

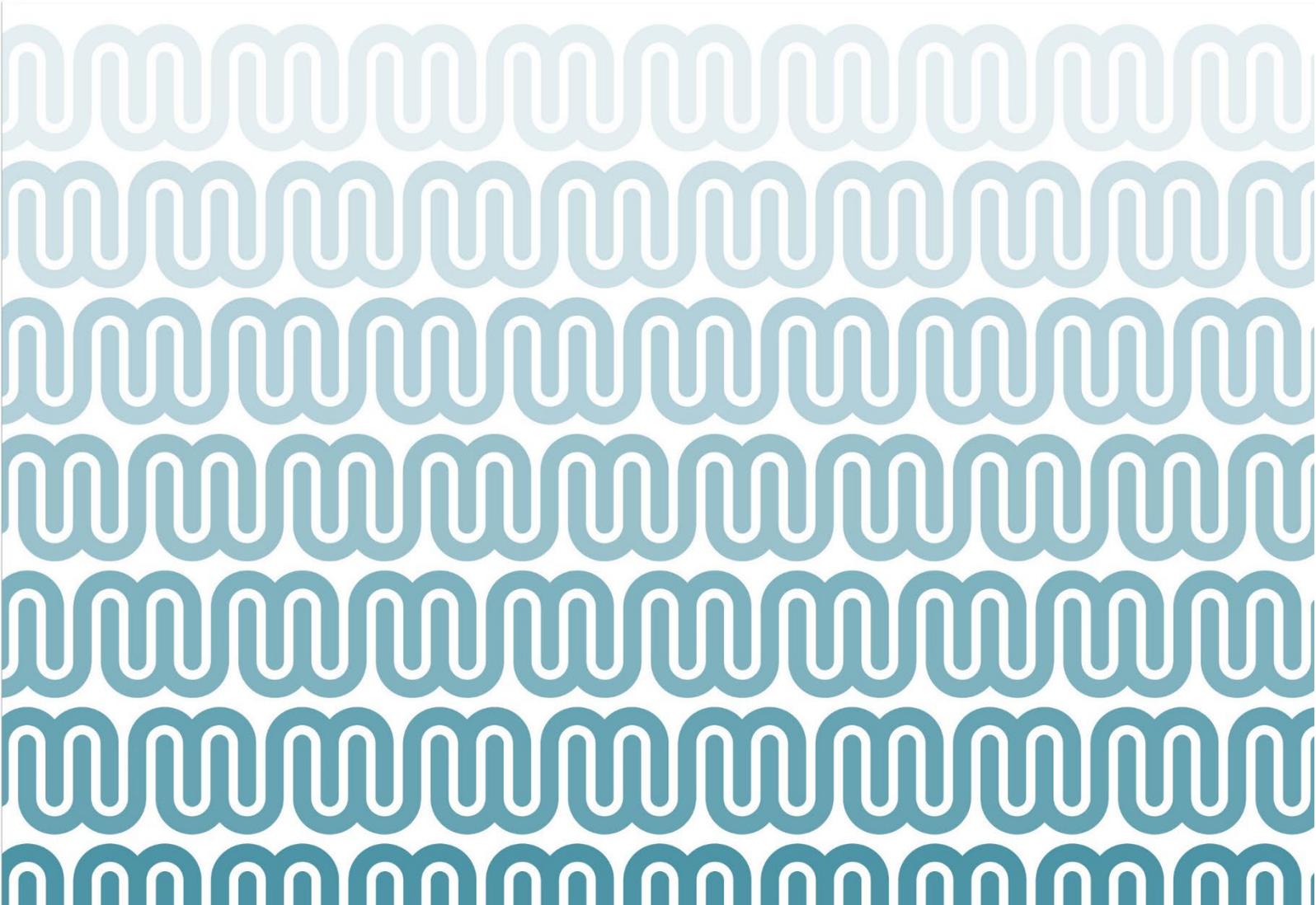


mental welfare
commission for scotland

Appendix to: The right to advocacy

Corporate report

January 2026



Appendix 1

COLLATED SUBMISSIONS FROM EACH AREA

No	Board	Local Authority	Respondent (HSCP)	Page No
1	Ayrshire & Arran	East Ayrshire	East Ayrshire	4
2		North Ayrshire	North Ayrshire	18
3		South Ayrshire	South Ayrshire	35
4	Borders	Borders	Borders	51
5	Dumfries & Galloway	Dumfries & Galloway	Dumfries & Galloway	65
6	Fife	Fife	Fife	82
7	Forth Valley	Clackmannanshire	Clackmannanshire & Stirling	105
8		Falkirk	Falkirk	121
9	Grampian	Aberdeen city	Aberdeen city	136
10		Aberdeenshire	Aberdeenshire	150
11		Moray	Moray	164
12	Greater Glasgow & Clyde	East Dunbartonshire	East Dunbartonshire	178
13		East Renfrewshire	East Renfrewshire	199
14		Glasgow	Glasgow	213
15		Inverclyde	Inverclyde	227
16		West Dunbartonshire	West Dunbartonshire	242
17		Renfrewshire	Renfrewshire	256
18	Highland	Argyll and Bute	Argyll and Bute	270
19		Highland	Highland	285
20	Lanarkshire	North Lanarkshire	North Lanarkshire	301
21		South Lanarkshire	South Lanarkshire	315
22	Lothian	Edinburgh	Edinburgh	330
23		East Lothian	East Lothian	346
24		West Lothian	West Lothian	363
25		Midlothian	Midlothian	377
26	Orkney	Orkney	Orkney	391
27	Shetland	Shetland	Shetland	405
28	Tayside	Angus	Angus	419
29		Dundee	Dundee	433
30		Perth and Kinross	Perth and Kinross	450
31	Western Isles	Western Isles	Western Isles	465

Mental Health (Scotland) Act 2015 Advocacy Duty

The Mental Health (Care and Treatment) (Scotland) Act 2003 states that any person with mental illness, learning disability, dementia and related conditions (“mental disorder”) has a right to access to independent advocacy. It places a duty on NHS Boards and Local Authorities to work together to make sure that independent advocacy services are available in their areas, and to take appropriate steps to ensure that those people have the opportunity of making use of these services.

The Mental Health (Scotland) Act 2015 adds a requirement that Health Boards and Local Authorities provide the Mental Welfare Commission with information about mental health, learning disability or dementia advocacy services, about how services have been provided over the past two years, and about plans in place to provide services over the next two years. Please note that this requirement relates to advocacy provision in respect of **children, young people and adults**.

Advocacy services can include the following:

- **Independent Advocacy**

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, and ensuring that an individual’s human rights are recognised, respected, and secured.

- **Collective Advocacy**

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.

Experiences of this shared interest can be discussed openly and in a format that suits all. This may mean holding sessions via email, skype, but ideally in a physical setting.

Independent collective advocacy uses the same principles as individual independent advocacy and applies those to a group setting.

- **Citizen Advocacy**

Citizen Advocacy aims to recognise, promote, protect and defend the rights, welfare and the interests of people with intellectual disabilities who are vulnerable and/or at risk of abuse, neglect and/or social isolation.

It does so by establishing and supporting one-to-one relationships between a person with a disability (protégé), who is vulnerable and has unmet needs in one or more important areas of their lives; and a responsible citizen who is resourceful and principled, free from conflict of interest, and who makes a personal freely given commitment to protect the protégé’s interests as if they were their own. This support may take many forms, from spokespersonship to emotional and material support.

Information Gathering

The attached questionnaire was part of the information-gathering process which the Commission put in place in 2017, in relation to the statutory duty of NHS Board and Local Authorities. We are sending a questionnaire to NHS Boards, Health & Social Care Partnerships (HSCP) and Local Authorities, asking for information about advocacy services commissioned in each area for children, young people and adults.

We are seeking information on:

1. Service provision from the previous two years 1 April 2023 – 31 March 2025
2. Plans in place for the next two years 1 April 2025 – 31 March 2027

Please liaise with partner agencies to ensure **only ONE response** is completed for each NHS Board, HSCP and Local Authority area (depending on local arrangements).

Completed surveys: Parts 1, 2 and 3 should be returned to the Commission by email to julie.oneill2@nhs.scot by **Friday, 4 July 2025**.

Please note that all survey responses will be published in full on the Mental Welfare Commission's website at the end of the year.

Thank you for taking the time to complete our survey. If you have any questions or further information, please contact julie.oneill2@nhs.scot

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

Advocacy provider organisations were key partners in the Plan's Development Group. Advocacy providers also attend governance meetings where the draft Plan was discussed and subsequently approved. Engagement to inform the Plan was also held at East Ayrshire Advocacy Services Annual Conference.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

An [Engagement Report](#) was developed to detail the feedback and was presented alongside the Plan for approval at the Integration Joint Board.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

This service is provided as part of the contract with East Ayrshire Advocacy Service.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Awareness sessions are taking place, and we are linking in with our partner organisations both statutory and voluntary to ensure that up to date information is shared. Over the last quarter we have attended the LGBT+ Dementia & Ageing Resource launch, HMP Kilmarnock Health & Wellbeing Day, and ASP Week activities and events.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Private healthcare facilities outwith EA: this isn't something we have come across very often but would refer to the local advocacy organisation if they were detained under the Mental Health Act. On a few occasions we have visited people, in somewhere like Leverndale for example (not private but outwith the area), to do a handover with the local advocate

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Through the provision of this Service, the Provider shall achieve the following outcomes:

- Improve the quality of life across our communities.
- Older people are supported to live independently in the community.
- Older people, vulnerable adults and their carers supported, included and empowered to live the healthiest life possible.
- Reduce the impact of multiple deprivation and poverty on the health & wellbeing of the most vulnerable individuals and communities.
- Equality of opportunities, quality and accessibility and early intervention/prevention.
- Protection of children and the safety of vulnerable adults, individuals and families promoted.
- Alcohol and drug related harm reduced.
- Community capacity, spirit and cohesion developed.
- Active healthy lifestyles and positive behaviour change promoted.

This list is not exhaustive.

Monitoring reports are submitted and reviewed on a quarterly basis.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review

- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

East Ayrshire Advocacy Service – 1055 new referrals April 2024-March 2025

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

We are prioritising our input in an effort to target those who feel marginalised, particularly those who are subject to legislation. Vulnerable individuals and families continue to be supported to have their human, legal and other rights protected and safeguarded through advocacy intervention, when legislation procedures are being considered such as Mental Health Act, Adults with Incapacity Act, Adult Support and Protection Act and Child Protection.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

A new service user feedback approach to monitor service provision is currently under development.

Currently, a manager contacts people who have used advocacy services to gain their views. This is carried out by telephone and via comment cards.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP

- No monitoring
- Other (please specify)

We have a feedback/complaints policy which is monitored at monthly management meetings, and the Advocacy Service's Board have ultimate responsibility/oversight.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Awareness sessions are taking place and we are linking in with our partner organisations both statutory and voluntary to ensure that up to date information is shared.

We are currently planning a series of awareness events and will be seeking invites to team meetings across the Health & Social Care Partnership and beyond to clarify referral pathways and address continued issues around inappropriate referrals. We have been tracking sources of inappropriate referrals and will use this to target awareness sessions and ensure all referral partners are aware of our referral criteria, with the ultimate aim of reducing time/resources spent dealing with such inappropriate referrals.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

The HSCP do not commission advocacy for children and young people placed out with the authority. However, the expectation is that the service provider would have independent advocacy available as part of the care package.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

N/A

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply) N/A

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation? N/A

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services? N/A

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission? N/A

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area? N/A

2.10 Have there been any specific actions to promote the use of advocacy among staff? N/A

- Yes
- No

Please provide any further details below.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

The budget has increased due to uplifts but no actual budgetary increase has been applied over the past 2 years.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

N/A

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

One of the services provided by East Ayrshire Advocacy Services, namely the Adult and Older People's services, is available where people have mental health issues, learning disabilities or dementia but are not subject to compulsory measures under the Mental Health Act.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

N/A – we do not commission independent advocacy specifically for mental health/ learning disability. We commission independent advocacy for children and young people who are Looked After, Looked After and Accommodated, and/or going through the Child Protection process. Some of these children and young people may have mental health issues or learning disability, but the dominant issues they need advocacy for are around their care experience. The budget has remained the same for a number of years.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

N/A

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Normal duration for the advocacy journey is 8 weeks, although there is flexibility built in for more complex need.

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	1
	People with a mental health/illness related condition.	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	1
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	
	▪ Adults over 65	

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	2
	▪ Collective	
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	0

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	EAAS - Part of core funding (£366,465)
	People with learning disability	EAAS - Part of core funding (£366,465)
	People with dementia	EAAS - Part of core funding (£366,465)
	People with autistic spectrum disorder	EAAS - Part of core funding (£366,465)
	Mental disordered offenders	EAAS - £22,600
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	WCS - £52,780 p.a. EAAS - £62,000 Children's Hearings
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	
	3 years	
	4 years	1 - WCS
	5 years	EAAS - EAC Core contract 3 years + 2 x 12 month options (currently utilising one of these now)
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	EAAS - 14.6 WTE workers for all funding WCS - 1 WTE Advocacy Worker & 1 Advocacy Manager

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

[NAHSCP Advocacy Strategic Plan](#)

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

NOT APPLICABLE

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

The Advocacy Plan was developed in partnership with our advocacy partner at the time, they were invited to all meetings and helped formulate the draft and final documents.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Our advocacy partners, who had their own previous and current lived experience were partners in the development of the plan. They represented the voice and feelings of the people in which they advocated for, however, the membership of the group at the time was restricted to the managers and volunteers of the advocacy service.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

NOT APPLICABLE

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NOT APPLICABLE

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

If their ordinary residence remains as North Ayrshire, then our contracted advocacy provider would provide the advocacy service until such times as the Adult's ordinary residence transfers to another authority. **This is also applicable** for anyone placed out of area via specialist health placement, for example UNPACS placement. The arrangement for such transfers is an NHS board transfer, and therefore individuals' ordinary residence would remain unchanged.

If a person is placed in our authority out of area, we would hope that their placing area's advocacy service would follow them up; we have an agreement with private providers that for a period, care and treatment should remain with their placing authority until a formal handover and transfer of care agreed locally. Following this point, and in cases of urgent need (i.e. following/ during the use of legislative powers) our advocacy partner will review referrals on a case-by-case basis and where appropriate provide interim support. If important, linking with the placing authority advocacy service to provide support to the individual involved.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

The Provider is expected to deliver and comprehensively report on activity and Key Outcomes areas. An Annual Report and audited accounts must be made available to the Partnerships Contract Management Officer. The Annual Report will include in its scope:

- Financial – spend against contract.
- Improvement Plans and Progress.
- Issues affecting performance and plans to address.
- Changing demands and trends.
- Scottish Government and national developments which will influence demand.

The Provider will:

- Have validated tools to measure progress against outcomes.
- Develop systems that can document and collate outcomes for Advocacy Partners based on their Advocacy Service Support Agreement.
- Ensure that Advocacy Partners are engaged and committed to achieving the outcomes in their Advocacy Support Plan.

Individual Outcomes

- Individuals have a greater awareness and understanding of advocacy.
- Individuals are informed of their rights.
- Individuals are provided with the information necessary to inform decision making in a format that they understand.
- Individuals are more involved in decision making processes and decisions that affect their lives.
- Individuals have improved confidence in asking questions or raising concerns.
- Individuals are enabled to have a voice that is heard, and views understood.
- Individuals are more able to advocate for themselves.
- Individual's rights who have limited capacity are safeguarded.
- Individuals are supported to contribute to making positive change, improvements to culture and practice and challenge any discrimination.

Individuals who use the service will be involved in shaping the service and central to the development of a Quality Assurance Framework which is used to obtain stakeholder experiences of advocacy.

The Provider will work alongside Advocacy Partners and help them to identify their personal outcome to form the basis of the Advocacy Service Support Agreement, then contribute towards these in the Service that is delivered.

The Advocacy Service Support Agreement and outcomes will be agreed and assessed at quarterly intervals by the Provider throughout the delivery of the service. The Provider will have appropriate systems in place to record each outcome and progress, with appropriate supporting evidence from the advocate/key professionals involved, will be discussed.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

From our new provider starting on 1st March 2024 until 31st December 2024: “we have received 464 referrals of which 386 have converted to case work.”

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

All cases referred were responded to with the parameters set. At time of most recent reporting (December 2024) there was no waiting list for advocacy.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

There are several KPIs reportable to the HSCP regarding customer satisfaction.

KPI 10	User Feedback	
	Advocacy Partners are satisfied with the advocacy service received	95%
	Satisfaction reported from Advocacy Partners accessing the service/their representative that they feel listened to and involved decision-making.	95%
	Satisfaction reported from Advocacy Partners that the advocacy service has made them more aware of their rights and how to access them.	95%
	Advocacy Partners have been provided with the information necessary to inform decision making in a format they understand.	100%

Outcomes are measured by the provider under 3 themes:

- Quality of Life
- Rights
- Voice and Control

These themes are measured upon completion of work from advocacy via questionnaires. The ways and means of delivering such feedback is being reviewed by the provider. But to date, feedback has all been extremely positive, and in keeping with the KPIs set above. Most participants have identified an improvement in each theme and provided from constructive and support feedback for the service overall.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

The H&SCP have KPIs regarding complaints:

KPI 8	Complaints Management	
	% of formal complaints resolved to the Advocacy Partner's satisfaction within the required timescales.	98%
	% of informal complaints resolved to the Advocacy Partner's satisfaction within the required timescales.	98%

The service have not received any formal complaints during the last period of reporting.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Our advocacy provider is very visible across our communities. Given they are a new provider to the area we had a very focussed mobilisation of contract plan. And they have continued to raise awareness via provider forums, newsletters, leaflets, posters etc

As a partnership we also requested that our wider commissioned providers have included details of advocacy provision within their own services.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

[2023-12-04-BM-P16-NA-CSP-Plan-2023-2026.pdf](#)

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

If a North Ayrshire CYP is placed in an out of authority placement, then our Advocacy provider would provide the advocacy support from North Ayrshire unless on occasions they are placed within an authority where the Advocacy provider also have a local provision and they would look to provide access to an advocacy worker based within the host authority area.

In terms of CYP who are within the Children's Hearing System there is a caveat in relation to the Scottish Government Children's Hearing Advocacy Service. For example if a CYP from North Ayrshire was within a placement in Dundee then the provider of advocacy support for children's hearing would be the provider of the national service in Dundee but this advocacy is normally only for the hearing system and not for any looked after reviews etc (although in the areas where the advocacy provider provide the service they will cover other meetings if possible depending upon service capacity).

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Outcomes

The service will follow an Outcomes model using an outcome approach based on the Getting it Right for Every Child (GIRFEC).

The child or young person will choose and agree an achievable number of options from the following the GIRFEC wellbeing indicators:

Safe	<ul style="list-style-type: none"> ▪ Feel safer ▪ Feel more secure ▪ Free from bullying ▪ Reduction in level of risk/harm ▪ Able to report safety concerns/complaints ▪ Not exposed to domestic violence/abuse
Healthy	<ul style="list-style-type: none"> ▪ Received necessary health care. ▪ Improved mental health and well-being. ▪ Ability to express feelings appropriately.
Achieving Nurtured	<ul style="list-style-type: none"> ▪ Learn advocacy and associated skills. ▪ Improved self esteem
Active	<ul style="list-style-type: none"> ▪ Improved communication skills
Respected	<ul style="list-style-type: none"> ▪ Contribute to planning and decision making. ▪ Views and opinions voiced and acted upon
Responsible	<ul style="list-style-type: none"> ▪ Increased awareness of rights
Included	<ul style="list-style-type: none"> ▪ Access to information on health, rights, or support needs

Outcomes will be agreed and assessed at regular intervals, taking into account the particular circumstances of each individual child or young person, by the Provider throughout the delivery of the Service to the child or young person. The Provider will have appropriate systems in place to record each Outcome and progress, with appropriate supporting evidence from the advocate/key professionals involved with the child/young person, will be discussed at reviews.

The Provider will have age appropriate systems in place to ensure that the child or young person is actively involved in their assessment, review, and the overall process of advocacy.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

Between 1st April 2024 and 31st March 2025, a total of 244 children and young people received advocacy support. 46 of those children and young people had a mental illness, leaning disability or related condition.

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

KPI 10	User Feedback	
	Children/Young People and their family are satisfied with the advocacy service received	95%
	Satisfaction reported from children and young people accessing the service/their representative that they feel listened to and involved decision-making.	95%
	Satisfaction reported from children and young people accessing the service that they are more aware of their rights and how to access them.	95%
	Children/Young People and families have been provided with the information necessary to inform decision making in a format they understand.	100%

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

KPI 8 Complaints Management

% of formal complaints resolved to Child/Young Person/family's satisfaction within the required timescales.

% of informal complaints resolved to Child/Young Person/family's satisfaction within the required timescales.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Forums, newsletters, leaflets, posters etc

Commissioned providers have included details of advocacy provision within their own services

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

--

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

A saving was made as a result of the procurement exercise therefore, the budget decreased.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

No

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

An open referral process will be in place. Thereby, referrals sources will include, but not be limited to, the Partnership; North Ayrshire Council, NHS Ayrshire and Arran; private and third and voluntary sector service providers; and self-referral.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

Uplifted by 6.90% between 23/24 to 24/25.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

The Advocacy Service continues to offer the same service as per the contractual agreement between the organisation and the North Ayrshire Health & Social Care Partnership.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

Priority will be given to those for whom the Council and NHS Ayrshire and Arran has a statutory duty to provide independent Advocacy.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	2
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	2
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	2
	▪ Collective	2
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	2

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£495,718 Adults - £345,216 C/YP - £150,501
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	See 3.16 above
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	
	3 years	
	4 years	
	5 years	2
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	CYP - 7 ADULTS - 5

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

Significant work was carried out to ensure service providers were included in the whole journey of developing the Independent Advocacy Plan. When developing the Plan South Ayrshire commissioned 3 services to provide advocacy supports; Circles Advocacy, Barnardos Hear4U and WhoCares?Scotland.

