="list-style-type: none"> <li>- Angus Advocacy Planning Group</li> </ul>
<b>Raising Awareness</b>					
Induction pack for new AHSCP and Angus Council staff to include information on advocacy	<ul style="list-style-type: none"> <li>- AHSCP</li> <li>- Angus Council/ Advocacy Providers</li> </ul>	✓	✓		<ul style="list-style-type: none"> <li>- Induction packs</li> </ul>
Web pages will include information on advocacy	<ul style="list-style-type: none"> <li>- AHSCP</li> <li>- Angus Council</li> </ul>	✓			<ul style="list-style-type: none"> <li>- Angus HSCP website</li> <li>- Angus Council website (Protecting People)</li> </ul>
The AHSCP Strategic Commissioning Plan will include information on advocacy	<ul style="list-style-type: none"> <li>- AHSCP</li> </ul>	✓			<ul style="list-style-type: none"> <li>- Angus HSCP Strategic</li> <li>- Commissioning Plan</li> </ul>
Information on advocacy will be provided to Locality Improvement Groups	<ul style="list-style-type: none"> <li>- AHSCP/LIG Leads</li> </ul>	✓	✓	✓	<ul style="list-style-type: none"> <li>- Angus Locality Improvement Group minutes</li> </ul>



Action	Responsible Lead	Timescales			Progress Measure Tool
		2023	2024	2025	
Raise awareness of organisation with the public	<ul style="list-style-type: none"> <li>- AIA</li> <li>- Parent to Parent</li> <li>- Who Cares? Scotland</li> <li>- Angus Carers Centre</li> </ul>	✓	✓	✓	<ul style="list-style-type: none"> <li>- Contract monitoring meetings</li> <li>- Feedback</li> </ul>
<b>MAT Standards</b>					
Staff should have training to understand the role of independent rights-based advocacy and have access to rights-based and health inequalities training	- Angus ADP	✓	✓	✓	- Angus Alcohol & Drug Partnership – MAT Governance Group
Staff and management should connect with collective advocacy groups to ensure that the voices of people with lived and living experience are embedded in service change and development	- Angus ADP	✓	✓	✓	- Angus Alcohol & Drug Partnership – MAT Governance Group
ADPs, planners and service managers should monitor referrals to independent advocacy	- Angus ADP	✓	✓	✓	- Angus Alcohol & Drug Partnership – MAT Governance Group
Services should have established housing, welfare and independent advocacy referral pathways for all people	- Angus ADP	✓	✓	✓	- Angus Alcohol & Drug Partnership – MAT Governance Group

## Appendix 4 Useful Links & Contacts

### Angus Independent Advocacy

69 High Street  
Arbroath DD11 1AN  
T: 01241 434413  
[www.angusindadvocacy.org](http://www.angusindadvocacy.org)

### Angus Carers Centre

8 Grant Road  
Ground Floor  
Arbroath DD11 1JN  
T: 01241 439157  
[www.anguscarers.org.uk](http://www.anguscarers.org.uk)

### Angus Living Life Well Improvement Plan LLW Engagement Document

**Children's Hearings** [www.hearings-advocacy.com](http://www.hearings-advocacy.com)

### Locality Locator

Locality Locator – by Voluntary Action Angus ([www.vaalocalitylocator.scot](http://www.vaalocalitylocator.scot))

### Parent to Parent

Ardler Clinic  
Turnberry Avenue  
Dundee DD2 3TP  
T: 01382 817558  
E: [trudy.doidge@parent-to-parent.org](mailto:trudy.doidge@parent-to-parent.org)

### VoiceAbility

T: 0300 303 1660  
[www.voiceability.org](http://www.voiceability.org)

### Who Cares? Scotland

40 Wellington Street  
Glasgow  
G2 6HJ  
T: 0141 226 4441  
[www.whocaresScotland.org](http://www.whocaresScotland.org)