An oversight group was established and met regularly throughout the development of the plan to steer the Plan's direction. Representatives from all 3 providers were members of the oversight group. These representatives were a link to service users and fed in valued feedback to the oversight group that ensured the plan was fit for purpose and reflective of the views of people who use advocacy services in South Ayrshire.

When the Plan was agreed members of the oversight group were invited to join the South Ayrshire Advocacy Planning Group. This group is responsible for monitoring and reviewing the progress of the Plan's delivery plan as well as continually engaging with communities to review outcomes. As we continue to foster good relations representatives from all services are members of the South Ayrshire Advocacy Planning Group.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

In preparing the plan an engagement exercise was carried out with people who use advocacy, families and carers, staff, partners, and the communities we serve. Engagement took place from the 19th of March until the 1st of May 2024 and people who use advocacy services engaged with us through a variety of methods such as an online survey, focus groups, one to one interviews and information sessions.

The survey aimed to gain an understanding of how much people know about advocacy, how those who use advocacy find the support and how advocacy can be improved in South Ayrshire.

Advocacy Service Users were offered a one-to-one interview. These interviews were offered on any day of the week at any time, including after 'work hours,' to encourage uptake. Three people, who all use Circles Network advocacy took up the offer. The interviews took place on the 26th and 29th of April in the Circles Network office in Ayr. The interview process was an informal chat.

A total of 147 people engaged throughout the process. The key themes that emerged from the engagement exercise were:

- Staff training and knowledge;
- Public awareness, and
- Information sharing/communication.

The findings from the engagement exercise informed the oversight group in developing the delivery plan. The South Ayrshire Advocacy Planning Group is now in place to monitor and review the progress of the delivery plan as well as continually engage with communities to review outcomes.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

The Advocacy Plan sets parameters for fostering relations between the Partnership and Providers to provide the best service possible for the people of South Ayrshire. Working together, the key outcomes we are hoping to achieve are:

- Raising awareness of Advocacy Services available,
- Increasing staff knowledge and training; and
- Better sharing information between services.

Contracted Adult Service:

Service Users feel they have their wishes, views and preferences considered within any decision-making process and will be encouraged to become effective self-advocates where appropriate.

Service Users have their human, legal and other rights safeguarded, and others, involved in the care and support of such Service Users will be aware of the centrality of such rights.

Service Users feel able to have some ownership and involvement in shaping the Service and will be central to the development of a Quality Assurance Framework which will be used to obtain stakeholder experiences of Advocacy Service.

Service Users feel enabled to make informed choices and decisions and shall have access to appropriate and accessible information.

The Service Provider shall raise awareness of any areas or issues that require changes to SA HSCP policies and/or practices.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

The Independent Advocacy Plan's Delivery Plan is monitored through quarterly meetings of the South Ayrshire Advocacy Planning Group in addition to the governance arrangements of going the HSCP's Performance and Audit Committee six monthly.

Contracted services are managed through Quarterly Monitoring Meetings where quarterly reports are shared. As part of monitoring providers are expected to consult with those with lived experience and report on satisfaction and any learning. Providers are required to complete a 3 yearly Quality Assurance Self Evaluation process and report.

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

If Yes, please provide the most up to date information (within the last year) provided by each organisation

From 1st April 2024 – 31st March 2025, 793 individuals accessed the Adult Service
From 1st April 2024 – 31st March 2025, 101 children and young people accessed the Children's Service

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

We ask about barriers to delivery. Neither service has a waiting list, it is a requirement that anyone who seeks advocacy is provided with advocacy.

Adults – main barrier is that increasing numbers of individuals with increasingly complex needs eg anxiety, neurodiversity, and advocacy workers spending increased time supporting individuals to attend appointments.

Children – increasing numbers of pre-5 age subject to CP procedures, therefore advocacy workers undertaking training in this area.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Providers are required to seek the views of those using their services to inform service development.

Within children's service, South Ayrshire Champions for Change undertakes independent survey (in person/telephone/Teams survey) to gauge satisfaction and learning.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

We support the provider in the promotion of their services via our own Communications Officer. The providers are expected to attend community events to raise awareness about their services and to delivery training to statutory and partner agencies to remind of legal responsibilities and role of advocacy services.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Objectives of the Advocacy Service

The main objectives of this contract are to deliver professional, independent advocacy that can:

- Develop relationships with the children, young people and their families that are based on trust and respect
- Ensure children and young people are confident their views, wishes and intentions are taken into account in the making of plans to meet their needs
- act on the issues agreed with a child or young person and not be influenced by own views or the views of others,
- help the child or young person to access the information they need,
- take immediate action on child protection concerns,
- share data with the wider children's services partnership to inform strategic planning,
- plan closures and exit strategies for children and their families responsibly, to ensure purposeful, outcome focussed and time appropriate services.

The service provider will be required to submit the following data and report quarterly the following information (a template will be provided), including but not limited to:

- number of referrals,
- source of referrals,
- waiting list details,
- referral to initial consultation within 10 days,
- number of cases completed (closed)
- number of individuals active
- delivery method and volume
- number of formal meetings attended supporting children/young people,
- number of unplanned exits from the service including reasons,
- number of sessions not kept by child / young person / family,
- number of sessions not kept by provider,
- case studies
- the voice of those using the service
- complaints and suggestions.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation

- Key performance indicators
- Other (please specify)

Quality Assurance, Champions Board Consultation

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

Service is for CP Registration, Care Experienced and Mental Health

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Service seeks views and feedback, Stories of Change, Quality Assurance, Consultation/Feedback gained by Champions Board

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

We support the provider in the promotion of their services via our own Communications Officer. The providers are expected to attend community events to raise awareness about their services and to delivery training to statutory and partner agencies to remind of legal responsibilities and role of advocacy services.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

Service is expected to provide training sessions.

Within CP1 Report, there is a prompt for workers 'has the child/YP been offered Advocacy? If not, why not'.

Within Child Plan emphasis on 'what are the child and adult's views'.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

Service is only for C/YP who are care experienced, CP, Mental Health

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	1 adult 1 c/yp
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	0
	Children & young people with ASD or ADHD	0
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	1 adult 1 child
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	2
	▪ Collective	2
	▪ Citizen	2
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	2

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	Adult(including ADP): £224,000 C/YP: £98,500
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1 service: Adult(including ADP): £224,000 Current contract expires 31/3/25 and will be tendering for a 5 year contract
	2 years	
	3 years	
	4 years	1 Service: C/YP £98,500 Contract from 1/4/25 – 31/3/2029
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	7.5

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

The stakeholder group established to progress this was paused, in the main because of key staff changes. This has now been reconvened to review and finalise the draft strategy which had been developed during 2023/24. The timescale for completion is anticipated to be up to 12 months from July 2025.

Consultation & Involvement

- 1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan**

Provider organisations will be involved in the stakeholder group.

- 1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan**

At the stakeholder meetings, agreement will be reached about how we meaningfully engage with people to best effect.

- 1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?**

Yes

No

Prisons and advocacy services

- 1.7 Do you have any prisons in your HSCP area?**

Yes

No

If No go to Q10

- 1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?**

Yes

No

If Yes, please provide details

- 1.9 Can you please outline how prisoners are informed about independent advocacy services?**

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

If patient is in England and meets criteria they are supported under the Mental Capacity Act (MCA) 2005, which affords patients advocacy support.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

People who are vulnerable, feel discriminated against, or who find it difficult to access services, have their rights protected.

People feel empowered, which will enable them to express their own needs, and make their own decisions when dealing with health, social care or legal interventions in relation to health or social care services.

People have better access to information and understanding their options in relation to services, to make their views and wishes known and making informed choices.

People have an advocacy worker speaking on their behalf when they are unable to do so for themselves.

People have their voice heard at times when they find it difficult to speak for themselves.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Due diligence completed annually – eg – annual accounts, business continuity plans, insurance certificates.

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

BIAS – 438

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

No waiting list. We have not identified any unmet need at this time.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Advocacy services ask individuals for their feedback, and this is reported within monitoring reports.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

If an urgent complaint is submitted, the provider is required to contact the commissioning authority. This will trigger further meetings as appropriate.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Leaflets/website/networking events/training linked to ASP.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

None receiving advocacy support currently. Approximately 7 children and young people may fall into this category.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Scottish Borders Council have a contract with Who Cares? Scotland to provide independent advocacy for care experienced children and young people. The service is not specifically for children and young people with mental illness, learning disability or related conditions, but they are included if they are care experienced. There are six monthly monitoring reports, though with agreement with the contracted agency an annual monitoring report was completed for 2024.

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

Who Cares? Scotland – No (zero) young people who received advocacy support were recorded as having a mental health issue.

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

There are no specific arrangements in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using Who Cares? Scotland's advocacy services other than a section on demographics and disability in the current monitoring report format. The Children and Young People's Planning Partnership are in the final stages of commissioning a new Independent Advocacy Service. Included in Outcomes for Service Users section in the draft Service Specification is the statement – "4.4. Children and Young people using the Service shall have an improvement in the quality of their lives due to the support of the service." The draft Service Specification also states "5.6. The Provider shall have age-appropriate systems in place to ensure that the Child or Young person is actively involved in their assessment, review, and the overall process of Advocacy." The service will be available for children and young people from the age of five (5) to the age of eighteen (18): whose right to independent Advocacy is covered by statute; are in receipt of social and/or healthcare services provided by the Partnership; and, to any vulnerable Child/Young person whether or not they are in receipt of health/social care services. Development of the service has involved consultation with children and young people with mental illness, learning disability and related conditions.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

Who Cares? Scotland - this is covered in six monthly monitoring reports, though there have been no complaints about advocacy services provided by Who Cares? Scotland in the last ten years.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

N/A as there is no specific service.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

N/A as there is no specific service.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Via commissioned services.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	1
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1 (aged 16+)
	Children & young people with a learning disability	1 (aged 16+)
	Children & young people with ASD or ADHD	1 (aged 16+)
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	0
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	0
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	2
	▪ Collective	0
	▪ Citizen	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	Adults £200,335 (per annum) Children - £10,560 (per annum)
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1
	2 years	
	3 years	
	4 years	
	5 years	1
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	Adults - 4 Children - 1

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

Note that in Dumfries and Galloway the HSCP, NHS and LA are all co-terminus

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

If Yes, can you please submit a copy along with your questionnaire?
Advocacy Plan published 31.03.2024 [D&G Advocacy Plan](#)

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

A short life advocacy planning group was set up to ensure all relevant stakeholders were fully involved throughout the development of the plan. The group was made up of the two providers of Independent Advocacy in Dumfries and Galloway, Commissioning officers from local authority and NHS as well as other relevant people. Of the two providers one is specific to adults, and one is specific to children. The group and the plan are a joint for adults and children.

All decisions in relation to the development of the plan were done through this group and with the support and oversight of colleagues from our local Consultation and Engagement Working Group which includes a representative from Healthcare Improvement Scotland.

Governance was provided through Partnership committees and groups across NHS and the Local Authority.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Engagement took place with people who have accessed or could access independent advocacy, Carers and people who provide independent advocacy. Opportunities to engage were available to people across Dumfries and Galloway, including all sectors of the Health and Social Care Partnership, statutory, independent sector and third sector organisations.

Support was received from third sector and statutory sector partners to create an accessible Easy Read Draft Independent Advocacy Plan.

Multiple means to get involved were offered to as wide a demographic as possible. These included

- electronically (by Smart Survey, presentations and emails)
- by phone
- in writing (hard copy documents were available on request)
- in person workshops

This engagement took place over a 12-week period from 07/12/23 – 25/02/24 and included

- Information on how to engage was shared with people, groups and organisations (through emails, Facebook posts, partner web pages, posters, and through support services such as Drug and Alcohol support, Child and Adolescent Mental Health Services and HH Prison, Dumfries)
- An online survey (with option to access hard copy) was advertised
- An Easy Read version of the draft plan was circulated
- Protected characteristic groups were directly invited to engage
- Online and phone engagement sessions were advertised
- Hard copy posters displayed
- In person facilitated sessions/workshops were offered by partners across the region

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No



20240616 EQIA
Advocacy Plan V3.pdf

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

Dumfries and Galloway Advocacy Services (DGAS) provide advocacy services when requested

1.9 Can you please outline how prisoners are informed about independent advocacy services?

During engagement for the development of the Advocacy Plan the prison was visited and a number of prisoners spoken to about Independent Advocacy. None had benefited directly from the service but had been made aware of it.
DGAS Information Posters are displayed in Health Care areas.
NHS team at HMP Dumfries contact DGAS and inform them of anyone being sectioned under the Mental Health ACT

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

The Plan aims to achieve all 6 MWC recommendations along with a range of outcomes that came out of the engagement period.

These include:

- Adult Carers are supported to access independent advocacy
- Meeting people's needs in respect of access to independent advocacy
- Encourage and support self-advocacy
- Enabling access to advocacy
- Ensure provision of effective advocacy
- Share information about independent advocacy and signpost to services
- Enabling and supporting effective advocacy
- Training and skills for services who are working with adults, children and young people who may require advocacy

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators

Other (please specify)

Data will be collected from Dumfries and Galloway Advocacy Services as part of contract monitoring in line with the Dumfries and Galloway Contract Monitoring Framework.

Monitoring feedback will be reported to the relevant Integration Joint Board Committee through the Partnership Delivery Plan pathway.

Feedback to the MWC will be carried out through the appropriate reporting process as agreed by partners.

Feedback from MWC will determine future action by the partners involved on yearly basis.

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Yes this is asked for as part of the Contract Monitoring Return. During 2024 / 2025 there were 583 people supported.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

Dumfries and Galloway Advocacy Service have advised that they will be monitoring this

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

The Service uses surveys and provides monitoring data on this as evidence in the Contract Monitoring Return as Client KPI's

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

The number and details of complaints about the service are asked for in the Contract Monitoring Return annually and discussed further at Contract Monitoring meeting.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

The provider holds awareness sessions with Social Work and NHS teams and also other services such as the Multi Agency Safeguarding Hub, Alcohol and Drug Partnership, Self-Directed Support teams, Hospital staff teams, third sector services etc. They also utilise posters, leaflets, website and social media.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

[D&G Integrated Children's Plan](#)

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Our advocacy provider supports YP who are in placements outwith the area either by staff from this region visiting or staff from the provider in the local area providing support through a reciprocal agreement.

In 2023/24 there were 13 CYP from D&G supported via advocacy however the figures do not have a breakdown of those who had a mental illness, learning disability or related condition.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

The service specification lists the following outcomes

- To ensure that young people's own views are heard and adequately represented and to empower the child/young person
 - To promote choices to young people
 - To provide advocacy, related support and information in an age-appropriate and child/young person-centred manner.
 - To provide advocacy for children and young people who have a mental disorder in compliance with the Mental Health Act.
 - To provide an independent and confidential advocacy service to include information, support and advice for Dumfries and Galloway children and young people who are or have been Looked After and Accommodated within or outwith the region.
- To develop and promote children's and young people's involvement in service planning.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

We currently complete an annual contract monitoring meeting with our advocacy provider. Prior to the meeting the provider must complete an online survey with details of activities and outcomes achieved in the past year. They must also provide details of their income/expenditure and future developments. This information is discussed in full at the meeting and both parties are provided with the opportunity to raise any issues. In between the annual contract monitoring there is frequent communication between the provider and the local authority, and the provider will regularly supply stats and up to date information about the service.

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

Yes

No

If Yes, please provide the most up to date information provided by each organisation

There is only one service in region – Barnardos – the organisation provides statistics on number of referrals, service provided but this would not include details on those services users mental health conditions.
The number of children and young people supported in 2023/24 is 59

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

The advocacy provider measures the outcomes of all CYP over a minimum of 12 weeks and this includes gathering comments, complaints and general satisfaction which is then fed back to the local authority at contract monitoring meetings. The provider also uses the tool Boardmaker to assist in communicating with CYP with learning disabilities.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Processes within Council

No monitoring

Other (please specify)

The advocacy provider has a formal complaints process and any received are monitored at the contract monitoring meetings. CYP can also raise complaints through their social worker or via the local authority complaints process.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

The advocacy provider raises awareness by engaging with social work, the children's reporter and local schools. Social Workers must ensure that advocacy is offered for each child attending a LAC review or a children's hearing.
Barnardo's attended the D&G Children's Services Sharing Practice Roadshows held across all 4 localities in 2023/24 and also presented at a Child Protection Team meeting in 2023/24
The Dumfries and Galloway Children's Services website offers a link to the Advocacy service in the A-Z of services available to CYP

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

All staff are expected to raise awareness of advocacy services for all children who are subject to Looked After child, mental health and child protection procedures.

The consideration of whether a child has an advocate or not is subject to discussion at all key meetings in which key decisions are made for a child.

Barnardo's attended the D&G Children's Services Sharing Practice Roadshows held across all 4 localities in 2023/24

The Dumfries and Galloway Children's Services website offers a link to the Advocacy service in the A-Z of services available to CYP

[Hear4U Advocacy Service Dumfries and Galloway – Support for children and families in Dumfries and Galloway](#)

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

Budget allocation is total of £176, 945.20 (Dumfries and Galloway Council - £101,016.35 and Dumfries and Galloway NHS - £75,928.850)
The Budget allocation as noted above also received an additional £15,474 for the Carers support service
In the period 2024/25 the funding from Dumfries and Galloway Council was increased from £92,871.52 to £101,016.35).

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Dumfries and Galloway Advocacy Service (DGAS) received additional funding of £15,474 per year covering the period 01.11.2023-01.11.2025. This has provided support to 60 carers. This work has been highlighted through joint working with the Carers Centre and also a podcast which has been distributed across several podcast platforms

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

The provider gives priority to those in Hospital and those coming under the MH Act including Guardianship, ASP etc.

As of 1st April 2024, criteria revised to include list below, and DGAS have additional funding that is sourced for 18–25-year-olds, unpaid Carers.

DGAS work under the following Acts:

- Mental Health (Care & Treatment) (Scotland) Act 2003
- Adults with Incapacity (Scotland) Act 2000
- Adult Support and Protection (Scotland) Act 2007

- Social Care (Self-directed Support) (Scotland) Act 2013
- Carers (Scotland) Act 2016)

They are funded to advocate for the following groups:

- Mental Health (Care & Treatment) (Scotland) Act 2003
- Adults with Incapacity (incl. Guardianship and 13ZA)
- Learning Disability
- Autism
- Adult Support and Protection
- Self-Directed Support
- Unpaid Carers
- Young People (18–25-year-old)
- Depression and Anxiety (adults only)

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

--

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

There has been no change in the last two, this is planning for retender in the next year.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

There has been no change in the last two, this is planning for retender in the next year.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

All staff are expected to raise awareness of advocacy services for all children who are subject to Looked After child, mental health and child protection procedures.

The consideration of whether a child has an advocate or not is subject to discussion at all key meetings in which key decisions are made for a child.

Barnardo's attended the D&G Children's Services Sharing Practice Roadshows held across all 4 localities in 2023/24

Our existing advocacy service provides advocacy for children subject to mental health care and treatment. Staff in health and social care can refer to our independent advocacy service. We seek a range of staff to advocate on behalf of children with a learning disability.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	Services for adults and carers are provided by one single organisation DG Advocacy Heston House Crichton Business Park Bank End Road Dumfries
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	Services for children and young people are provided by one single organisation Barnardos 7 George Street Meuse, Dumfries
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	<ul style="list-style-type: none"> ▪ All ages 	
	<ul style="list-style-type: none"> ▪ Under 18 with mental health issues, learning disability 	Barnardos provides a service to children and young people aged 16-25 Dumfries and Galloway Advocacy Service provides for adults
	<ul style="list-style-type: none"> ▪ Adults up to 65 	
	<ul style="list-style-type: none"> ▪ Adults over 65 	

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	2
	▪ Collective	2
	▪ Citizen	2
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	2

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	£192,419.20
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	£84,311
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1 -Barnardos
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	6 month initial funding to Dumfries and Galloway Advocacy Services (DGAS)
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	DGAS -9 Barnardos -10

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

NHS board-wide

HSCP

Local Authority

Jointly (please specify)

Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

Yes

No

If Yes, can you please submit a copy along with your questionnaire?

Yes, included with submission.

1.3 No, is an independent advocacy strategic plan in the process of being developed? N/A

Yes

No

If Yes please provide details of when the independent advocacy strategic plan will be completed. N/A

If No please can you advise why this is not being developed?

N/A

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

Our Advocacy service providers were consulted and involved through ongoing engagement during the planning and development of the strategy with Fife Advocacy Forum. The Advocacy Forum, which is an independent body comprising of representatives from local advocacy organisations and people with an interest in advocacy services, helps to ensure that service users and advocacy organisations have a strong say in the ongoing development of advocacy services in Fife.

Engagement activity was also carried out by Fife HSCP Participation and Engagement Team to ensure that the people who provide advocacy services across Fife had the opportunity to influence and inform the refreshed Strategy. Fifteen service provider responses were received which provided Fife HSCP with valuable information and feedback to inform the development of the Advocacy Strategy 2023 to 2026.

Service Providers were in agreement with the priorities that were established for the Advocacy Strategy.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Engagement activity was carried out with those who use advocacy services by Fife HSCP Participation and Engagement Team to ensure that those who use advocacy services in Fife had the opportunity to influence and inform the refreshed Strategy. Forty-nine service user responses were received which provided Fife HSCP with valuable information and feedback to inform the development of the Advocacy Strategy 2023 to 2026.

Most respondents agreed that advocacy support ensures that their voice is heard, helps them to speak up for themselves on matters that are important to them, and also helps them to understand their rights and entitlements. In addition to this it was agreed by some respondents that advocacy gives them a sense of belonging and supports them to get to know people in a similar situation to them and to support them to socialise.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

N/A

1.9 Can you please outline how prisoners are informed about independent advocacy services?

N/A

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Any potential advocacy requirements are discussed during the initial assessment process and where there is a need identified for independent advocacy; a referral is made to the relevant Advocacy Service. This means that an independent Advocacy Service is often in place prior to placement out with the area.

After a placement is made out with Fife, there is scope for two separate processes to be followed:

- Where an individual is placed out with Fife, (whether Scotland, or elsewhere in the UK), the allocated social worker identifies the nearest Advocacy Service in the area where the service user resides, contacts that service and requests their support. The Advocacy Service sends the invoice to the relevant Team Manager in Fife's Health and Social Care Partnership who then arranges for it to be paid.
- There are also occasions where an Advocacy Service is in place by a Fife commissioned advocacy provider at the time an individual is placed out with Fife, where appropriate, a Fife provider will continue the provision of the Advocacy Service (often remotely) until the advocacy reaches its conclusion.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

The Advocacy Strategy 2023 to 2026 aligns with the Fife Health and Social Care Partnerships Strategic Plan 2023 to 2026 and contributes to achieving the nine National Health & Wellbeing Outcomes and six Public Health Priorities for Scotland.

The Fife Advocacy Strategy aims to continue to ensure that:

- A wider range of people are eligible to receive independent advocacy, including carers.
- People can access a broad range of independent advocacy services.

- More people are aware of what advocacy is, how it can benefit them, what advocacy services are available in Fife, and how to access them.
- Local advocacy services are provided with appropriate support in order to help them develop their services in line with the strategy.

There is an expectation on the advocacy providers to consider the applicability of the Scottish Independent Advocacy Alliance's Principles and Standards for Independent Advocacy. It is expected that the service will comply with the four Principles, which are:

- Independent advocacy puts the people who use it first.
- Independent advocacy is accountable.
- Independent advocacy is as free as it can be from conflicts of interest; and
- Independent advocacy is accessible.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

	<p>Link Officers are in regular contact with their Advocacy Service Providers through attendance at board meetings and AGM's.</p> <p>Satisfaction surveys are carried out by the Advocacy Organisations and form part of the information gathered during the annual monitoring exercise completed by the Link Officer.</p>
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1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Reporting period: January 2024 – December 2024

Name of Organisation	Number of people accessing advocacy support
Include Me	14
Kindred	294
Dunfermline Advocacy	33
Barnardo's Scotland	144
Circles Network (SLA)	380
Circles Network (Contract) (up to August 2024)	980
VoiceAbility (Contract) (from September 2024)	457
Equal Voice	799
Fife Carers Centre	99
Fife Young Carers	384
People First	105

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

Additional Information:

The grant funded voluntary organisations do not have any requirements under their Service Level Agreements to report on unmet needs, there is however the opportunity at the Annual Monitoring Meeting to discuss any concerns where unmet need may arise.

Within the Contract for Professional Advocacy, unmet need is discussed at review meetings with the organisation, and it is formally reported on in both their quarterly monitoring and Annual Review reports.

Fife also has an Advocacy Forum in place where advocacy organisations are fully represented. Fife Advocacy Forum considers additional areas for development or improvement and works collaboratively with Fife Health and Social Care Partnership to identify ways to implement improvements.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

The advocacy organisations individually gather satisfaction information from people using the service in respect of the service provided, this is then looked at as part of the annual monitoring exercise carried out by Council Officers.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

The advocacy organisations individually gather complaints information in respect of the service provided, this is then looked at as part of the annual monitoring exercise carried out by Council Officers.

If an individual makes a complaint to Fife Health and Social Care Partnership about an advocacy provider, the Health and Social Care Partnership would initially refer them to the primary agency for investigation. Any response provided to an individual from the primary agency will also be provided to Fife Health and Social Care Partnership. Where an individual is not satisfied with the response provided by the primary agency, they are invited to get back in touch with Fife Health and Social Care Partnership, the complaint would then be forwarded to the Service Monitoring Officer.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Individual advocacy organisations raise awareness of their service using a variety of means. Fife Advocacy Forum have the lead for general awareness raising and utilise a variety of platforms e.g. social media, press, websites, leaflets, undertake presentations to groups, pop-up stands at local community events.

Fife Advocacy Forum held the first Fife advocacy week at the end of October 2024, running both an in person and online campaign to raise awareness about the advocacy support that is available in Fife and how to access it. A total of fifteen events took place across Fife.

'On Your Doorstep Fife' is Fife Health and Social Care Partnership's community website, the website holds information about care providers, clubs, organisations, groups and activities that are locally available in Fife. The website holds the details of all organisations that provide Advocacy in Fife along with their contact numbers and email addresses. 'On Your Doorstep Fife' is aimed at individuals who require care and support, family carers, practitioners, care providers, support workers and health staff as well as members of the public.

www.onyourdoorstepfife.org

The Well is a free community and online service offering a place where individuals can find out information and receive general advice to help them stay well and independent within their local community. This offering includes signposting to advocacy services where appropriate.

The Fife Staying Safe and Keeping Well Booklet which is available online and in paper format has been widely distributed through our partners and community networks. This booklet also includes a signpost for Advocacy support.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

Fife's Advocacy Forum have a programme of meetings with Social Care Teams to raise awareness. The Forum also provide Social Care Teams with their Advocacy in Fife Booklet which details all available services that can be referred to. The refreshed Advocacy Strategy 2023 – 2026 was also shared and promoted widely across the organisation.

Following the renewal of the Independent Advocacy Contract in September 2024, a communications plan was developed to raise awareness across Fife HSCP and our partners of the Independent Advocacy Contract service and our new contracted provider (VoiceAbility). Promotional communication took place in the form of emails to relevant service managers for dissemination, content included within our weekly Directors briefing(s) and introductory meetings where VoiceAbility attended a series of Team meetings to introduce themselves and promote their Advocacy Service(s).

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners (2013)*

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

- Yes
- No – Fife does not have an Integrated Children's Services Plan however we do have a Children's Services Plan 2023-2026 which has been provided.

2.2 If Yes, does it include independent advocacy?

- Yes - The Children's Services Plan 2023-2026 has a strong reference to the importance of children's rights which includes the provision of independent Advocacy Services for Children and Young People. Fife's Children's Service continue to embed the UNCRC in their collective work to ensure that best practice is evident across the Children's Services Partnership to promote Children's Rights.
- No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Where a Child or Young Person is placed out with their home local authority, the allocated Social Worker would ensure that the child/young person is aware of the relevant advocacy service and provide the child/young person with relevant information. The Social Worker determines if an independent Advocacy Service is required or whether the allocated Social Worker can undertake the advocacy role. Any child placed out with Fife remains a Fife child and therefore continues to have access to the Fife rights & advocacy service(s).

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Our Professional Advocacy Contract delivers advocacy support to children under 16 years who are subject to compulsory measures under the Mental Health (Care & Treatment) (Scotland) Act 2003, or are the subject of a Welfare Guardianship Application, under the Adults with Incapacity (Scotland) Act 2000.

The Contract aligns with Fife's Advocacy Strategy which supports Fife's Health and Social Care Partnerships Strategic Plan and contributes to achieving the nine National Health & Wellbeing Outcomes and six Public Health Priorities for Scotland.

The Fife Advocacy Strategy aims to continue to ensure that:

- A wider range of people are eligible to receive independent advocacy, including carers.
- People can access a broad range of independent advocacy services.
- More people are aware of what advocacy is, how it can benefit them, what advocacy services are available in Fife, and how to access them.
- Local advocacy services are provided with appropriate support in order to help them develop their services in line with the strategy.

There is an expectation on the advocacy providers to consider the applicability of the Scottish Independent Advocacy Alliance's Principles and Standards for Independent Advocacy. It is expected that the service will comply with the four Principles, which are:

- Independent advocacy puts the people who use it first.
- Independent advocacy is accountable.
- Independent advocacy is as free as it can be from conflicts of interest; and
- Independent advocacy is accessible.

In addition to this, Fife also commission an Advocacy Service from Barnardo's. The Children and Young People (Scotland) Act 2014 and the Getting it Right for Every Child policy inform the service delivery across the Children's Services Partnership in Fife to improve outcomes for children, young people and families in Fife. The advocacy brief fully encompasses the United Nations Convention on the Rights of the Child (UNCRC) and supports Children's Services to achieve some of the outcomes in relation to children's rights in the Children's Service Plan 2023 - 2026. The service delivered by Barnardo's is underpinned by the guiding principles specific to rights in the UNCRC (Articles 2, 3, 6, 12), these are:

- non-discrimination
- the best interests of the child
- right to life, survival and development
- right to express views, have them given due weight considering age and maturity

Outcomes for this service are split into two distinct groups based on the support for children and young people and service improvement/quality assurance. The outcomes are detailed below:

Outcomes for Children and Young People

- Improvement in children and young people's awareness and understanding of their rights leading to improved wellbeing
- Improvement in children and young people's confidence and ability to express/share views
- Improvement in children and young people's engagement, participation and understanding in decisions which affect them
- Improvement in children and young people's active involvement in meetings
- Improvement in children and young people's engagement with services
- Improvement in children and young people's active participation and feedback to local and strategic groups

Outcomes for Service Improvement

- Increased availability of analytical feedback of the lived experience of children and young people who are looked after
- Increased awareness of rights across the children services partnership
- Improvement in collaborative working to promote and embed children rights

All outcomes for Advocacy Services for Children and Young People are monitored annually by a Council Officer.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

Quarterly reporting

Monitoring meetings

Annual review

Service review

Satisfactory surveys

Evaluation

Key performance indicators

Other (please specify)

Link Officers are in regular contact with their Advocacy Service Providers through attendance at board meetings and AGM's.

Satisfaction surveys are carried out by the Advocacy Organisations and form part of the information gathered during the annual monitoring exercise completed by the Link Officer.

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

Yes

No – Additional detail below, however, cannot be broken down into specific mental illnesses.

If Yes, please provide the most up to date information provided by each organisation

The following information has been taken from the Annual Monitoring of grant funded organisations and the Contract Review for contractually funded Advocacy and details the number of people accessing Advocacy service(s) for the most recent monitoring period of January 2024 to December 2024.

Please note it is not possible to break this down into specific mental illnesses.

Please also note that where the actual number of people accessing a service is less than 5, the specific number has not been shown due to risk around potential identification of a specific individual.

Circles Network (Jan 2024 – August 2024) – 0

VoiceAbility (September 2024 – December 2024) – less than 5

Equal Voice - 0

Fife Young Carers - 164

Barnardo's - 144

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

The advocacy organisations individually gather satisfaction information from people using the service in respect of the service provided, this is then looked at as part of the annual monitoring exercise carried out by Council Officers. Additionally, each young person who is supported by advocacy services will have an allocated social worker, who will work closely with the young person to gather their views and feedback on the range of supports they receive.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)
-

The advocacy organisations individually gather complaints information in respect of the service provided, this is then looked at as part of the annual monitoring exercise carried out by Council Officers.

If an individual makes a formal complaint to Fife Council or Fife Health and Social Care Partnership about an advocacy provider, Fife Council or the Health and Social Care Partnership would initially refer them to the primary agency for investigation. Any response provided to an individual from the primary agency will also be provided to Fife Council or Fife Health and Social Care Partnership. Where an individual is not satisfied with the response provided by the primary agency, they are invited to get back in touch with Fife Health and Social Care Partnership, the complaint would then be forwarded to the Service Monitoring Officer.

Additionally, where a young person provides informal feedback indicating dissatisfaction with their support, their social worker will address this directly with the advocacy provider in the first instance. All types of feedback will be discussed within monitoring meetings between the Council and provider to ensure that any practice issues are appropriately addressed.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Individual advocacy organisations raise awareness of their service using a variety of means. Fife Advocacy Forum have the lead for general awareness raising and utilise a variety of platforms e.g. social media, press, websites, leaflets, undertake presentations to groups, pop-up stands at local community events.

Fife Advocacy Forum held the first Fife advocacy week at the end of October 2024, running both an in person and online campaign to raise awareness about the advocacy support that is available in Fife and how to access it. A total of fifteen events took place across Fife.

The Barnardo's Children's Rights service have established working relationships with Children and Families social work teams and regularly attend team meetings to share information about their services. Fife's Child Protection Committee is creating a new information leaflet for children involved in Child Protection Planning Meetings that contains a link to advocacy services.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

The Children in Fife Partnership has a multi-agency Children's Right's Oversight Group which promotes awareness and maintains oversight of the implementation of UNCRC in Fife. They created a Children's Rights Charter in 2025. The multi-agency Corporate Parenting Board is focused on promoting practice across the partnership, to ensure the views and best interests of looked after young people in Fife are sought and respected. The Review Team within Children and Families social work service is responsible for chairing looked after and child protection planning meetings, and they have a key role in ensuring that the young person is appropriately supported to contribute towards their decision making meetings. This includes the promotion of advocacy services to the team around the child.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
 No

If the budget has changed (either an increase or decrease) please say how.

Inflationary uplifts are awarded annually at the beginning of each financial year. In 24/25 an uplift of 2% on the 23/24 funding was awarded. For 25/26 a 2% uplift was also awarded.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

There have been no changes to services as a result of these budget increases.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
 No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Fife Health & Social Care Partnerships Professional Advocacy Contract specification sets out the services to be provided under the contract. This was developed in line with the aims and objectives of Fife's Advocacy Strategy. The Advocacy Contract delivers on professional advocacy to vulnerable individuals aged 16 and over who are affected by disability, chronic illness, or mental disorder. Those eligible to receive this service specifically, but not exclusively, includes people with mental health issues, learning disabilities, personality disorder, physical disabilities, acquired brain injury, dementia, and autism spectrum disorders as well as chronic illness.

The Contract also delivers on provision of advocacy services to children under 16 who are subject to compulsory measures under the Mental Health (Care & Treatment) (Scotland) Act

2003 or are the subject of a Welfare Guardianship Application, under the Adults with Incapacity Scotland Act 2000.

In addition, one of Fife's grant funded providers is funded to deliver independent advocacy support to unpaid carers. Carers are supported to understand the importance of having a Power of Attorney so that they have the powers to make decisions should the cared for person lose capacity. The organisation supports both the carer and the cared for person to arrange a suitable Power of Attorney, including working closely with appropriate solicitors to support those who don't hold Power of Attorney where a guardianship order is required.

Whilst Fife specify that support for people subject to compulsory measures under the Mental Health Act is delivered by some organisations, Advocacy Services are also commissioned and delivered to a broad range of individuals.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes



No

If yes, please provide details

N/A

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent advocacy organisations changed over the past two years?

- Yes
- No

3.7 If the budget has changed (either an increase or decrease) please say how.

Inflationary uplifts are awarded annually at the beginning of each financial year. In 24/25 an uplift of 3% on the 23/24 funding was awarded. For 25/26 a 3% uplift was also awarded.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

There have been no changes to services as a result of these budget increases.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support,

- Yes
- No

If yes, please provide details

Fife Health & Social Care Partnerships Professional Advocacy Contract specification sets out the services to be provided under the contract. This was developed in line with the aims and objectives of Fife's Advocacy Strategy. The Advocacy Contract delivers on professional advocacy to vulnerable individuals aged 16 and over who are affected by disability, chronic illness, or mental disorder. Those eligible to receive this service specifically, but not exclusively, includes people with mental health issues, learning disabilities, personality disorder, physical disabilities, acquired brain injury, dementia, and autism spectrum disorders as well as chronic illness.

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In addition, one of Fife's grant funded providers is funded to deliver independent advocacy support to unpaid carers. Carers are supported to understand the importance of having a Power of Attorney so that they have the powers to make decisions should the cared for person lose capacity. The organisation supports both the carer and the cared for person to arrange a suitable Power of Attorney, including working closely with appropriate solicitors to support those who don't hold Power of Attorney where a guardianship order is required.

Whilst Fife specify that support for people subject to compulsory measures under the Mental Health Act is delivered by some organisations, Advocacy Services are also commissioned and delivered to a broad range of individuals.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for
3.11	How many organisations do you commission advocacy services from?	10
3.12	Can you please detail how many organisations you commission advocacy services from which cover the	
	Generic service (ie, it covers all the categories below)?	2
	People with a mental health/illness related condition.	5
	People with learning disability	5
	People with dementia	4
	People with autistic spectrum disorder	4
	Mentally disordered offenders	3
	Homeless people with mental illness, learning disability, dementia	4
	Carers of people with mental illness, learning disability, dementia	5
	Children & young people with a mental health problem	5
	Children & young people with a learning disability	5
	Children & young people with ASD or ADHD	5
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	5
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	2
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following	
	▪ All ages	1
	▪ Under 18 with mental health issues, learning disability	7
	▪ Adults up to 65	6
	▪ Adults over 65	4

		Total number of organisations for
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following	
	▪ Individual	7
	▪ Collective	5
	▪ Citizen	1
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	6

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£1,158,642 (total Advocacy Budget 24/25)
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if	Unable to provide this level of detail.
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	10
	2 years	
	3 years	1
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	43 Paid Staff 116 Volunteers

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

Planning for independent Advocacy for Adults is across the NHS Forth Valley board area

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

In the Forth Valley, there are three advocacy organisations who deliver services across the region. Advocacy provider organisations in the area were asked (alongside other routes) to disseminate survey links and engagement event information for advocacy partners, their families and carers, and the public. They were also invited to participate in these consultation events.

Two organisations are funded by HSCP. The first, Forth Valley Advocacy, is the main provider across Forth Valley. The second, People First, delivers specialist collective advocacy in Clackmannanshire area only for adults with learning disabilities.

A third organisation located in the Forth Valley region, Central Advocacy Partners, is funded by other grant bodies.

The main contracted advocacy provider organisation, Forth Valley Advocacy, was also approached to provide a number of referrals to speak with those with lived and living experience. Given the vulnerability of many advocacy partners, this was done to ensure it was appropriate to interview them about their experiences, expectations, and feedback.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Those with lived and living experience were consulted through surveys, online and in-person focus groups, and individual interviews.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

Anyone currently within prisons who are subject to statutory support under the Mental Health Act are referred by mental health officers within prisons to the main contracted advocacy organisation.

At HMP Stirling any women who are not subject to statutory support under the Mental Health Act but may have additional vulnerability due to mental illness, learning disabilities or difficulties may be referred to appropriate Advocacy Services by their the local authority in which they would normally reside.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Those subject to the Mental Health Act are referred by mental health officers within prisons to the main contracted advocacy organisation.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

The primary outcome is to support the person to express an informed view about an agreed issue in a manner, pace, and place that is most appropriate to the individual.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys

- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

1,100 individuals were supported in the last year by our main contracted advocacy organisation.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

They have no waitlist at this time, nor has there been a waitlist in the past year.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

We complete an annual review each year that includes feedback from practitioners about the quality of services and outcomes of individuals. Our upcoming contract (beginning November 2025) also includes additional monitoring of outcomes by the contracted advocacy organisation, from both the individual advocacy partners and those practitioners with whom they have been in contact.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

In addition to the above routes for complaints, our annual reviews include engagement with practitioners for additional feedback.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Information about services is available on the web, in-person through brochures and posters in relevant locations (i.e. hospital wards, GP offices, etc.), and through third sector partners.

The main contracted advocacy organisation provides both staff and provider awareness and training sessions. They also can attend our regular provider forums to promote their service and offer guidance and signposting.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes – SEE SEPARATE DOCUMENT FOR CHILDRENS ADVOCACY

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Children looked after in other local authorities would receive independent advocacy through Who Cares? Scotland.

In addition to the commissioned service from Who Cares? Scotland for children who are Looked After, Stirling Council employ a Children's Rights Officer who can provide advocacy for children and young people with a range of needs, such as learning disability or mental illness, who may not be eligible for Who Cares? Scotland. This includes children who attend specialist schools out with the Local Area.

Stirling also employs a Participation Worker for young people who are in conflict with the law and who may be affected by mental illness and / or learning disability. At times, these young people may be residing out with the area in residential care, secure care or custody. Children and young people who require in-patient care relating to mental illness can access the independent advocacy provided associated with the service (Partners in Advocacy).

Unaccompanied Asylum Seeking Children access advocacy services through the Scottish Guardianship Service, which also provides support and advocacy relating to mental health where required.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

1. To provide Independent Advocacy, information and support to children and young people
2. To assist children and young people to resolve concerns and complaints they may have in respect of the care services they receive.
3. To provide children and young people with the necessary information in respect of their rights and responsibilities within key decision-making processes
4. Partnership working with the Council and other agencies will raise awareness and maximise referral to advocacy support for children and young people

*This service is not commissioned specifically for children and young people with LD, mental illness or related conditions, however includes this demographic within the scope of broader function delivering advocacy for children experiencing care or subject to formal processes through child protection planning or a children's hearing. This service includes children who are placed out with the authority and has included children admitted to mental health inpatient care, those who attend specialist residential schools for learning disability or who are supported by CAMHS teams within the community.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

Yes

No

If Yes, please provide the most up to date information provided by each organisation

Who Cares? Scotland: provide information on demographics of those accessing independent advocacy within quarterly and annual reporting this includes data regarding disability. The categories and data recorded in the last annual report 24/25 is shown below:

Of 91 children and young people receiving advocacy:

No Disability: >80

Developmental Disorder <less than 5

Other <less than 5

Prefer not to say <less than 5

Mental Health Condition <less than 5

Learning Difficulty <less than 5

Learning Disability <less than 5

The most recent quarterly report in Stirling provided in January 2025 indicated that 41 children and young people accessed independent advocacy with Who Cares? Scotland.

No Disability: <40

Developmental Disorder: <5

Other: <5

Prefer not to say: <5

Mental Health Condition: <5

Learning Difficulty: <5

Learning Disability: <5

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Feedback tools are used which measure satisfaction against key outcomes

These are designed in a way that is accessible. Verbal feedback is also recorded for children or young people who do not wish to use the tool.

Children and young people from Stirling who are affected by these issues may also use the Child Friendly Complaints Toolkit to understand what they can expect from a service and how they can share their views about it.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

This is not formally reported on within monitoring data. We will seek to resolve this. However good relationships exist between managers with oversight of the contract within the LA and Who Cares's? Scotland and any issues in relation to delivery of advocacy to children and young people have been raised and addressed openly and with ease either through monitoring meetings or out with as required.

Regular monitoring meetings between Who Cares? Scotland, Commissioning and Social Work will highlight any issues with complaints.

The Child Friendly Complaints process will provide this data, but it is currently in its infancy and is yet to report statistically meaningful data.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Who Cares? Scotland Deliver Communities that Care which raises awareness of the rights of children and young people with care experience.

Stirling Council's webpages for Children & Families and Justice Social Work is currently being updated to include information on Independent Advocacy.

Stirling also has an active Champions' Board which promotes access to independent advocacy and focuses on young people's voices in service design. This service supports children and young people with learning disability and mental illness.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

Who Cares? Scotland have delivered training to staff in schools across Clackmannanshire and Stirling which covers right to advocacy as part of the programme. Representatives from Who Cares have delivered staff briefings and attended groups with foster carers, adopters, and kinship carers to raise profile of advocacy. Within Stirling, the Children's Rights officer is embedded in Education and works with schools to raise the profile of children's rights and advocacy, with a focus on those voices that find it harder to be heard, such as children with disability, those with mental illness and those within the care system. This work is supported by Educational Psychologists and the Virtual Head team, which supports Looked After Children and Young People within education.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

Budget has remained the same for the past two years.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

The contract specification for the current contract was developed with the expectation that the number of referrals would increase over the life of the contract. As such, whilst referrals have increased, capacity was built-in, and therefore there is still no waitlist.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

We have broad eligibility criteria that is neither exhaustive nor exclusive. The contracted advocacy organisation is charged with prioritising those with statutory rights to advocacy, and then providing advocacy where appropriate and otherwise signposting to anyone else in need.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

While the budget has not changed demand has increased due to raised awareness of advocacy services by staff and caregivers, as well as increased awareness for children, education staff and families through Communities that Care. The service has not changed, however at times has to operate with a short waiting list prioritising most urgent need for support.

While Stirling's budget has not changed over the last two years, it is currently undertaking a service review and procurement exercise in respect of Independent Advocacy. Some children and young people may experience a short waiting period before being allocated, although this can be expedited where there is an urgent need.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

There is agreement that referrals will be prioritised where there is a formal process taking place that relates to planning for a child or young person. Compulsory measures under the MH Act would fall within this category.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	3
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	1
	People with a mental health/illness related condition.	
	People with learning disability	1
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	<ul style="list-style-type: none"> ▪ All ages 	
	<ul style="list-style-type: none"> ▪ Under 18 with mental health issues, learning disability 	1 (anyone over the age of 16) 1 (up to 26)
	<ul style="list-style-type: none"> ▪ Adults up to 65 	2
	<ul style="list-style-type: none"> ▪ Adults over 65 	2

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	1 – adult 1 - children
	▪ Collective	1
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1 – adult 1 - children

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£467,030 across the councils of Clackmannanshire, Stirling, and Falkirk and NHS Forth Valley (through the Clackmannanshire and Stirling HSCP and Falkirk HSCP) for the main contracted advocacy service and the specialist collective advocacy service in Clackmannanshire
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	£36,969pa
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1
	2 years	
	3 years	1 - children
	4 years	1 (on a 2+1+1 contract)
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

Same response as Clackmannan & Stirling – planning for independent advocacy for adults is across the NHS Forth Valley area.

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

X Both options above

Don't know

Not applicable

Any further details

Children looked after in other local authorities would receive independent advocacy through Who Cares? Scotland.

Children who are Looked After out with the local authority in secure or residential care will also have the option of accessing advocacy support directly the placement.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

- To provide Independent Advocacy, information and support to children and young people.
- To assist children and young people to resolve concerns and complaints they may have in respect of the care services they receive.
- To provide children and young people with the necessary information in respect of their rights and responsibilities within key decision-making processes.
- Partnership working with the Council and other agencies will raise awareness and maximise referral to advocacy support for children and young people.
- To challenge discriminatory views and practice to uphold young people's rights.
- To involve young people in national Who Cares? Scotland engagement activities to ensure that Falkirk's young people are represented.
- To develop a pool of volunteers to supplement information/advocacy services to children and young people. To collate feedback from care experienced young people about the services they receive and collaboratively assess this information with Children's Services to support wider improvement activity.
- To support care experienced young people to be involved in decisions about their care.

*This service is not commissioned specifically for children and young people with LD, mental illness or related conditions however includes this demographic within the scope of broader function delivering advocacy for children experiencing care or subject to formal processes through child protection planning or a children's hearing. This service includes children who are placed out with the authority and has included children admitted to mental health inpatient care or who are supported by camhs teams within the community.

In Falkirk the advocacy support provided by Who Cares? Scotland and Quarriers service links to the delivery of key objectives outlined in Falkirk Council's Integrated Children's Service Plan including:

- Mental Health and Wellbeing - Providing the right intervention at the right time.
- Poverty and Inequality – providing an advocacy service for care experienced young people, promoting good outcomes for young people who have experienced adversity.
- Substance and Alcohol Misuse – supporting children's rights to be considered and upheld when they are impacted by their own or their family's substance misuse
- To work with the Champions Board to uphold and develop the voice of Falkirk's care experienced young people, in line with the Children and Young People (Scotland) Act 2014.
- Promote and raise awareness of the UNCRC in Falkirk.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review

- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

Who Cares? Scotland: provide information on demographics of those accessing independent advocacy within quarterly and annual reporting this includes data regarding disability. The categories and data recorded in the last annual report 24/25 is shown below:
 Of 91 children and young people receiving advocacy:
 No Disability: >80
 Developmental Disorder <less than 5
 Other <less than 5
 Prefer not to say <less than 5
 Mental Health Condition <less than 5
 Learning Difficulty <less than 5
 Learning Disability <less than 5

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Feedback tools are used which measure satisfaction against key outcomes
 These are designed in a way that is accessible. Verbal feedback is also recorded for children or young people who do not wish to use the tool.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

This is not formally reported on within monitoring data. We will seek to resolve this. However good relationships exist between managers with oversight of the contract within the LA and Who Cares's? Scotland and any issues in relation to delivery of advocacy to children and young people have been raised and addressed openly and with ease either through monitoring meetings or out with as required.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Who Cares? Scotland Deliver Communities that Care which raises awareness of the rights of children and young people with care experience.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

Who Cares? Scotland have delivered training to staff in schools across Clackmannanshire which covers right to advocacy as part of the programme. Representatives from Who Cares have delivered staff briefings and attended groups with foster carers, adopters, and kinship carers to raise profile of advocacy.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

While the budget has not changed demand has increased due to raised awareness of advocacy services by staff and caregivers, as well as increased awareness for children, education staff and families through Communities that Care. The service has not changed, however at times has to operate with a short waiting list prioritising most urgent need for support.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

There is agreement that referrals will be prioritised where there is a formal process taking place that relates to planning for a child or young person. Compulsory measures under the MH Act would fall within this category.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	(Include Who Cares) 2 in Falkirk Who Cares and Quarriers
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1 2 in Falkirk Who Cares and Quarriers
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	1 *up to 26
	▪ Adults up to 65	

	<ul style="list-style-type: none"> ▪ Adults over 65 	
		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	<ul style="list-style-type: none"> ▪ Individual 	1 WC
	<ul style="list-style-type: none"> ▪ Collective 	
	<ul style="list-style-type: none"> ▪ Citizen 	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1 WC

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	£36969 annually
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	
	3 years	WC
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	27.5 per week WC

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

This is imbedded in our new Strategic Plan 2025 - It refer to improving access to services, taking a strength based approach, and adopting the Grampian Hope methodology to the provision of support (which incorporates GiRFE, Putting People First, Trauma Informed, Human Learning Systems, Self Directed Support, and Realistic Medicine). I've attached the graphic we used.

In the past we have collaborated with colleagues is Shire, Moray, and NHSG to contribute to the Grampian Independent Advocacy Plan which I have attached. Advocacy strategic planning is carried out at a Grampian level coordinated by NHSG but that the current plan is out of date and at

present we do not have an indication from them regarding any plans for updating this or developing a replacement.

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

N/A – The last plan was developed in 2021. As stated earlier, this action plan needs to be revamped and updated to reflect advocacy service being delivered in Aberdeen in the current day.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

N/A

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

X No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

X No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

This is outlined in the service specification for the contract for the various types of advocacy service being offered. Please see attached document (Service Spec)

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Attached is the latest monitoring report. This provides a breakdown of referrals and ongoing support being offered by Aberdeen Advocacy Service.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

Please see monitoring report.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Feedback forms are given to all individuals who have used the service. These are collated and form part of the monitoring reports.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Aberdeen Advocacy Service hold engagement events throughout the year at various events across the city. They also visit services and hospital wards to promote and highlight their service. They produce literature which is published and distributed widely across the partnership. They attend workshops and forums on a regular basis to highlight the services they provide.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19

Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

X Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

- 1) Children who are care experienced can access our Rights Service - Young Person's Rights Service | Aberdeen City Council. Children who fall within our Child Protection Processes can access our Rights' Service
- 2) Our children whose needs are considered within Children's Hearings are encouraged and supported to access advocacy services from the SG funded commissioned services, should they so wish. Within Aberdeen, this is provided by Who Cares and Advocacy Services Aberdeen. The Right's Service works closely with these providers to also provide independent advocacy for those who want it at their Hearing. Referrals are considered jointly and where a child or young person already has a relationship with an individual worker, it may be that they would want that person to continue to support them. These 2 providers also offer wider advocacy services as reflected here - <https://www.whocarescotland.org/get-support/advocacy/> and <https://www.advocacy.org.uk/>
- 3) Children who have suffered harm and abuse are offered advocacy support within our newly opened Bairns Hoose Service, via a commissioned service from Children First's Advocacy,

Rights and Recovery workers. These children can also access our Rights Service as another option.
16+yr olds are supported via Advocacy Services commissioned by AHSCP. These young people can also access our Rights service if they are care experienced or are or have been involved in child protection processes.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Bairns Hoose

The outcomes sought are being trialled out currently to ensure that all children who suffer from abuse or harm, and those who fall under the auspices of the Age of Criminal Responsibilities Act have the support they need to recover from their experiences. One key aim is to minimise the scope for re-traumatisation as well as to coordinate the different supports a child in this circumstance will need, thus avoiding their need to repeat their stories. The work here falls under Aberdeen being a pathfinder for this new innovative model of approach and practice so is still under development.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- X Annual review
- Service review
- Satisfactory surveys
- X Evaluation
- Key performance indicators
- X Other (please specify)

This service forms part of a Bairns Hoose Delivery Group which meets monthly to monitor and review progress in our pathfinder development work.

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- X No

If Yes, please provide the most up to date information provided by each organisation

There is no specific data set for recording children with mental illness, learning disability or related condition accessing advocacy support from each organisation. Information is collated in relation to a wider group of children/young people who have additional support needs. This is collated within child protection paperwork (Interagency Referral Discussion Record) at the point of disclosure of harm or abuse.

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

As above, evaluation and feedback from all children and young people is being collated and will be reportable at a later date. Our Bairns Hoose only officially opens on 4th August so work to date has been in the early stages. Verbal feedback has been collated on an ongoing basis, from our CHANGEMAKERS group of children and young people.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

Within our Bairns Hoose, reporting and recording mechanisms are in the early stages of development. That said, we adhere to our Aberdeen City Council complaints procedures which allow complaints to be dealt with at the lowest level before they need to escalate to our Customer Feedback Team.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Lead professionals are advised to presume the need to refer all children involved in child protection processes for advocacy and rights support and state why if this has not taken place.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

We now have a Children's Participation worker and two children's rights workers employed within Children's Social Work, to promote increased commitment to Rights and Advocacy within all our service provision.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

There has been an increase to incorporate Adult Support and Protection and Substance Misuse Services which incorporate the Medication Assisted Treatment Standards.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Resulted in an increase of referrals.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Referrals are triaged. Those under the MHA will be prioritised.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

X No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

N/A

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

X Yes

No

If yes, please provide details

We would actively support and encourage advocacy for all our children and young people as well as actively encouraging that our parents seek this support given all who we work with have increased vulnerability and are more likely to suffer discrimination and disadvantage.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

X No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	3
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	3
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	2
	Children & young people with a learning disability	2
	Children & young people with ASD or ADHD	2
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	3
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	3
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	0
	▪ Under 18 with mental health issues, learning disability	3
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	3
	▪ Collective	1
	▪ Citizen	1
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£1,097,772 for three years. Adult services only.
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	The budget does not break down to the following categories.
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	
	3 years	1
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP – Aberdeenshire Health and Social Care Partnership
- Local Authority – Aberdeenshire Council
- Jointly (please specify)
- Other (please specify)

HSCP and Local Authority commission Advocacy service, however there is no strategic plan.

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Given the current demands and pressures on the HSCP we are not in the process of developing a strategic plan

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

NA

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

NA

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

As the commissioned provider, Advocacy North East provides Independent Advocacy within the prison estate to all those who have a right to access independent advocacy under the terms of the Mental Health Act.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Information is provided to prisoners via the availability of leaflets and promotional information within the prison estate as well as from the Prison Health Centre and healthcare staff, Criminal Justice Social Workers, SPS staff and the Pastor.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

To date, no referrals have been received associated with private healthcare facilities. Should a patient who is ordinarily resident in Aberdeenshire be temporarily receiving healthcare out with the home health board area they would be eligible to receive a service.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

The Service is required to assist vulnerable adults who are resident in Aberdeenshire, and who are using or requiring services, to express their views and to speak on their behalf where required. The Service will promote empowerment, protection and inclusion. By using an advocacy service, the aim is that individuals will be enabled to make informed choices about, and to remain in control of, their own care. The Service will help people access the information they need, to understand options available to them and to make their views and wishes known.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

1100 service users received advocacy support between April 2024 – March 2025.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

April 2024 – March 2025 - 85 referrals were on a waiting list at some point within the year

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Pre and post forma questionnaires, feedback surveys and outcome evaluations for service users. Evaluation forms for referrers and other stakeholders.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

The Council website provides public information about independent advocacy and availability. It also raises awareness across its engagement pages and those specifically linked to communities of interest e.g. Adult Support & Protection, learning Disability Services etc.

Liaison with the commissioned advocacy provider ensures that public events around community health and well-being (where relevant) include the promotion of independent advocacy by way of information, materials or presentations by the advocacy service.

The publication of local plans and strategies will carry information on the provision and availability of independent advocacy e.g. Mental Health & Wellbeing Strategy, Learning Disability strategy etc.

In addition, the commissioned advocacy provider provides information and materials via its website as well as in public places including hospitals etc and at public events. The provider also raises awareness through presentations (on-line and in person) across a variety of sectors and to various agencies and community groups.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Advocacy North east provides advocacy support to children and young people who are temporarily receiving treatment in other areas.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

That children and young people who are subject to, or at risk of being subject to, compulsory measures, understand and can assert their rights and views and have their voice heard in matters relating to their health, care and treatment.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Quarterly meetings with Senior Management Leaders

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

<Less than 10

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Accessible questionnaires and outcome reporting.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

This is a recently established and discrete initiative to provide independent advocacy specifically for the small number of Aberdeenshire children and young people who are subject to, or are likely to be subject to detention under the Mental Health Act. It is intended that the initiative is broadened out over a specified period of time to enable demand and resource to be managed appropriately and for outcomes to guide and influence future commissioning arrangements. This being the case, awareness raising has been limited to relevant settings and professionals only.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Actions, such as presentations, awareness raising and distribution of promotional literature have been taken to promote the service to relevant health and social work professionals

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent-advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

3% increase/uplift in line with local authority commissioning practice.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

The provision has increased. Referrals fluctuate but demand remains high. Prioritisation is given to those subject to formal proceedings whilst maintaining a service for all those with a right of access to independent advocacy.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

The resource and capacity is adequate to meet the need for those entitled to access independent advocacy under the terms of the mental health act – albeit, at times of high demand some delays to service may be experienced.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

N/A

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

NA

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

NA

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

Currently, the development of an advocacy service for Children and Young people is in its infancy and is limited to supporting those who are subject to, or likely to be subject to compulsory measures under the Mental Health Act. This is a strategic approach to ensure that the balance of resource, capacity and learning is managed appropriately and informs future commissioning proposals. While the service is currently discrete it is intended for this to be broadened out in a phased development.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

N/A

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	1
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	1
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	1
	▪ Collective	1
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	Adults: £1,107,779.00 (factoring 3% increase - 3 years contract). Children and young people: £2200.00 per year
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	Budget As above for Adults
	People with learning disability	Budget As above for Adults
	People with dementia	Budget As above for Adults
	People with autistic spectrum disorder	Budget As above for Adults
	Mental disordered offenders	Budget As above for Adults
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	Budget As above for Adults
	Children & young people with a mental health problem	Budget As above for Adults
	Children & young people with a learning disability	Budget As above for Adults
	Children & Young people with ASD	Budget As above for Adults
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	

	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	
3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	
	3 years	1 organisation - adult/young people services.
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	10

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

The current Advocacy providers in Moray were awarded contracts following a regulated Procurement process. The MIJB 10-year Strategic Plan outlines the commitment to support people to live independently. One of the objectives in the Health and Social Care Moray Strategic Delivery Plan is to continue the promotion of independent support and advise for SDS options with the defined outcome being - "Individuals have access to independent support and advice enabling them to make informed decisions around the four options of SDS. Individuals have access to independent SDS Advocacy to support with accessing SDS". A copy of the Strategic Delivery Plan 2025-2028 and Advocacy Tender Specification is attached with this return.

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

- People across Moray are able to access independent advocacy in the right place at the right time.
- Independent advocacy is actively promoted as a means of supporting the person's voice
- Independent advocacy providers deliver a high-quality service
- Independent advocates and health & care professionals work together in a trusting and collaborative environment
- The impact of independent advocacy in improving the outcomes is better understood
- Resources are used to provide an effective advocacy service

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Adults Services Monitoring Report Referrals Q4 2024/2025:

Cases by referral type								
Referrer Type Referral Sub-Type	Friends and Family		Professional		Self		Total	
	Cases	% Cases	Cases	% Cases	Cases	% Cases	Cases	% Cases
Community Mental Health Advocacy			4	6.67%			4	5.41%
General Care & Support Advocacy	2	100.00%	10	16.67%	5	41.67%	17	22.97%
General Health Advocacy			3	5.00%			3	4.05%
Inpatient Mental Health Advocacy			15	25.00%			15	20.27%
Learning Disability Advocacy			8	13.33%	3	25.00%	11	14.86%
Older People's Advocacy			3	5.00%	1	8.33%	4	5.41%
Parental Child Protection Advocacy			1	1.67%			1	1.35%
Rights			1	1.67%			1	1.35%
Safeguarding Support			8	13.33%			8	10.81%
Social Care Complaints Advocacy			1	1.67%	2	16.67%	3	4.05%
Specialist Housing Advocacy			6	10.00%	1	8.33%	7	9.46%
Total	2	100.00%	60	100.00%	12	100.00%	74	100.00%

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

Adults Services Monitoring Report Q4 2024/2025:

KPI 4: Waiting List Numbers:

There are currently no cases on the waiting list as there is no waiting list on this contract.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Adults Services Monitoring Report Complaints Management Q4 2024/2025:

We have received 0 complaints this reporting period.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

HSCP staff can raise any concerns they have with the Service to the Senior Commissioning Officer who will then address any issues with the providers Service Manager.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Moray Council Website: [Independent Advocacy - Moray Council](#)
Current Provider Website: www.voiceability.org/in-scotland/advocacy-in-moray
Moray Alcohol and Drug Partnership - [Preventing Alcohol and Drug Harm - Moray Protects](#)

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Arranged on a case-by-case basis

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

- Develop relationships with the children, young people and their families that are based on trust and respect.
- Support children, young people and their families to present their views on their behalf
- To provide separate advocates to represent the child, young person or families

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Direct feedback from the children and young people to their advocacy worker, social worker, parent / carer and / or a survey.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

Complaints noted and recorded monthly through the provider completing a Comments, Complaints and Incidents reports.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Through discussion at local meetings, including multi agency ones.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

The service is detailed within the commissioned service directory and is part of the induction process for newly qualified and social workers in training.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

No

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

The service is advertised as providing free support in Moray accessing community care services. This includes people with a mental health condition or a learning disability, autistic people, people with dementia, and physical and sensory disabilities. The support is also available for unpaid carers.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Restricted provision, service running at capacity for all referrals.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	Adult Services – 1 Children Services – 1
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	2
	People with a mental health/illness related condition.	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	Adult Service – 1 Children Service - 1
	▪ Collective	Adult Service – 1 Children Service –1
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	Adult Service – 1 Children Service - 1

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	Adult Service - £179,095.95 (includes £35,000 for the Drug and Alcohol Partnership) Children Service - £111,365.00
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	Children Service (with option to extend by 2 x 12 month periods)
	3 years	Adult Service (with option to extend by 2 x 12 month periods)
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	2 – Children Service

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

NHS board-wide

HSCP

Local Authority

Jointly (please specify)

Other (please specify)

The Advocacy Strategy 2024 – 2027 for NHS Greater Glasgow and Clyde area covers all six Health & Social Care Partnership (HSCP) including East Dunbartonshire. The Plan was developed in consultation with a wide range of partners and stakeholders and builds upon the work of earlier plans. Service user, carer and stakeholder feedback as used to identify areas for development across the wider partnership areas and further areas for development of a local nature.

Following the publication of the board wide Advocacy Strategy, East Dunbartonshire HSCP developed a local Advocacy Plan 2024 – 2027 in partnership with our three advocacy partners: Ceartas Advocacy, Who Cares? Scotland and Partners in Advocacy.

East Dunbartonshire HSCP has established a locality Advocacy Plan Implementation Group, chaired by the Team Manager for Social Work Mental Health Services, which has representation from all three advocacy partners across both adults and children's advocacy, representatives from Adult and Children's Social Work Teams, Self Directed Support Lead Officer and our Alcohol and Drugs Partnership Co-ordinator.

1.2 Is there a current independent advocacy strategic plan for your area?

Yes

No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

Yes

No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

The three advocacy partners, Ceartas who are our primary adult service commissioned advocacy resource locally, Who Cares? Scotland and Partners In Advocacy (national advocacy services with commissioned time spent in East Dunbartonshire) were fully involved in the coproduction and development of East Dunbartonshire HSCP's local Advocacy Plan and participated as active members of the Advocacy Plan Development Working Group.

Following the development of our locality plan, a local Advocacy Plan Implementation Group has been developed to progress the identified actions.

Each of the three Advocacy partners are also represented on the implementation working group.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

All three of advocacy partners involved in development the Locality Advocacy Plan provided service user, carer and stakeholder feedback regarding areas for development. All were instrumental in the development of the actions contained within the Locality Advocacy Plan.

East Dunbartonshire HSCP as part of our arrangements for providing and commissioning advocacy services locally follows the Guide for Commissioners when engaging with service users and other stakeholders to ensure that appropriate access to advocacy is available through monitoring and engagement mechanisms.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

Scottish Prison Service funded.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Whilst prisoners may meet the eligibility criteria to access advocacy support from the local advocacy service, there are challenges in respect of core funding and further collaboration/partnership working with the Scottish Prison Service will be required to develop this further.

The Prison based within East Dunbartonshire is HMP Low Moss which is not covered by the HSCP's core advocacy funding. A level of independent collaboration between Ceartas Advocacy Service and Low Moss Prison has taken place and both are considering the potential to develop proposals to provide advocacy to prisoners within HMP Low Moss.

Existing Prison Based Social Work services have ensured that issues in relation to the need for advocacy are addressed and that information regarding advocacy services is provided from prison inductions, integrated case management and parole interviews.

East Dunbartonshire Alcohol and Drug Partnership have also started to establish Recovery Cafés within HMP Low Moss and signposting to community-based services as part of release transition arrangements will also be a part of their role and function.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Our locally commissioned carers service 'Carers Link' will additionally seek to offer to support carers as part of their wider role in terms of carer support within East Dunbartonshire.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

The high level outcomes to be achieved are:-

- SOA 5 –“*Our people & communities enjoy increased physical and mental wellbeing and health inequalities are reduced.*
- SOA 6 –“*Our older population are supported to enjoy a high quality of life and our more vulnerable citizens, their families and carers benefit from effective care and support services.*

The outcomes we are seeking from advocacy organisations are fundamentally to speak up for and stand alongside individuals or groups within our communities. Advocacy provision should not be influenced by the views of others and ensures that everyone has the right to a voice to address barriers and imbalances of power, and that their human rights are recognised, respected, and secured.

Individual outcomes are discussed and agreed by Care Managers and individuals accessing the service.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review

- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Outcomes are monitored by checking the number of people satisfied with the services received and feel their own individual outcomes are being/have been met. This can be via questionnaire or face-to-face meetings with service users to obtain feedback.

Care providers are also expected to produce Annual Reports detailing service levels, numbers accessing the service, how many achieved their outcomes etc.

Individual outcomes for each individual accessing the service are reviewed/monitor by care managers as part of standard review processes.

Mental Health Officers where involved will additionally ensure access to local advocacy services as part of their responsibilities.

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

The most up to date information held is for 2024. In East Dunbartonshire 348 people were recorded as accessing advocacy support from Ceartas Advocacy, 37 young people accessed advocacy support from Who Cares? Scotland with a further 45 accessing advocacy from Partners in Advocacy across Children's Hearing representation, My Rights My Say and NHS Greater Glasgow and Clyde Mental Health.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

At this time our local Advocacy Services have not indicated that any waiting lists are in place for advocacy services but as we move forward, this may become a feature due to a number of factors, such as our high elderly population/demographics, higher demand for services, cost of living pressures, reduced service delivery, budgetary constraints, etc. Unmet needs were identified as part of our work to prepare our local Advocacy Plan, and as part of our local Implementation Plan.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Our Advocacy Service surveys service users to invite feedback, comments on the Service and whether outcomes are being met. Individual outcomes and satisfaction levels are monitored by Care Managers as part of standard review processes.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

In East Dunbartonshire the local advocacy service actively seeks to raise awareness, and is actively promoted by HSCP staff during any stakeholder activities which involves providing information, advice and support.

East Dunbartonshire hosts an annual 'Meet the Services' event which this year took place on 24th April 2025 in Kirkintilloch. This event provided an opportunity for local citizens, customers and carers, to visit a centrally located venue to learn more about local support services, and advocacy services were represented at this event.

All policy, strategy and plan developments and reviews ensure liaison with the local advocacy service and highlights the contact details for the service within its contents.

There is reference to local advocacy services on the HSCP and Council website pages.

The local Advocacy Plan has a number of activities associated with raising awareness for local advocacy services which are to be progressed during 2025 to 2027, across all three partners including:

- Input from local advocacy partners at quarterly services development days hosted by Social Work Teams thereby ensuring that staff are aware of current advocacy providers within the area and feel confident sharing this information with customers, carers and families.
- Social Work and Health Teams to consider 'Advocacy' topic as a standing business agenda item, building knowledge and confidence among HSCP Teams about the role of independent advocacy.
- Developing a dedicated Advocacy web page on the HSCP website.
- Review existing advocacy information resources and co-produce easy read information leaflets, for all stakeholders, across all advocacy services.
- Develop video link training sessions about the role of advocacy for use during HSCP staff induction activities
- Explore the viability of establishing an Annual Advocacy Conversation Café within East Dunbartonshire.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Partners in Advocacy are funded by the Scottish Government to provide independent advocacy support for children and young people going through the Children's Hearings System and to provide independent advocacy to young people aged 12-15 with additional support needs in education.

Partners in Advocacy are also commissioned by NHS GGC to provide independent advocacy for children and young people aged up to 18 years who are inpatients in Skye House Adolescent Psychiatric Inpatient Unit, and Ward 4 of the Royal Hospital for Children.

Who Cares? Scotland are commissioned by East Dunbartonshire to provide independent advocacy to looked after children and young people or those who are care experienced up to the age of 26.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

There are individual outcomes for each individual accessing the service and these will be reviewed/monitor by Care Managers as part of standard review processes.

In terms of Specialist Children's Services, this is a hosted service within East Dunbartonshire HSCP which includes the West of Scotland Adolescent Inpatient Unit and The Child Inpatient Unit.

The Service will be provided to the whole spectrum of mental health service users up to the age of 18 years and the diversity of the population including gender, ethnicity, age, disability (physical or otherwise) and sexuality.

The outcomes to be achieved are to ensure support is provided to individuals during transition from the in-patient service to the community, the service requires a formal handover period of three months.

To provide a Service which will ensure support to individuals at health service meetings, mental Health tribunals and other legal proceedings, and a model of service to meet the needs of the Individuals and maintain confidentiality of individuals. Including effective management of long-term advocacy relationships. The delivery of the service will adhere to the Milan Principles of the Mental Health (Care and Treatment) (Scotland) Act 2003 and the Scottish Independent Advocacy Alliance Standards; also an understanding of Section 2 of the Mental Health (Care and Treatment) (Scotland) Act 2003.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Advocacy provision is also reviewed by the Scottish Independent Advocacy Alliance to ensure adherence to legislation and regulation, as well as numbers accessing services and the outcomes achieved.

Specialist Children's Services Quarterly report which includes:

- Total number and sources of referrals.
- Number and sources of referrals accepted, broken down by age, gender and ethnicity of service user.
- Number and sources of referrals refused with reasons, broken down by age, gender and ethnicity
- Number of active cases at the end of the quarter, broken down by case type and age, gender and ethnicity of service users.
- Number of cases closed in the previous quarter, broken down by case type, showing average number of hours spent, with summary of closed partnerships.
- Record of time taken on individual cases.
- Records of any complaints or compliments the service receives.
- Staff turnover and records of training and supervision for staff (aggregated).
- Relevant financial data on cost and expenditure.
- Individual records which should comply with data protection and accessibility requirements and also record not only personal detail and requirements but outcomes.
- Geographic Area
- Number and nature of complaints received and corrective action taken.
- Engagement and participation

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

Yes

No

If Yes, please provide the most up to date information provided by each organisation

Specialist Children's Services – see attached Partners in Advocacy 2024-2025 Quarter 4 report and Annual Report April 2024 – March 2025



2024-25 Q.4 MH
Report final.docx



MH Annual Report
2024 - 25 FINAL.doc

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Within Specialist Children's Services advocacy workers meet individually with young people. They offer drop-in information sessions, and they have held focussed groups about ward policies and safe phone and internet use.

Young people are automatically referred on admission allowing them the choice to engage with advocacy as they wish. It is a core domain within their care plans.

Advocacy also attend Skye House and offer drop-in sessions for young people less sure about what advocacy can do to support them.

Young people have consistently expressed satisfaction with their advocacy worker.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Processes within Council

No monitoring

Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Specialist Children's Services

- Promotion of the Advocacy Service:
- Advocacy drop-in sessions for young people and staff
- Focus Group sessions – explain the role of independent advocacy, safe internet use, service policies.
- Specialist Children's Services Communications – email, staff meetings etc

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

Within both Specialist Children's Services and the HSCP there have been a number of Advocacy drop-in sessions, specific communications to promote the service and details as to how to refer and consistent communications within staff meetings, emails and briefs. Routine referrals are made to advocacy services for young people admitted under detention to Skye House.

Advocacy attend all clinical meetings that young people wish them to. The staff ensure that they are included when young people request this.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
 No

If the budget has changed (either an increase or decrease) please say how.

The budget for Advocacy Services was reduced by 2.5% in 24/25.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

There has been no change to Service delivery at present, but this may change moving forward due to increased demographics and demand resulting in decreased provision and prioritisation of referrals.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
 No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Ceartas Advocacy which is our primary advocacy commissioned service will prioritise support to those subject to compulsory measures under Mental Health legislation and this remains a key priority.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
 No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

N/A

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

N/A

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for
3.11	How many organisations do you commission advocacy services from?	3
3.12	Can you please detail how many organisations you commission advocacy services from which cover the	
	Generic service (ie, it covers all the categories below)?	1
	People with a mental health/illness related condition.	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	2
	Children & young people with a learning disability	2
	Children & young people with ASD or ADHD	2
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	2
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	2
3.13	Can you please detail how many organisations you commission advocacy services from which cover the	
	- All ages	
	• Under 18 with mental health issues, learning disability	2
	• Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following	
	▪ Individual	3
	▪ Collective	1
	▪ Citizen	1
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	3

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£288,358 (2025/26)
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	It is not possible to break down the budget into the categories below – Ceartas Advocacy our primary commissioned adult advocacy service receive £267,617 in total, with £20,741 allocated specifically to support discharge from hospital. The remaining funding will support advocacy provision across the categories below. The remaining budget is accounted for by Who Cares? Scotland as detailed below.
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	Total budget allocated for Who Cares? Scotland is £20,741 Partners in Advocacy are funded separately

		central and NHS Greater and Glasgow budgets.
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	As above
	Children & young people with any other condition (specify)	In respect of Specialist Children's Services which is a hosted service within East Dunbartonshire. They report for 2024-25 that for Skye House their advocacy spend for was £51,755. This figure is not included within the HSCP figure of £288,358.

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	3
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	8.5 WTE

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

Consultation & Involvement

- 1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan**

Consultation & engagement process was undertaken in preparation for the Joint Advocacy Plan

- 1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan**

Engagement involved broad stakeholders including individuals, families, guardians ,statutory, NHS, third & independent sectors.

- 1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?**

Yes

No

Prisons and advocacy services

- 1.7 Do you have any prisons in your HSCP area?**

Yes

No

If No go to Q10

- 1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?**

Yes

No

If Yes, please provide details

- 1.9 Can you please outline how prisoners are informed about independent advocacy**

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- √ Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

- Have distinct mechanisms for service users, and carers to be involved in service redesign and review, taking cognisance of conflicts of interests
- Allocate resources in line with care group and population needs
- Ensure all service users have appropriate access to high quality information on how to access an appropriate advocacy service.
- Ensure that staff are appropriately trained to recognise the need to refer an individual to an advocacy service.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- √ Quarterly reporting
- √ Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- √ Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Feedback from users of the advocacy service e.g. questionnaire responses, as a measure of the quality of service provision. Annual surveys and evaluations also used to assess satisfaction.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

HSCP is responsible for providing access to independent advocacy within their locality with the focus on joint planning with Local Authorities and local voluntary sector advocacy services. All Social Work Teams, external partners are made aware of the provision of independent advocacy and can refer people directly for support. Referral routes are through individuals, services, families and 3rd sector partners. Public Protection Teams have an additional duty to record that advocacy has been offered to people/families referred to or are part of statutory process. We ask independent advocacy service to prioritise this work but it is also available across all services including inpatient learning disability services

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

- √ Yes
 No

2.2 If Yes, does it include independent advocacy?

- √ Yes
 No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

- From a local service where they are receiving care
 From home health board / local authority
 Both options above
√ Don't know
 Not applicable

Any further details

HSCP would not be routinely be informed about child patients being admitted to healthcare facilities outwith the area unless the child had been already receiving HSCP services.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Getting it right for every child Wellbeing Indicators – Safe, Healthy, Active, Nurtured, Achieving, Respected, Responsible, Included.
Included and Respected are key outcomes we seek to achieve, however we want all outcomes agreed that are personalised to the child to be recorded if achieved in order to help with evaluating overall impact of the service.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

-
- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

Quarterly and annual reports from commissioned provider

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Provider feedback periodically – quarterly and annually

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

Direct communication with HSCP

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Through our local Children's Services Planning Partnership structures as is multi agency. Specifically Education, Young Person's Services, Third Sector partners and local community organisations.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Advocacy Services have been proactive by attending HSCP SW teams to promote the service. Partners are also in attendance at local Forum and partnership events eg voluntary action events and Talking Points

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

Yes, we provide grant funding for adult services which has experienced a 10% reduction in 2024/25, however, due to financial pressures, the organisation worked with us to reduce the impact on direct support.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

The organisation worked with us to reduce the impact on direct support.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Referral are made through public protection arrangements, Social Work and mental Health

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

We have tried to prioritise retention of the budget, however, due to financial pressures 10% reduction was applied. We recognised this would impact the size of the waiting list and worked with the organisation to support the changes.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

We recognised this would impact the size of the waiting list and worked with the organisation to support the changes.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

We work with organisation to prioritise statutory requirements for advocacy support and referrals are received accordingly. This is monitored with regular reports.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for
3.1	How many organisations do you commission advocacy	
3.1	Can you please detail how many organisations you commission advocacy services from which cover the	
2	Generic service (ie, it covers all the categories below)?	2
	People with a mental health/illness related condition.	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the	
	• All ages	2
	• Under 18 with mental health issues, learning disability	1
	• Adults up to 65	1
	- Adults over 65	1

		Total number of organisations for
3.14	Can you please detail how many organisations you commission advocacy services from who offer the	
	• Individual	2
	• Collective	
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if	
	People with mental health problems * included as part of adult	£182,175.80
	*People with learning disability	
	*People with dementia	
	*People with autistic spectrum disorder	
	*Mental disordered offenders	
	*Homeless people with mental illness, learning disability, dementia	
	*Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem* included in childrens budget	£57,558.
	*Children & young people with a learning disability	
	*Children & Young people with ASD or ADHD	
	*Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	*Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify) * included in childrens budget	£153,394.50

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year -	£393,128.30 total budget awarded
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain- £ organisations have been funded annually	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- X HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- X Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

Stakeholder Survey undertaken to obtain feedback on effectiveness and importance of advocacy provision, barriers to advocacy and any gaps in service.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Service User/Carer focus group undertaken to obtain feedback on effectiveness and importance of advocacy provision, barriers to advocacy and any gaps in service.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Via information provided by Prison Healthcare

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Robust access to the service. Referrals Received, Referral Management (such as waiting list, gaps in service) Service User Feedback, Stakeholder Feedback and Complaints

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Attached to email.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

No unmet need identified by provider

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

The commissioned service gain service use feedback regularly. This also forms part of the contract monitoring and is a standing agenda item.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Via Service user groups & MH Carers Groups. Information in inpatient sites, awareness sessions facilitated by commissioned service. Attendance at ASP local and central groups and MHO forum awareness sessions.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Independent support to promote voice and participation and help to ensure understanding of processes and decision-making

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- X Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Currently both advocacy providers have an annual review. However, this will now be taken forward on six monthly basis with new reporting required to capture relevant data.

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- X No

If Yes, please provide the most up to date information provided by each organisation

We gather general information about numbers of children and young people but not specific to mental health or disability. This will be part of the data we gather going forward in the new contract management arrangements.

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

We gather general data about numbers of young people accessing the service and general themes. There is currently no specific data relating to mental health and disability. This however will be captured in the new contract management arrangements.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- X Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Signposting (in family meetings and via practitioners). Children's rights team is managed independently of children's services in order to promote objectivity and all children's houses have an allocated children's rights worker. Children accommodated in children's houses are given Shannon's Box which contains advocacy information, and have always been given children's rights information when they move into houses. Investment in Kooth and Togetherall website giving young people access to mental health support 24 hours per day.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- X Yes
- No

Please provide any further details below.

Team meetings. Regular liaison between children's services and business development (department independently managing children's rights team) to highlight and address issues, which are cascaded via core leadership team. Children's rights team manager attends social work governance meeting to influence practice and a group, chaired by Intensive Services Manager meets with the aim of governing the rights of children in secure. Children's rights workers are contributing to the 16+ review, and were involved in the development of the Children's Services Plan and family support strategy (published 2025).

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

X No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

X No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

X No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

X No

3.7 If the budget has changed (either an increase or decrease) please say how.

N/A

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

N/A

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

X Yes

No

If yes, please provide details

Yes, if young people are not already receiving advocacy support, though most young people receive advocacy through Skye House. Looked after young people would have the choice of continued support at the same time as accessing advocacy/ other support from Skye House, in order to promote choice.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

X No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	1 for Adult Services 2 for Children & Families
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (i.e., it covers all the categories below)?	
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	2
	Children & young people with a learning disability	2
	Children & young people with ASD or ADHD	2
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	2
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	2
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	2
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	3
	▪ Collective	1
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£744,000 per annum for Adults unable to split £116,000 for Children Services Overall Total: £860,000
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	Unable to split as covers all as detailed above
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	2
	2 years	
	3 years	1
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	14 Advocacy workers and two managers supported by the Glasgow funding for Adults 3.2 Full time Equivalent for Children Services

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?



NHSGGC Joint
Advocacy Strategy 20

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

The local advocacy provider was consulted throughout the consultation process. There were parts of the strategy that we needed specific responses to (e.g. delivery of advocacy service within Greenock prison). The draft plan was shared with the local provider for their comments.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Regular monitoring feedback from users of the advocacy service e.g. questionnaire responses, as a measure of the quality of service provision directly contributed to the development of the plan. The plan stipulates that ongoing feedback from service users should inform further service developments or changes.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

HMP Gateside Greenock prisoners in receipt of Prison Health care are able to access the independent advocacy service commissioned by Inverclyde Council.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Access to the service within Gateside Prison is assisted via the Prison Healthcare Mental Health Team.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Mental Health: Advocacy provision would come from the local area when people are in private healthcare settings. Even if patients are boarded out to Glasgow etc they have to be referred to the Advocacy service for the local area rather than their home area.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

- Safeguard Individuals who are in situations where they are vulnerable;
- Speak up for, and with, Individuals who are not being heard, helping them to express their views and make their own decisions and contributions;
- Promote empowerment of Individuals within Inverclyde who require help, in whatever context, to understand the options open to them and/or to make their own views known.
- Provide access to the Service to all Individuals within Inverclyde, who are aged 16 or over, regardless of gender, disability, sexual orientation, ethnic origin, faith/religion, or social background;
- Match Individuals and advocates appropriate to each situation's needs, seeking specialist support where indicated and ensuring the Individual's comfort at all times;
- Support an Individual who, because of incapacity or communication difficulties, may not be able to express their needs or views;
- Guide an Individual towards self-advocacy and avoid creation of dependency;
- Help the Individual to access and understand information relevant to them and make appropriate choices or decisions which give them fuller control of their lives;
- Develop links with service providers, professionals and relevant support organisations to ensure clear understanding of the role of advocacy;
- Promote advocacy as a service for 'hard to reach' groups, e.g. racial minorities, homeless people, Gypsy/Travellers, substance misusers etc.;
- Provide advocacy for an Individual during the mental health tribunal process, helping clients prepare and accompanying them, as requested;
- Provide advocacy support at care review and other meetings, as requested;
- Assist Individuals in developing advance statements and person centred plans;
- Provide advocacy for Individuals challenging their level of security.

Ensure agencies are fulfilling their statutory duties

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Monitoring activity is in an agreed format between the Council and provider and supplied by the provider monthly.

Contract monitoring of the service in line with Inverclyde HSCP's Contract Management Framework.

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation



HSCP-Advocacy.xlsx

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

No current waiting list.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

An identified action within the Joint Advocacy Strategy is that monitoring processes will include monitoring feedback from users of the advocacy service e.g. questionnaire responses, as a measure of the quality of service provision.

Questionnaires for service users are also utilised in local HSCP contract monitoring.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

- The advocacy provider will promote understanding of advocacy in general and market its own services in particular. This may take the form of advocacy 'surgeries', advocacy workshops and/or training for partner organisations.
- The advocacy provider will publicise the availability of the service using, as a minimum, a service website and by having a presence on social media.
- The advocacy provider will make available information, for example leaflets and posters, on their service which they should place in Health and Social Care establishments and other public places.
- Promoting a rights-based approach in the workplace when working with patients/service users and fulfilling statutory duties.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

Discussed and encouraged at team meetings and individual supervision. New provider Voiceability already scheduled to attend team meeting 28th April 2025. Advocacy referrals required to be considered through the Adult Support and Protection legislative process.

Adults with Incapacity Act process requires advocacy input. This means consideration is given to both agreed referrals and non-instructed advocacy. Local Authority Supervising Guardians required to consider Advocacy in this process. Assessment process in social work requires consideration of advocacy referral. MHOs required to promote rights of people subject to Mental Health Act, one of these rights is the right to advocacy. Best practice promotes use

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No



07 Inverclyde
Children's Services Pl:

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

6 is the number of out of area children and young people supported through our commissioned Advocacy provider.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

To ensure equality of access to services particularly for those groups which may otherwise be excluded. The provision of advocacy seeks to ensure the ability of an Individual to have an equal voice in consideration of response to their needs.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

We only commission one service to provide Childrens Advocacy.

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Not Applicable

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Service promotes its service through its website and social media channels.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Provider supplied information that was sent out to all C&Fs staff to promote service at start of Contract.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

The budget has recently increased to accommodate the provision of advocacy for individuals referred by the Alcohol and Drug Recovery Service under MAT standard 8.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Increased capacity to accommodate referrals under MAT standard 8.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Services are triaged as follows:

1. Mental health tribunals
2. Adult protection and child protection investigations
3. Adult protection and child protection conferences
4. Homelessness (threat of) Emergency Detention Serious abuse issues financial crisis
5. Hospital care and treatment Guardianship
6. MAT Standard 8 referrals
7. Complaints
8. Self Directed Support
9. Debt
10. Benefits
11. Community Care Assessment Process
12. Housing Issues
13. General

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

Increase in budget of £5000 in 2024.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

The increase was to reflect that there had not been an increase since 2021,

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	1
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	0
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	2
	▪ Collective	0
	▪ Citizen	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	2

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	Adult – £138,187 Children – £85,000 Total – £223,187
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	N/A
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	1
	3 years	1
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	Adult – 2.7 FTE Children – 2 FTE

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

Advocacy strategic plan has been progressed via Greater Glasgow and Clyde NHS Board wide with all 6 HSCPs working together. West Dunbartonshire HSCP have commissioned advocacy services based on this plan.

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

The plan was developed by undertaking stakeholder survey, ensuring feedback on current provision and highlighting any barriers to provision. It ensured that any gaps of service were addressed.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Feedback was obtained on current services and barriers/gaps to provision via service user and carers focus groups.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Accessibility of service
Number of referrals received
Referral management (including waiting list)
Service user feedback
Stakeholder feedback and complaints

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

See attached

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

See attached

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

No unmet need identified by provider, however there can be a waiting list due to demand.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

West Dunbartonshire HSCP are currently working with the advocacy provider to develop an agreed process for service user feedback and this will be part of the contract monitoring.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

With the new contract which is in place, we have developed communication to staff and service users. Staff will also engage with the advocacy service to ensure it is always considered.

All people referred to Mental Health Services receive an information leaflet that contains advocacy service information. All people subject to statutory measures are routinely referred to local advocacy services by the Mental Health Officer Team.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

We are currently reviewing our Integrated Children's Services Plan and ensuring there are actions around Advocacy. The provision and increase of advocacy provision has featured as part of our Promise Plan.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Children and young people who are care experience have commissioned advocacy service.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

The total spend is £224k per year

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

n/a

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

The resource is able to cover all range of need however priority is given to those detained under the Mental Health Act or those subject to Adult Support and Protection and Adults with Incapacity Act.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

We commission Who Cares? for care experienced children and young people. This budget has increased to £89,138.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

More hours available for advocacy support (21 to 35 hrs per week). Created Development Officer to facilitate the Champions Board.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	0
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	0
	Children & young people with a learning disability	0
	Children & young people with ASD or ADHD	0
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	0
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	1 (Who Cares? Scotland) Lomond and Argyll Advocacy Service
	▪ Collective	1 (Who Cares? Scotland) Lomond and Argyll Advocacy Service
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	0

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	313,00 Adult £224k Children £89k
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	£89,138.50
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1 (Who Cares? Scotland) 3 LAAS
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	2 (Who Cares? Scotland)

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?



NHSGGC Joint
Advocacy Strategy 20

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

N/A as GGC wide

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

N/A as GGC wide

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Unknown

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

- a. Service Users will be better informed about their rights;
- b. Service Users, who are vulnerable, discriminated against or find it difficult to access services, will have their rights to services protected;
- c. Service Users will gain access to information and, as a result, will have a better understanding of their options in relation to services and will be better able to make their views and wishes known and make informed choices;
- d. Service Users will feel more confident and will be enabled to express their own needs, make their own decisions and have more control over issues that affect their lives when dealing with health, social care or legal interventions in relation to health or social care services;
- e. Service Users will be encouraged and empowered to take action on their own behalf;
- f. Service Users will benefit from having an advocate speaking on their behalf when they are unable to do so for themselves;
- g. Service Users will have their issue resolved to the extent that is reasonably possible;
- h. Service Users and the wider community will be better informed about the benefits of independent advocacy.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Professional Independent Advocacy Service provides quarterly management reports detailing uptake and demand – 192 people accessed the service in the last quarter.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

Our provider confirmed there is no unmet demand in their reporting.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Our provider issues satisfaction surveys each quarter and reports on the results.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

We only require "significant" complaints to be submitted to the HSCO – all other types of complaints are reported through ¼ management reports

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

The provider organisation has the responsibility to promote their services and do so via a range of methods. The provider has shop front premises in the area and an online presence. The service is also promoted on the HSCP website

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No



Renfrewshire_Children_Services_Partnership

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

x Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

X No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

X No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

X No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	<ul style="list-style-type: none"> ▪ All ages 	
	<ul style="list-style-type: none"> ▪ Under 18 with mental health issues, learning disability 	1
	<ul style="list-style-type: none"> ▪ Adults up to 65 	1
	<ul style="list-style-type: none"> ▪ Adults over 65 	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	1
	▪ Collective	1
	▪ Citizen	1
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	Adults provider budget is currently £171,964 + £30,250 for a dedicated Alcohol and Drugs advocacy worker
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	
	3 years	
	4 years	1
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

1.1. The service will, as a minimum standard, be delivered in accordance with the Principles and Standards published in 2008 by the SIAA.

1.2. Key Aims of the service are as follows:

- i) To develop, manage and deliver a professional independent advocacy service which meets the requirements of this specification
- ii) To provide a professional independent advocacy service for those individuals affected by the Adults with Incapacity (Scotland) Act 2000
- iii) To provide a professional independent advocacy service for those individuals who may be deemed at risk of harm (or) in terms of the Adult Support and Protection (Scotland) Act 2007
- iv) To comply with the responsibilities detailed in section 259 of the Mental Health (Care and Treatment) (Scotland) Act 2003
- v) To comply with all other relevant legislation that is in place during the course of the contract.
- vi) To provide a service that is flexible and responsive
- vii) To provide a service that is accessible to adults across the Argyll and Bute area
- viii) To ensure that all staff maintain acceptable standards of skills and qualifications
- ix) To meet the outputs and outcomes noted at 4.4 and 4.5 below.

1.3. The key outputs expected from the service are:

- i) Professional independent advocacy services for eligible persons to ensure that their rights are protected under the relevant legislation outlined above
- ii) Support for the Service User to ensure that his/her rights are respected and his/her needs and wishes are taken into account when decisions about them or their circumstances are being made in relation to health, social care or legal interventions in relation to health or social care services
- iii) Speaking on behalf of Service Users when they are unable to do so for themselves in respect of specific issues that fall within the scope of the relevant legislation outlined above, including representation at Mental Health Tribunals/children's hearings and court
- iv) Providing relevant information to Service Users and their carers about the Service Users' rights, legal or professional processes which impact on Service Users and their lives and about professional independent advocacy services
- v) Speedy and flexible responses in meeting Service Users' needs
- vi) Obtain feedback from adults/children and young people about their overall experience with the advocacy service and the adult support and protection process/child protection process/mental health/other.

1.4. Anticipated outcomes for people using this service will include:

- i) People who are vulnerable and discriminated against, or who find it difficult to access services that they need, having their rights to services protected
- ii) Empowerment for people who need a stronger voice by enabling them to express their own needs and make their own decisions when dealing with health, social care or legal interventions in relation to health or social care services
- iii) People gaining access to information and understanding their options in relation to services, and making their views and wishes known
- iv) People having an advocate speaking on their behalf when they are unable to do so for themselves

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

145 active cases as at January 25

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

The provider reports on the number of referrals not met within 10 days, they are not asked to report on outstanding referrals.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Satisfaction surveys have been used to date, the provider is currently exploring alternative means to gather information.

We are commencing work to look at how qualitative reports can also be incorporated

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Our advocacy partners are well known to our area and to services that may require them, for instance the phone numbers are on inpatient ward wall

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

There are no formal advocacy arrangements in place for children and young people, there has been an appointed participation officer who will focus on care experienced children and young people providing targeted advocacy and voice

mediation services can play a part in supporting young people and family through arrangement through participation officer post

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Not to date – we are currently renegotiating adult input and costs

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

The “priority one” clients are those subject to any legislation – MH Act, AWI etc, we do not restrict to those clients just ask that they are prioritised and Advocacy see many others out with who can self-refer

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	3
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	2 under LA funding
	Generic service (ie, it covers all the categories below)?	0
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	0
	Children & young people with a mental health problem	0
	Children & young people with a learning disability	0
	Children & young people with ASD or ADHD	0
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	2
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	0
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	0
	▪ Under 18 with mental health issues, learning disability	2
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	2
	▪ Collective	1
	▪ Citizen	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	Not covered in service Spec

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	£180,880
	People with Substance misuse problems	£70,840
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	£110,398 between the two orgs.
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	3
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed:

We have recently started to develop a new Advocacy Strategy to align with the expected tender for advocacy services in 2026. It is expected that the Strategy will be completed by early Autumn 2025.

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

We have already had initial discussions with all Advocacy Providers during our quarterly monitoring meetings and have indicated that we will be arranging to meet with them shortly to work with them to develop a plan that meets the needs of people in Highland.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

As above, we have spoken with the providers of current Advocacy services to ask for their help in consulting with people who use advocacy services. It would be our intention to try and reach people through face-to-face meetings and through written submission to seek their views. It is also our intention to make use of the NHS Highland Engagement Hub to provide an online option for people across Highland, particularly people who may not currently use advocacy services or who would prefer to feedback in a different way or do it in a way that is anonymous.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes (Ongoing throughout the process)

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

The current providers do not provide advocacy services to prisoners. However, ex-prisoners can access advocacy once they have been released from prison should they be eligible under the remit of the advocacy services.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Where an individual is moving to or from Highland, the Provider will liaise with other advocacy services to continue or pass over any identified support need to them within a reasonable timeframe.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

MH Care & Treatment Act (Scotland) Outcomes:

- Supported Persons are enabled to have control over their lives and to make their views known about the issues that affect them.
- Supported Persons are supported to speak up for themselves or with the assistance of an advocate.
- Supported Persons are enabled to make informed choices.
- Supported Persons are empowered, where possible, to become involved in decisions which affect them.
- Supported Persons have their voices heard by service providers and professionals where possible.
- Supported Persons sense of isolation when raising a difficult issue is reduced.

Carers Advocacy Outcomes:

- Carers are enabled to have control over their lives and to make their views known about the issues that affect them and the Cared-for Person.
- Carers are supported to speak up for themselves or with the assistance of an advocate.
- Carers are enabled to make informed choices.
- Carers are empowered, where possible, to become involved in decisions which affect them and the Cared-for Person.

- Carers have their voices heard by service providers and professionals where possible.

Highland Alcohol & Drug Partnership – Advocacy Outcomes:

- Access to independent advocacy will be strengthened in the programme areas allowing more people with an alcohol and/or drug issue to benefit from independent advocacy provision.
- We will provide accessible information in a range of formats to promote the service to advocacy partners and other key stakeholders.
- Our advocacy workers are trauma-informed practitioners and our approach to the delivery of the service will support the Human Rights PANEL principles (as do the Principles, Standards and Code of Best Practice for Independent Advocacy, SIAA 2019) as discussed in the HADP Alcohol & Drug Strategy 2020-2023.
- Our work will support advocacy partners to access and benefit from effective, integrated, person-centred support to achieve their recovery (HADP Alcohol & Drug Strategy 2020-2023) by ensuring that we promote and protect individual rights to empower our advocacy partners and assist them to claim those rights.
- Our advocacy partners, supported by paid and/or peer advocacy involvement will feel better prepared and more confident for discussion and dialogue with key decision-makers in health and social care, the justice system, housing services and others.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Data covering period 1st April 2023 to 31st March 2025

- Partners in Advocacy (Independent Carers Advocacy): 342
- Advocacy Highland (Independent Advocacy, MH (Care and Treatment) (Scotland) Act 2003): 1,126

Data covering a different period:

- SPIRIT Advocacy (Collective Advocacy, MH (Care and Treatment) (Scotland) Act 2003) (High-level data provided from August 2023 to end March 2025): 415
- Highland Advocacy Partnership (Highland Alcohol and Drugs Partnership – MAT Standard No. 8 – Advocacy) (service commenced 20th Nov. 2023, so data provided covers this date up to end of March 2025): 133

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

In relation to independent issue-based advocacy, we monitor the length of time from referral to initial contact during our quarterly meetings with the providers. Providers also monitor referrals, and we discuss those that are inappropriate, noting any trends, patterns or concerns.

A recent example is around one provider noting a sharp increase in referrals received from parents involved in child protection processes, which are not eligible for advocacy support under the current contract. The provider has identified this as an emerging need and is seeking additional funding to enable appropriate support to be provided.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

All providers survey those using their services for satisfaction. This is discussed during our monitoring meetings.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

All providers are well known in the area. However, all regularly advertise across Highland through social media, posters, leaflets, and word-of-mouth. We also facilitate awareness raising internally and invite the providers to internal meetings with social work, Carers Services etc. so that staff are informed of Advocacy.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

- Yes
- No

2.2 If Yes, does it include independent advocacy?

- Yes – refers to and supports the Highland Participation Strategy
- No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Where we have Children & Young People (CYP) placed in an in-patient unit which are out with Highland, Social Work staff undertake Advocacy for those CYP, or they will signpost for the right Advocacy support. This could be legal services or Advocacy Highland for young people aged over 16.

Without a clearer definition around 'or related condition', it makes it difficult to for us to define. However, if we focus on CYP with a Mental Illness or Learning Disability then this information is not captured as this would be through CAMHS to Dudhope or other units in Glasgow.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Care Experienced Young People (CEYP) voices are heard. We commission Who Cares? Scotland for holistic advocacy support, not specifically CYP Mental Health, but not excluding this either.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

WhoCares? Scotland are not commissioned specifically for the above, their service is for a holistic advocacy for CEYP, so this would be N/A

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

In relation to complaint monitoring - the last quarter review information revealed no complaints, this was for Q4 24/25. In respect of Q1 25/26 these are only processed after the 10th day of the month, so no data held currently.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Awareness raising is undertaken by signposting within Children's Services (Health and Social Care) for both the child and the adults (parents). Which means that if we assess that the parent also needs an advocate too that will be actioned by this service.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Information for practitioners: as part of practitioner training and our guidance around Better Meetings, asks the practitioners to offer the chance to meet with an independent Advocate. Also with our Customer Complaints Policy, in respect of Equality and Mental Health Legislation, we are required to ensure that they have a legal right to independent Advocacy.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Advocacy Highland – Prioritisation of referrals:
At present referrals are dealt with in turn and only prioritised if there is an urgency and/or severity of the issue, for example, a Mental Health Tribunal or an Adult Support & Protection issue.

To meet the high demand and competing priorities we ensure that priority is given to individuals in relation to their care and treatment, specifically people who:

- are subject to compulsory measures,
- have a statutory right to access advocacy,
- have an urgent deadline e.g., MH tribunal,
- have Health & Social Care issues.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people’s mental health/learning disability independent-advocacy organisations changed over the past two years?

- Yes
- No

3.7 If the budget has changed (either an increase or decrease) please say how.

Yes, with the implementation of a contract with WhoCares? Scotland who are commissioned to deliver a holistic advocacy service for Care Experienced Young People. Funds have been allocated to enable this commissioning to. Budget allocation is detailed in Section 3.16.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

For CYP, the Highland Alcohol and Drugs Partnership have submitted a joint funding application with Partners in Advocacy to the Corra Way Forward for Families Fund, for independent advocacy for children and young people affected by alcohol and drug use in their families. The outcome of this application is awaited. If successful, it would provide funding for three years to the value of £335,748 (Corra funding plus match funding from HADP).

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	Adults: 3 (two providers hold two contracts for different types of advocacy) Children & Young People: 1 (unrelated to Mental Health – it is for CEYP Advocacy Support)
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	2 – Advocacy for adults with a mental health/illness condition, learning disability or dementia. 1 – Advocacy for adults affected by alcohol and drug use
	People with a mental health/illness related condition.	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Up to 26 years (CEYP) (added in as not an option here)	1
	▪ Under 18 with mental health issues, learning disability	
	▪ Adults up to 65	3
	▪ Adults over 65	3

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	3
	▪ Collective	1
	▪ Citizen	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	<p>Annual Budget:</p> <p>ADULTS: £552,873 per annum (Advocacy provided under the MH Care & Treatment (Scotland) Act & Carers (Scotland) Act)</p> <p>£75,000 for Highland-wide advocacy service to support achievement of MAT Standard No. 8</p> <p>CHILDREN & YOUNG PEOPLE: £199,500 per annum</p>
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	Not possible for adult's advocacy due to the broad spectrum of advocacy delivered by each organisation.
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	£199,500
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	CEYP - one
	2 years	Adults – two organisations delivering one joint contract (MAT Standard No. 8)
	3 years	
	4 years	
	5 years	Adults – three organisations* *3-year contract, with 2-year extension.
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	Adults – 13.98 WTE Children & Young People – 4 staff on the ground, a supervisor and a manager.

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

There is a Lanarkshire Advocacy Planning Group that supports the completion of the pan-Lanarkshire Advocacy Plan. The group meets periodically to discuss provision, planning, opportunities and gaps.

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

https://www.southlanarkshire.gov.uk/downloads/download/905/lanarkshire_advocacy_plan_2020-2025

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes In the process of completing the next advocacy strategy 2025 -2030
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

n/a

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

Survey sent out to all advocacy providers – this influenced the direction for the new plan.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Survey – furthermore, we will invite all interested parties to the launch of the new Advocacy Strategic Plan.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

Equal Say [adult advocacy provider] provides advocacy services in Shotts Prison.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Through the prison healthcare team, welfare officers and prison-based social work team. Promotional materials are also distributed.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details If a person is located in a healthcare facility out with NLC on a temporary basis, they will continue to receive advocacy from the NLC commissioned advocacy service. If the person locates on a permanent basis, advocacy will be provided by the host local authority commissioned service.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Outcomes are determined by the person using the service. Key outcome is to ensure that the voice of the person requiring advocacy is involved and listened to whilst decisions that affect their lives are being made. Other expected outcomes: Increased voice and personal control; Had rights upheld; Challenging injustice; Increased independence.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

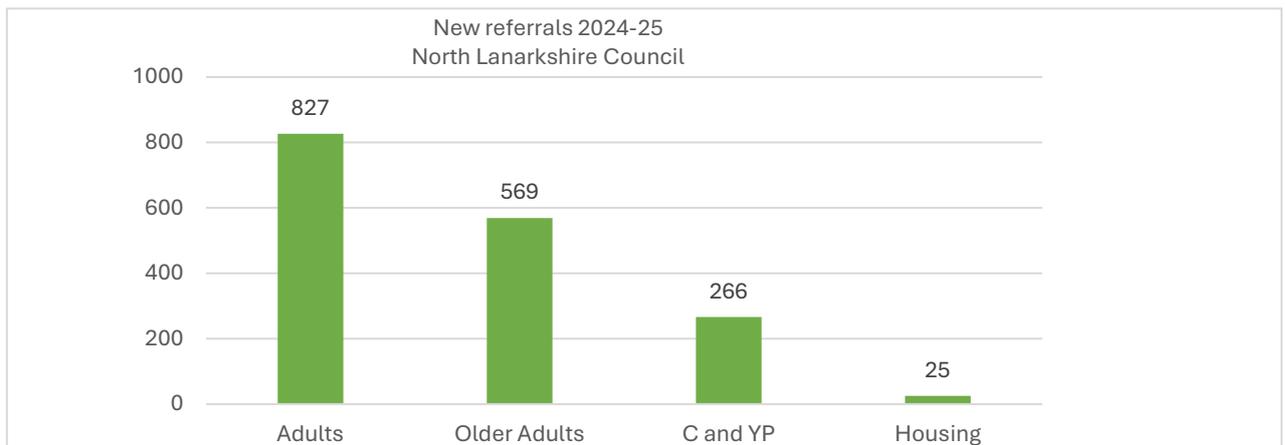
1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

For ease, please see undernoted a table that chronicles new referrals to the respective services from 1 April 2024 – 31 March 2025.



1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

If there is a waiting list for advocacy, this would be discussed at monitoring meetings and measures applied to reduce.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Advocacy providers are expected to report on this. Also, contract monitoring officers seek information about quality of service whilst undertaking monitoring visits. Monitoring officer attended the Annual General Meeting of advocacy provider, enabling her to seek views from people who use services, their carers and people who make referrals.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

If necessary, complaints are discussed at monitoring meetings. If of a serious nature, arrangements would be made to address immediately.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Information about advocacy services is published on the NLC website.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

If a person is in a healthcare facility out with NLC they will continue to receive advocacy from the NLC commissioned advocacy service.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Outcomes are determined by the person using the service. Key outcome is to ensure that the voice of the person requiring advocacy is involved and listened to whilst decisions that affect their lives are being made. Other expected outcomes: Increased voice and personal control; Had rights upheld; Challenging injustice; Increased independence.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

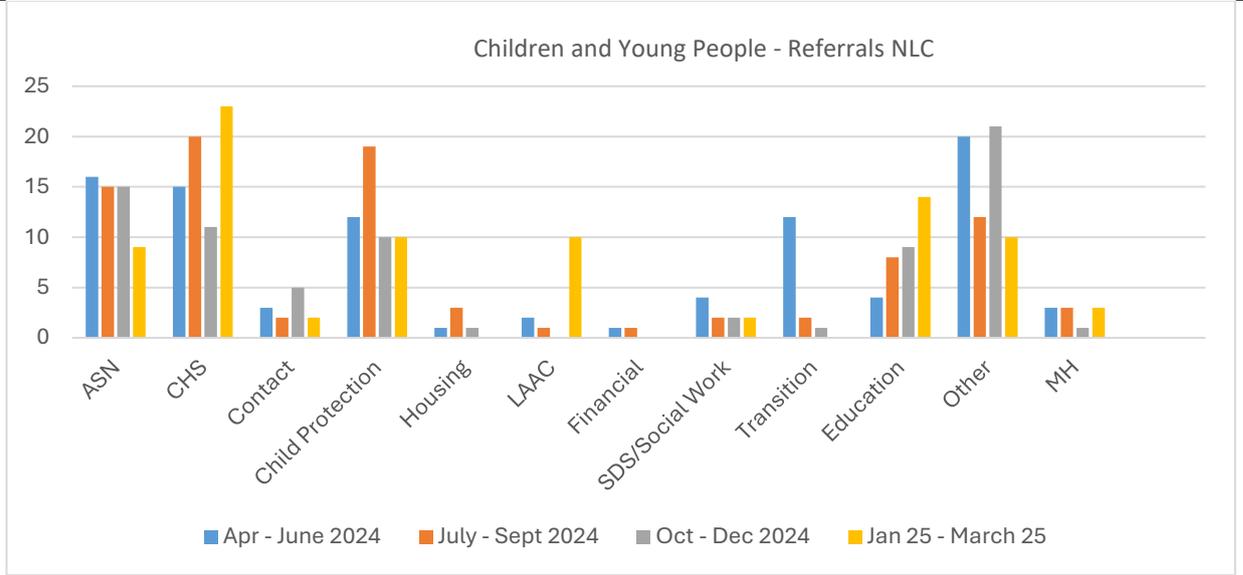
- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

Undenoted table depicts the referrals to Who Cares? Scotland April 2024 – March 2025. There were 55 referrals for children affected by learning disability and associated conditions [ASN], a further ten related to mental ill health. Please further note that referrals are logged according to the presenting issue. For example, a child or young person might be referred because they are subject to Child Protection procedures, but they may also have a learning disability or are affected by mental ill health. The referral though is logged as Child Protection, not MH or LD.



2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Provider of advocacy services gathers this information via their exit strategy documentation.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

If necessary, complaints are discussed at monitoring meetings. If of a serious nature, arrangements would be made to address immediately.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Through Council website, and organisations linking with localities and other organisations.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Staff briefings from advocacy providers.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

Very slight decrease to overall budget. Reconfigured service provision to rationalise management and office costs, so very little impact upon service delivery.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Early days as the contractual value has only just been reduced when the contract went out to tender and new service commenced delivery on 1 March 2025. We will monitor usage of the service and any impact as the new service embeds practice.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Through our commissioning process and Details of Requirement that stipulates legislative priorities.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

n/a

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

No change in budget.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

The service for children and young people is going out to tender and will commence delivery on 1 March 2026. Service change/impact will be monitored from then.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

This imperative is included within contractual Details of Requirement.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	3
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	1
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	3
	▪ Individual	3
	▪ Collective	1
	▪ Citizen	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	2

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	968,694.00
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	Block contract with fixed costs to provide generic services to adults and similar arrangement for service for children and young people.
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1
	2 years	
	3 years	
	4 years	1
	5 years	1
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	Circa 25

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?



SWR_Lanarkshire_Ad
vocacy_Plan_2020_25

This plan is currently being refreshed and a new plan in development for 2025/2030
It is a pan Lanarkshire plan, covering both North and South University HSCPs.

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

The current plan was developed in the midst of COVID, and no public event was held to gather information from all stakeholders, at the time three surveys were drafted, one for staff, one for provider organisations, and one for advocacy partners (service users) all positively supportive of the Plan.

The refreshed plan is currently in development and provider organisations have been engaged in its design process, and it is hoped to have a launch event to include representative stakeholders and raise awareness to the importance of Advocacy.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Three surveys were drafted, one for staff, one for provider organisations, and one for advocacy partners (service users) all positively supportive of the Plan.

The refreshed plan was circulated to provider organisations, those organisations were also asked to capture advocacy partners experience of advocacy, and there are many quotes within the plan from the voice of those using our Advocacy Services.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes Our EIA process, is now part of a wider Integrated Impact Assessment.

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Poster and leaflets in the health centre and education wing of the Prison.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

If a South Lanarkshire person is temporarily out of area, our commissioned service will provide support. For instance, if detained in Leverndale or Stobhill. Anyone placed in South Lanarkshire by another Local Authority would also be supported by our commissioned service no matter where they originally came from. A good example is the Dungavel Detention Centre.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Advocacy Partners have their wishes, views, values, and preferences taken into account within any decision-making processes.

Advocacy Partners have their human, legal and other rights safeguarded, and others, involved in the care and support of such Persons will be aware of the centrality of such rights.

Advocacy Partners feel able to have some ownership and involvement in shaping the service and will be central to the development of a Quality Assurance Framework which will be used to obtain stakeholder experiences of Advocacy Services.

Advocacy Partners feel supported to address stigma, combat discrimination and feel that the Services promote their inclusion through the development of promotional strategies.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation



SLC CM Report QTR
4 2025.pdf

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No no waiting lists

If Yes, please provide the most up to date information (within the last year) available

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Advocacy Providers Complaints Procedures, HSCP Complaint Procedures, opportunities to engage with People using advocacy services, linking with Mental Health Officers and other Health and Social Care Staff. Care Opinion is also used in this HSCP area.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting**
- Monitoring meetings**
- Complaints proforma submitted to HSCP**
- No monitoring
- Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Advocacy Plan has dedicated Action Plan on Communication and Advocacy Awareness:
Develop publicly accessible Advocacy Information in range of formats.
Promote advocacy services amongst staff through training/awareness session and ensure information is available through a wide range of methods to members of the public.

Awareness sessions have taken place amongst a range of staff groupings, provider forums, and general information events. All web content is regularly reviewed and updated.

Launch Event being considered for new plan.

Self-Directed Support Team host regular briefings, Advocacy has been a feature of these online briefings.

Reports have been provided to Committees/Forums.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes – as referenced above**
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy – a guide for commissioners* (2013).

- Yes – formed part of the tender Specification**
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes SLC

No

2.2 If Yes, does it include independent advocacy?

Yes –SLC plan makes reference to strengthening Advocacy for Children and Young People, and Children and Young People Advocacy reference in Advocacy Plan.

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Advocacy Partners have their wishes, views, values, and preferences taken into account within any decision-making processes.

Advocacy Partners have their human, legal and other rights safeguarded, and others, involved in the care and support of such Persons will be aware of the centrality of such rights

Advocacy Partners feel able to have some ownership and involvement in shaping the service and will be central to the development of a Quality Assurance Framework which will be used to obtain stakeholder experiences of Advocacy Services.

Advocacy Partners feel supported to address stigma, combat discrimination and feel that the Services promote their inclusion through the development of promotional strategies.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation



2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

Advocacy Providers Complaints Procedures, HSCP Complaint Procedures, Children's Rights Easy Read Complaints Procedures. Opportunities to engage with Children and Young People using advocacy services, linking with Mental Health Officers and other Health and Social Care Staff, Children's Service Planning Partners, Child and Family Social Work Staff, Family Hubs. Links with Children's Commissioner NHS Lanarkshire.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting**
- Monitoring meetings**
- Processes within Council**
- No monitoring
- Other (please specify)

Links with Children's Partnership Planning Partners and Children's Commissioner NHS Children's Complaints Procedure recently developed as part of UNCRC legislation. Care Opinion also an option in this HSCP area.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Advocacy Plan has dedicated Action Plan on Communication and Advocacy Awareness: Develop publicly accessible Advocacy Information in range of formats. Promote advocacy services amongst staff through training/awareness session and ensure information is available through a wide range of methods to members of the public.

Awareness sessions have taken place amongst a range of staff groupings, provider forums, and general information events. All web content is regularly reviewed and updated.

Launch Event being considered for new plan.

Self-Directed Support Team (includes Children with Disability Group) host regular briefings, Advocacy has been a feature of these online briefings.

Reports have been provided to Committees/Forums.

Children's Services Partnership has had Advocacy representation.

Children's Advocacy in SLC currently in process of Tendering for new service provider.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

As referenced above

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

Moved to one provider in South for all Adult Advocacy and added some Carers Act funding to facilitate Carers Advocacy as part of legislation.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Services merged, as TUPE impact of tender. Table of priority work areas included as part of tender.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Promoted across websites, leaflets, Mental Health Act priority cases but Advocacy provided across a range of categories

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

In light of Scottish Government's Children's Hearing System Advocacy Support arrangements, services to children in South were reviewed, and pathways developed as two different providers operating in area.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

Service pathways developed, children's service focussed on children in need of support and protection.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	1 for Adult Advocacy – Equal Say 1 for Children and Young People Advocacy – Who Cares? Scotland
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	Equal Say
	People with learning disability	Equal Say
	People with dementia	Equal Say
	People with autistic spectrum disorder	Equal Say
	Mentally disordered offenders	Equal Say
	Homeless people with mental illness, learning disability, dementia	Equal Say
	Carers of people with mental illness, learning disability, dementia	Equal Say
	Children & young people with a mental health problem	Who Cares? Scotland
	Children & young people with a learning disability	Who Cares? Scotland
	Children & young people with ASD or ADHD	Who Cares? Scotland
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	Who Cares? Scotland
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	Who Cares? Scotland
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	As above
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	
	▪ Adults up to 65	

	<ul style="list-style-type: none"> ▪ Adults over 65 	
		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	<ul style="list-style-type: none"> ▪ Individual 	2
	<ul style="list-style-type: none"> ▪ Collective 	1
	<ul style="list-style-type: none"> ▪ Citizen 	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	

Budget Information

		Total budget for each category
		£
3.16	What is your total advocacy budget?	(Addictions, ADP budget) £171,659.00
		£669,259.00
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	£380,000.00
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	Included in £380,000
	Children & young people with a mental health problem	£117,600.00
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	
	3 years	
	4 years	
	5 years	Equal Say
	Over 5 years	
	Other – please explain	Who Cares? Scotland – Tender planning
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	Equal Say 9 Core staff Who Cares? 2.5FTE

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

HSCP and Children's Services

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Work is due to begin with partners in September, which will define the process and timescales.

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

We will be holding development sessions in HSCP with advocacy providers. Children's services are currently reviewing the current provision to increase capacity.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

We will involve people who use advocacy services in development of the strategy and an Equality Impact Assessment will be completed.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

Advocard provide independent advocacy for people detained within HMP Edinburgh.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

People in prison are informed through Prison Officers, NHS and Social Work staff. Information on the service is regularly shared with staff within the prison.

The advocacy service within HMP Edinburgh is provided by AdvoCard. Prisoners are aware of their service as the service is in the induction booklet all prisoners are provided with upon admission. The referrals to AdvoCard are also made by the prisoner requesting this through the Links form (internal referral form available to prisoners on the hall). Professionals can make

referrals to AdvoCard and PBSW discuss this service with prisoners during appointments and a referral is made if the prisoner and PBSW feels this would be beneficial. PBSW also facilitate joint meeting with the prisoner and the AdvoCard work where appropriate.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

- To Empower individuals and ensure their rights and needs are met.
- Voice and representation – to ensure individuals can express their views preferences and concerns regarding their care and treatment.
- Access to information – provide clear and accessible information so individuals so they understand their rights, options and services available to them
- Empowerment to make informed decisions about their care and advocate on their behalf.
- Support to navigate services – help with what can be complex systems and processes
- Rights protection – safeguarding individuals rights and ensure services are delivered in a respectful and dignified manner
- To facilitate channels for individuals to share their experiences and feedback to inform service improvement
- Recognise the diverse needs of individuals including cultural, linguistic and disability considerations
- Provide support along with others during crises to help individuals receive appropriate care and support

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review

- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Advocacy services in HSCP provide reports and are monitored at contract review meetings on a 6 monthly basis. Service user feedback and testimony is included as part of the monitoring. NHS services report and are reviewed 6 monthly.

As part of Children's services review of advocacy services and development of our advocacy strategy we are looking at how we can improve monitoring and evaluation

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Please note these figures are for 1 year.

Mental Health : Advocard;

1st Year of contract: 1100 accepted referrals

Last 6 months 595 accepted referrals

Collective: average attendance between groups is around 200 people

Volunteers: additional 300 people supported per annum

CAPS:

Out of Sight Out of Mind: 519

Peer Forum: 104

LGBTQIA+ : 135

Lot 3

Partners in Advocacy - advocacy for adults 16+ with:

- Learning Disabilities
- Autism
- Dementia
- Physical Disabilities
- Sensory Impairment
- Older People - Aged 65 or over who have no one else to speak on their behalf

1st Year of contract: 495

Last 6 months: 197

Collective: 68 people on average

Volunteers (newly established service): 17

Carers:

VoiceAbility:

1st Year of contract: 116

Last 6 months: 91
Collective: not reported but low number, conducting various attempts to establish groups.
VOCAL:
Provided advocacy to 124 Carers (year to December 2024).

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

PiA reported that referrals of people without a statutory element are recorded as unmet need. To address this they have piloted a volunteer service which provides early intervention and understanding of this work will provide further insight into unmet need.

Services generally report a rise in complexity of cases with multiple issues per person. The trends they reported were:

- Mental Health Act referrals remain high
- Rise in adult with Incapacity Act issues
- Rise in adult support and protection cases
- Rise in child protection referrals, whilst this remains small it will be monitored
- Sharp rise in referrals from patients wishing to appeal their Compulsory Treatment Orders (CTOs)

This is not an exhaustive list but highlights the main trends.

Providers have been working to keep waiting lists down and have developed volunteering packages to support people to engage with individual and collective advocacy services as appropriate .

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Services undertake reviews with people using their services and report on these at contract reviews.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

HSCP monitoring form has a section to report any complaints which are then discussed at 6 monthly contract review meetings.

CEJS don't currently monitor complaints.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Advocacy partners do this as part of individual contracts. Services are promoted through internal systems and adult support and protection processes. People are signposted through Social Care Direct.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Service specification attached

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

The advocacy service provides awareness initiatives. Reviewing officers also provide awareness

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

However, we are currently reviewing the budget and service level agreements.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Advocacy services are separated into different Lots for the following list and people have access to advocacy through those routes.

Lot 1: Mental Health

Lot 3

- Learning Disabilities
- Autism
- Dementia
- Physical Disabilities
- Sensory Impairment
- Older People - Aged 65 or over who have no one else to speak on their behalf

Lot 4 : Carers

Independent and Collective Advocacy is also provided through SLAs from Lothian Health.

CAPS provide advocacy services to anyone affected by mental health.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

There is a need to increase provision in children's services.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	6 (NB some organisations provide advocacy to more than one client group)
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (i.e., it covers all the categories below)?	
	People with a mental health/illness related condition.	3
	People with learning disability	2
	People with dementia	2
	People with autistic spectrum disorder	2
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	0
	Carers of people with mental illness, learning disability, dementia	3
	Children & young people with a mental health problem	3
	Children & young people with a learning disability	2
	Children & young people with ASD or ADHD	2
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	2
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	2
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	2
	▪ Adults up to 65	6
	▪ Adults over 65	6

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	6
	▪ Collective	4
	▪ Citizen	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	0

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£1,374,893
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	£839,305
	People with learning disability	£287,359 (covers dementia, autism, learning disability, physical disabilities, sensory impairment, older people over 65 who don't have anyone else to speak for them.
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	£33,665
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	£214,564
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	5 (NB contracts are 5 years +1+1)
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	35 FTE

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

An East Lothian Independent Advocacy Steering Group was formed in February 2023 to lead on the development of a joint strategic plan. Membership included representation from the Health and Social Care Partnership, Education and Children's Services, MELDAP, Housing, Policy, Improvement and Partnerships, Connected Communities, Procurement, VCEL and independent advocacy providers.

The Steering Group activity and Strategic Plan development were informed by completion of an updated independent advocacy needs assessment, integrated impact assessment and engagement and consultation with key stakeholders.

The new [East Lothian Independent Advocacy Strategic Plan 2024-2028](#) was approved by the East Lothian Integration Joint Board at their meeting in April 2024. The Steering Group has now been stood down but may be reformed at a later date to update and revise the strategic plan.

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

[East Lothian Independent Advocacy Strategic Plan 2024-2028](#)

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

All 4 locally commissioned independent advocacy providers (CAPS, EARS, Partners in Advocacy and Who Cares? Scotland) were represented on our Independent Advocacy Steering Group and played a vital role in assisting with the completion of an updated needs assessment.

Further to this our providers proved vital during Integrated Impact Assessment exercises, participating in our engagement working group and undertaking engagement with those with lived experience / advocacy partners.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

One of the first actions of the Steering Group was to undertake an extensive stakeholder mapping exercise using a power interest matrix. A small working group was then established to review and update the draft Independent Advocacy Needs Assessment from 2020. With key stakeholders and a needs assessment in place, the Steering Group collectively set out its engagement plan, which included:

- Development of an integrated impact assessment.
- Creation of an explainer video about independent advocacy, its benefits and what the independent advocacy strategic plan aims to achieve.
- Arranging focus groups and discussions with people with lived experience to share their views and experiences.
- The development of an online survey to receive views from targeted professionals, the third sector and wider community regarding the independent advocacy strategic plan.
- Online engagement through the ELHSCP website and social media to promote the efforts of the independent advocacy engagement activities and provide feedback reports as part of the engagement timeline.
- Organising focus group engagement sessions with providers, professionals and third sector representatives to gauge their response to the draft strategic plan.

A small engagement working group was established to develop each of the activities outlined above. The timeline for engagement was set for August 2023 to October 2023 with the strategic plan estimated to be signed off in early 2024.

All feedback from the engagement activities was collated and analysed to provide clear and transparent reporting back to the Steering Group for inclusion and consideration when developing the strategic plan. Copies of the engagement findings are embedded below.



2024-01-23 - East
Lothian Independence



2024-01-23 - East
Lothian Independence

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Our Strategic Plan objectives, which apply to all partners, are:

- 1) Develop independent advocacy services throughout East Lothian that are sustainable, proportionate and fit for purpose.
- 2) Seek to address issues of equitable access to services.
- 3) Improved awareness, knowledge and understanding of independent advocacy and access to services.

As part of an ongoing procurement exercise, consideration is being given to implementing the following service outcomes, which are aligned with the national SIAA outcomes:

- People are better informed of their rights.
- People are more able to express their views.
- People have their views and wishes considered.

- People have more choice and control in situations which affect their lives.
- People are treated with more dignity and respect.
- Independent advocacy credibility and legitimacy is recognised and fully understood.
- Independent advocacy helps to defend and uphold human rights.
- Improved services with greater equality of access.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

All providers are expected to undertake self-evaluation and service user surveys with at least annual reporting back to the Health and Social Care Partnership.

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

The data provided below is a snapshot of the quarterly reporting:

- CAPS Independent Advocacy – 157 referrals (April 2024 – December 2024).
- EARS Independent Advocacy – 69 referrals (April 2024 – December 2024).
- Partners in Advocacy – 61 referrals (April 2024 – December 2024).

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

Of our three providers only one currently operates a waiting list for non-statutory work where advocacy partners currently wait 8-10 weeks to receive support.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

All providers are expected to undertake self-evaluation and service user surveys with at least annual reporting back to the Health and Social Care Partnership.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

We have a Health and Social Care Partnership [website](#) and [leaflet](#).

Our commissioned providers also have their own websites and all three are expected to raise awareness amongst partner organisations and communities as part of their service specification (e.g. through training; attendance at strategic forums; community days; collective advocacy sessions etc).

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No



ELCSP_Children_and_Young_People_s_!

2.2 If Yes, does it include independent advocacy?

Yes

No



ELCSP_Children_and_Young_People_s_!

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

For the last approximately 15 years East Lothian Children's Services have been commissioning a third sector organisation to provide advocacy services to all children who are care

experienced in a placement out with the Local Authority. This is not specific to children and young people in a healthcare facility or to those with a mental illness, learning disability or related condition. From 1st April 2025 the offer of Independent Advocacy will be available to all children and young people accessing social work services regardless of whether they are care experienced and or have a mental illness / learning disability.

Two young people within the last two years have been placed in a healthcare facility out with their home health board area on a short-term basis (2-3 weeks). Neither were offered independent advocacy during this time. As above our commissioned services from 1st April 2025 are now available to all children receiving a children's service so this would no longer be the case.

Copies of the children and young people services plan and proposed independent advocacy appendix are available [online](#).

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Children's Services commissioned advocacy service outcomes are to ensure children and young people using social work services are supported to enact their rights, have their voice heard and be active participants in their care planning.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes

No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

As our Independent Advocacy offer widens from 1st April 2025 to enable all children and young people accessing social work services to use advocacy services we will work with our commissioned service to measure and understand satisfaction of children and young people using this service.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Within Children's Services we offer advocacy to all children and young people using social work services. Awareness and information about accessing advocacy therefore comes through children and young people's social workers when a service begins or when identified as appropriate.

Young people accessing our residential homes will additionally know about advocacy through information packs received when they move into a residential home and through informal visits to the resource by commissioned advocacy staff.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Children's Services department briefings are attended by commissioned providers to raise awareness and remind social workers that advocacy services are available and should be offered to all children and young people in receipt of a service. In addition to this, social workers will discuss advocacy at Looked After Children's Reviews and through case discussion.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

During the 2024/25 financial year as part of challenging financial recovery actions, the independent advocacy budget was reduced by 4.5% from £212,606 to £203,040.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

In some cases referrals have been prioritised in order to ensure that statutory work has been completed timeously although this is not purely due to budget reductions.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

In East Lothian we commission the following three services:

- People experiencing problems with their mental health and wellbeing (18+), including people who have experienced mental illness or personality disorder, as defined in the Mental Health (Care and Treatment) (Scotland) Act 2003.
- Older People (65+) who are in receipt of a health and social care service (including those who live in residential or community settings) and people with a physical disability (16+).
- People with a learning disability and / or autism (16+).

Across all three services providers are asked to prioritise statutory work (e.g. people who are dealing with statutory procedures, as defined in the Adults with Incapacity [Scotland] Act 2000,

Mental Health [Care and Treatment] [Scotland] Act 2003 and Adult Support and Protection [Scotland] Act 2007 where necessary.

Between the three services, people with a mental health condition, a learning disability or dementia should be able to access an independent advocate regardless of whether they are detained, on a CTO or residing within the community. All three providers closely collaborate to ensure that individuals are allocated to the correct service for their primary presenting issue.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

--

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

The allocation of spend for advocacy services has increased by 50% in order to offer independent advocacy to all children and young people using children's social work services. The budget increase / change is not specific to children and young people with a mental health disorder / learning disability.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

The increase in budget was to enable an offer of advocacy to all children and young people using social work services.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

Referrals are prioritised for care experienced children and young people outwith the local authority.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	4 (CAPS independent advocacy, EARS independent advocacy, Partners in Advocacy and Who Cares Scotland)
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	1
	People with learning disability	1 (joint with autism service)
	People with dementia	1 (joint with Older People's service)
	People with autistic spectrum disorder	1 (joint with LD service)
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1 (all children and young people using social work services)
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	2
		1

	<ul style="list-style-type: none"> ▪ Adults over 65 	
		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	<ul style="list-style-type: none"> ▪ Individual 	4
	<ul style="list-style-type: none"> ▪ Collective 	2
	<ul style="list-style-type: none"> ▪ Citizen 	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	4

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	ELHSCP – £203,040 per annum MELDAP – £11,000 per annum ELC Children’s Services – £125,254 Total: £339,294
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	Not possible.
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	4
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
	The ELHSCP commissioned services that currently have a 1 year extension are subject to a procurement process, which will commission services on a longer term basis (5+ years).	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	ELHSCP – 4 ELC Children’s Services – 3

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

Provider organisations were invited to attend a stakeholder engagement session, which focused on the development of the plan and informed the Integrated Impact Assessment (IIA). They also had opportunity to provide written feedback at various stages of the draft plan and this shaped the final plan.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Provider organisations were contacted on a number of occasions to engage stakeholders and to circulate the draft plan. One of our providers (Mental Health Advocacy Project) hosted a number of focus groups on the development of the plan to feed back.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No
If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

Our Mental health and addictions advocacy provider deliver services to Addiewell prison. This was originally on an appointment basis, but is now a drop-in service as this was found to be more effective. In 24/25 397 advocacy sessions with inmates were completed.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

A good relationship exists between the provider and the prison, inmates are informed of the service by prison staff and notices are placed in appropriate locations.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Commissioned independent advocacy services for adults are required to provide outcome monitoring on the impact of the provision of advocacy to individuals who received the service. The service should report on numbers and percentage of service users who agree the service has assisted them to achieve the following outcomes:

- More people will experience improved health and wellbeing
- Improved levels of independence
- Improved quality of life
- Exercising choice and control
- More people will have a positive experience of care and support
- Fewer people will suffer avoidable harm
- Fewer people will experience stigma and discrimination
- More people will receive services at an earlier stage to support them to develop their own independence and resilience.
- More people will feel more involved in their communities

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review

- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

MHAP 24/25
 113 open cases as start of year
 342 new referrals during the year
 Completed 331 cases
 worked with 435 clients throughout the year

EARS Advocacy 24/25
 225 open cases at start of year
 229 new referrals- broken down to
 102 Older People,
 56 for Adults with a Disability / Acquired Brain Injury
 72 with Learning Disabilities
 Completed 323 cases in the year with 122 in progress at year end.
 Worked with 445 clients during the year.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

All those undergoing formal processes are prioritised and are not placed on waiting lists. Waiting list is only used for other non-urgent advocacy work.

52 clients on EARS WL at 31/3/25
 45 clients on MHAP WL at 31/3/25

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Providers are required to carry out service user satisfaction returns annually.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Staff have access to leaflets and are generally well informed of what our commissioned services are and what they do. This information is published on the HSCP website and there are posters in hospitals, medical centres and social work offices and GP practices. Teams can also make referrals on behalf of service users.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

We have advocacy provision for all looked after children in West Lothian.

- The voices of children and young people are supported by advocates to ensure they are heard.
- Children and young people have access to good quality advocacy which is easily available and accessible.
- Children and young people feel supported and empowered to make informed choices about issues they are facing

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

As above, provider is required to carry out and report on service user satisfaction surveys.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

For Care Experienced Children and Young People, we promote the use of advocacy by having Who Cares? Scotland attend the residential housing, meeting with foster carers and kinship carers, sharing their details with families, reviewing officers will let families know of the advocacy available within child protection case conferences etc. We also have a care experienced having your say group of children and young people and Who Cares? Scotland and our participation and engagement worker have engaged with them to ensure they are aware of their rights.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Provider has delivered awareness raising sessions for social work staff. As the provider is long standing good relationships have been built between provider and social work which ensures young people are informed of the service. We have a UNCRC Children's Rights multi agency working group where we are working together to raise awareness across all agencies and that includes a participation and engagement worker.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Services are delivered to both those falling under the act and those who require other advocacy support. Where formal processes are in place these are prioritised in terms of workload in order to be able to be at meetings, however other clients will also receive advocacy support

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	3
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	<ul style="list-style-type: none"> ▪ All ages 	
	<ul style="list-style-type: none"> ▪ Under 18 with mental health issues, learning disability 	1
	<ul style="list-style-type: none"> ▪ Adults up to 65 	2
	<ul style="list-style-type: none"> ▪ Adults over 65 	2

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	3
	▪ Collective	3
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	3

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£454,817
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	£183,850 per annum
	People with learning disability	£64,597 per annum
	People with dementia	Under Older People/Physical Disabilities contract £96,370 per annum
	People with autistic spectrum disorder	Under Learning Disabilities contract
	Mental disordered offenders	Under Mental Health contract
	Homeless people with mental illness, learning disability, dementia	Under Older People/Mental Health contracts
	Carers of people with mental illness, learning disability, dementia	£10,000 per annum
	Children & young people with a mental health problem	0
	Children & young people with a learning disability	0
	Children & Young people with ASD or ADHD	0
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	Generic Care Experienced Children and Young People Contract £100,000 PA
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	Under general Care Experienced Children and Young People contract
	Children & young people with any other condition (specify)	0

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	1
	3 years	
	4 years	2
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	10.5

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

The central, high-level outcome for all advocacy provision is that individuals have access to an independent advocate who can support them to have their voice heard, uphold their rights, and enable appropriate access to services within the statutory system.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Combination of varying measures for providers dependent on type of advocacy and level of contract provision etc.

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

Adult mental health- 169, Adults with learning disabilities: 43, Adults with psychical disabilities and older adults: 87.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

This is standard reporting for the primary adult mental health provider: all adult MHA detention related requests are responded to within 2 working days and for non-detention related matters the current wait time is 6 weeks.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Individual advocacy providers have varying standard feedback mechanisms.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

Combination of measures dependent on type of advocacy and level of contract provision etc.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Information on the services is provided on our main digital platform (Midpsace) for mental health services and support available within Midlothian.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Children's services currently commission Who Cares? Scotland advocacy and participation support. This is focused on all care experienced child or young person and includes those who are impacted by a mental illness, learning disability or related condition. The purpose of this service is to ensure they are informed about their rights and engaged in decision making about their care and support. This service is flexible to see children in their homes, placement and or schools. The wider aim is that young people can influence service development and organisational change in their schools and in Children's Services. They are supporting the development of new Champions boards in Midlothian schools.

CAPS is also provided by Scottish government for all children who are engaged in the Children's Hearing System. The aim is they understand, engage and inform the decision making about their proceedings. This advocacy is limited to this forum and as such many of our young people opt to use Who Cares? Scotland as it can provide them support across various forums.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

At the moment the reporting template is not as specific as this, however we could ask for the reporting to be more specific in the future.

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

The feedback obtained is the same for everyone at the moment, however we are considering ways in which to manage the way we obtain feedback from ALL children and young people living in Midlothian.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- X Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

The quarterly reporting template currently in place for Who Cares? Scotland covers all any/all complains received.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

We do not currently raise this awareness specifically relating to advocacy services for children and young people with mental illness, learning disability or related conditions.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- x Yes
- No

Please provide any further details below.

There is no formal process to promote this but it is noted at monthly staff briefings when specific changes or activities are taking place.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

People are still provided access to individual independent advocacy by the same organisation for non-detention issues but are asked to prioritise those with compulsory related measures and implications.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

There is less advocacy available for outpatient support than previously.

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	Adult: 4
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (i.e., it covers all the categories below)?	
	People with a mental health/illness related condition.	1
	People with learning disability	2
	Older adults and adults with physical disabilities (<i>changed from people with dementia</i>)	1
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	
	▪ Adults up to 65	3
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	3
	▪ Collective	2
	▪ Citizen	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	3

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	Adults- 192,975.95
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	114,298.32
	People with learning disability	53,574.36
	Older adults and adults with physical disabilities	25,103.27
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	All adult providers are currently 1 year.
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	Adults: 4

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

Advocacy arrangements are led by the HSCP on behalf of NHS and Council.

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

The provider pool for Independent Advocacy Services in Orkney is extremely limited with only one provider, delivering advocacy services for adults, active on the island. We work closely with that provider to ensure that their service is open and accessible to all adults, including those with mental health issues, substance misuse issues and learning disabilities.

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

1. To provide generic advocacy available to all adults in Orkney, as determined by the criteria operated by Advocacy Orkney and agreed with NHS Orkney and the Council, will include those who are threatened with or who are experiencing homelessness and to provide for the provision of advocacy for people with a mental disorder, to meet the requirements of the Mental Health (Care and Treatment) (Scotland) Act 2003, and adults at risk of harm, to meet the requirements of the Adult Support and Protection (Scotland) Act 2007 and the Adults with Incapacity (Scotland) Act 2000.
2. To provide a means whereby people will have a better chance to make informed decisions, have their views listened to, have their wishes vigorously pursued and gain more control over their own lives.
3. To provide services to a professional standard in accordance with the underpinning values detailed in the Principles and Standards for Independent Advocacy and the Code of Practice for Independent Advocacy produced by the Scottish Independent Advocacy Alliance.
4. To provide for effective means of communicating the function of independent advocacy to service providers.
5. To provide effective means of making independent advocacy available to those that need it, paying particular attention to people who might find it hardest to access the service.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

In 2024/25, 112 adults received independent advocacy support.

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

There is no unmet need at present with new referrals being seen within a matter of weeks.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

The efficacy of the advocacy service being provided is routinely discussed via service user reviews.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

All staff are involved in regularly promoting Advocacy as a support for those with whom they work. Advocacy services are routinely engaged in formal processes such as ASP and Guardianship as well as less formal engagements such as Self-Directed Support. When we awarded the most recent contract for Advocacy Services, the HSCP and the organisation who had been successful worked jointly to promote and publicise the new arrangements with a joint press statement and local radio interview.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

- Support vulnerable children and young people to express their views specifically at statutory hearings and reviews, but also at other decision-making meetings, as required;
- Help children and young people to feel respected, included, listened to and understood;
- Provide information and advice to ensure that children and young people's rights are promoted, in accordance with the UN Convention on the Rights of the Child and the Children and Young People (Scotland) Act 2014 and 2024;
- Engage with Orkney's "Getting It Right For Every Child" (GIRFEC) process;
- Provide support for looked after young people and care leavers to meaningfully engage in participation with corporate parents. The term "corporate parents" is used to reflect the expectations on the Council and their Community Planning Partners with regard to looked after children and young people.
- Provide suitable trained and experienced practitioner(s) independent from the Council with a specific remit to deliver the local service.
- Represent collective rights issues to senior managers of Orkney Health and Care in a constructive way at the earliest opportunity and contribute to solutions to these issues.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

Yes

No

If Yes, please provide the most up to date information provided by each organisation

The numbers in Orkney are relatively small and, as such, the monitoring reports do not break down these figures, however, more detail is provided via monitoring meetings. To add context, our children's advocacy provider supported 39 young people in the last year. Of these, fewer than five were in the category of having a mental illness or learning disability.

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

The advocacy service regularly collates feedback from users of their service and reports on the feedback via monitoring returns.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Processes within Council

No monitoring

Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

All teams working with children and young people actively promote advocacy services.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

Yes

No

Please provide any further details below.

There are regular meetings between operational teams and the advocacy provider to promote awareness, develop relationships and address issues/concerns as they arise.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	0
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	1
	▪ Under 18 with mental health issues, learning disability	1
	▪ Adults up to 65	1
	▪ Adults over 65	1

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	2
	▪ Collective	1
	▪ Citizen	1
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	2

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£98,531
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	Children - £48,531 Adults - £50,000
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	
	2 years	
	3 years	2
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	4

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

We have recently awarded a new independent Advocacy contract. The hope is that the new provider will take forward the development of the new strategy alongside the local authority and NHS.

Consultation & Involvement

- 1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan**

As above, we will be asking them to take this forward.

- 1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan**

There will be an expectation that those who used services are consulted.

- 1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?**

Yes

No

Prisons and advocacy services

- 1.7 Do you have any prisons in your HSCP area?**

Yes

No

If No go to Q10

- 1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?**

Yes

No

If Yes, please provide details

- 1.9 Can you please outline how prisoners are informed about independent advocacy services?**

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

2024/25 – 14

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

The independent advocacy service gathers feedback.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Leaflets, practitioners sharing information, information on council website, independent advocacy service undertaking promotion work.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Promote and deliver an independent advocacy service. Develop the new advocacy strategy.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

Nil for current provider

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

The independent advocacy service gathers feedback.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Leaflets, practitioners sharing information, information on council website, independent advocacy service undertaking promotion work.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

The current contract covers children subject to compulsory measures under the MHA only. Children access alternative advocacy to meet other needs (such as being care experienced).

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	1
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	X
	People with a mental health/illness related condition.	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	1
	▪ All ages	X
	▪ Under 18 with mental health issues, learning disability	
	▪ Adults up to 65	
	▪ Adults over 65	

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	1
	▪ Individual	
	▪ Collective	
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	0

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£48,156 per annum
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	Cannot separate due to generic service
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1
	2 years	1
	3 years	1
	4 years	1
	5 years	0
	Over 5 years	0
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	2

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Consultation & Involvement

- 1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan**

Advocacy Provider Organisations are members of the Angus Advocacy Planning Group which co-ordinated the development of the Joint Angus Advocacy Strategic Framework

- 1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan**

Please refer to: [Angus H&SCIJB 21 February 2024 - Report No IJB 09 - Angus Advocacy Strategic Framework - App 3](#)

- 1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?**

Yes

No

Prisons and advocacy services

- 1.7 Do you have any prisons in your HSCP area?**

Yes

No

If No go to Q10

- 1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?**

Yes

No

If Yes, please provide details

- 1.9 Can you please outline how prisoners are informed about independent advocacy services?**

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

- Provide Independent Advocacy (IA) for the identified user groups
- Respond to requests for Direct Advocacy within 3 working days where compulsory measures relating under the Mental Health (Care and Treatment) Scotland Act 2003 apply
- Respond to requests for Direct Advocacy within 5 working days where individual are affected by statutory processes such as ASP/AWI
- Respond to requests for Direct Advocacy within 10 working days where the above does not apply
- Ensure IA is promoted widely and the service is visible and accessible to all who are eligible;
- Provide IA in such a way that will not interfere with the rights of vulnerable people;
- Develop and improve IA in line with recognised good practice within the advocacy movement; and
- Independent Advocacy ensures people are listened to and their views are taken into account
- Independent Advocacy is loyal to the people it supports and stands by their views and wishes
- Independent Advocacy stands up to injustice, discrimination and disempowerment

Angus Independent Advocacy will adopt these principles in pursuit of the following Service Aims and Objectives for eligible citizens of Angus:

- Citizens will have someone to speak on their behalf to their families, carers or professionals, or someone to empower them to speak for themselves, when decisions need to be made about them and which affect their lives;

- Citizens will have all the information they need to make decisions;
- Citizens views and wishes will be explained and fully considered, and their rights understood and defended; and
- Good working relationships will be developed with their families, carers and professionals without compromising independence or the positive citizen-led practice.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

--

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

From April 2024 – February 2024 the following data is the monthly average people actively supported by the Adult Direct Advocacy service (aged 16 and over) –

Acquired Brain Injury - 4
Dementia - 12
Older People - 10
Learning Disabilities - 21
Mental Illness - 99

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) available

An assessment was carried out within the last year and was identified as no current unmet need. This is a continuing areas of assessment.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Satisfaction ratings are included in monitoring reports. These are gathered by the adult contracted service via outcome tools, a feedback app, Hurrah Board, stories and database.

1.16 How do you monitor complaints about advocacy services?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Complaints proforma submitted to HSCP
- No monitoring
- Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

[Angus-Advocacy-F.pdf](#)

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

- Yes
- No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

- Yes
- No

Instead of the above, the principles and guidance referenced with the Scottish Government Guidance : Independent Advocacy – a guide for commissioners 2013 are noted within the contract we have with AIA

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any child looked after will be offered advocacy support dependent upon individual circumstances.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

All children involved with services who have a need (as defined in statutory guidance) will have access to independent advocacy support. Children's voices will be heard, and their views recorded. Children will be actively involved in decisions impacting them.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

All children receiving a service are offered opportunity to feedback their views on the service

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring

Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Information is available on children's service website, staff in children's service provide children and young people with information and can support a referral. The agencies providing services have information on their public websites, notices in public places, visits to children's residential homes, attending team meetings - all awareness raising

2.10 Have there been any specific actions to promote the use of advocacy among staff?

X Yes

No

Please provide any further details below.

Assessment template and guidance for social work staff amended to include instruction that children and families must be given information on advocacy and support a referral where necessary. Regular communication to staff to remind staff of advocacy information folder with parent and child information sheets.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent-advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

The budget has increased due to local annual uplifts applied.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

No

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Priority will be given to those detained or at risk of being detained under the Act and to those who are a subject to Adult Support & Protection, a Community Treatment Order or Adults with Incapacity/ Guardianship.

- Respond to requests for Direct Advocacy within 3 working days where compulsory measures relating under the Mental Health (Care and Treatment) Scotland Act 2003 apply

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

AIA will prioritise children, young people subject to compulsory measures (Children's Hearings and detained under MH Act)

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	2
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	1(Adults)
	People with learning disability	1 (Adults)
	People with dementia	1
	People with autistic spectrum disorder	1 (Adults)
	Mentally disordered offenders	1 (Adults)
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	Informal support provided by Angus Carers Centre
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	2
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	2
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	For Children and Young People, Who Cares Scotland? Supports people up to age 26 and AIA supports people up to 18 /19-25 considered on individual basis.	
	For Adults there one organisation who supports people aged 16 years and above	
	<ul style="list-style-type: none"> ▪ All ages 	

	<ul style="list-style-type: none"> ▪ Under 18 with mental health issues, learning disability 	
	<ul style="list-style-type: none"> ▪ Adults up to 65 	
	<ul style="list-style-type: none"> ▪ Adults over 65 	
		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	<ul style="list-style-type: none"> ▪ Individual 	2
	<ul style="list-style-type: none"> ▪ Collective 	2
	<ul style="list-style-type: none"> ▪ Citizen 	0
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	2

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	TOTAL: £276,116.07
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	Children and Families Advocacy: £59,866.07 (AHSCP) Direct and Citizens Advocacy £196,250.00 Citizen Advocacy £20,000
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1 - Adults (rolling annual funding)
	2 years	
	3 years	2 re children
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	4 for children Full Time Equivalents = 2.1 workers (4 part time) for adults.

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

A joint project named the Joint Advocacy Project (JAP) has been established via Whole Family Wellbeing Funding (WFWF). Whilst this funding has a whole family focus, the project has broader, city wide aims as follows:

- Be Supported and Governed by a newly formed Forum representative of Independent Advocacy (IA) Bid Partners
- Will bring the voices of CYP&F directly to Strategic & Planning Service meetings within Dundee City Council (DCC), Health and Social Care & Partnership (HSCP), The Alliance, Education and Children, Family Services & Criminal Justice (CFS&CJ).
- Support and participate in developing an Advocacy Strategy for Dundee ensuring the universal responsibility to protect the rights of CYP&F are met within the Local Authority
- Will keep up to date with Legislation such as Children (Care & Justice) (Scotland) Bill, Human Rights (Scotland), The Promise and GIRFEC to ensure that CYP&F views and rights are at the heart of decision making
- Will Scope the Independent Advocacy (IA)/advocacy provision in Dundee to identify the Range, Type, Gaps, and duplications within IA & advocacy services
- Support the Development of an Easy Access approach to IA and all types of advocacies in Dundee for CYP&F.
- Support the Development of Easy Access Pathways for professionals within Statutory Services including Education, H&SCP, CFS&CJ, and the Alliance
- Will work closely with Engagement & Participation Officers, Bid Partners, and Collaborative Partners within the bid to ensure CYP&F voices are heard at a Strategic level

Engagement and Participation Officers (E&P)

- Working closely with our Bid Partners and engaging with their already established Forums and Groups
- Will work alongside Collaborative Partners existing CYP&F groups such as those identified within the bid and by using collective advocacy methods examine the need for additional forums
- Will Awareness raise within Statutory Services particularly with all levels of Education, HSCP, CFS&CJ regarding The Role of Independent Advocacy & Access to IA/ advocacy support
- Will engage effectively with CYP&F and partner agencies at times and in places that best suit them, ensuring their views and lived experience will influence future support for them and their communities
- Further develop Peer & Citizen Advocacy(volunteer)with Bid Partners to maximise and sustain Independent Advocacy throughout Dundee

The timeline of the funding and the project is to compile a city-wide joint Advocacy Strategy by the end of March 2026. This will be comprehensive Strategy taking into account the full scope of the project aims and objectives. The first draft has been submitted to the WFWF Steering Group for initial consideration.

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

See response in 1.1 – Timeline and completion of this will be by end of March 2026

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

There is strong collaboration in place with all local IA providers, and they have formed a local forum which has allowed a partnership approach and co-production of the Strategic Plan. All IA providers are linked to the Tayside Alliance and the Dundee Advocacy Alliance. This close working allows for strong professional connections and extends our collective outreach efforts through joint networking initiatives.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Consultation and research were carried via a comprehensive mapping exercise which asked stakeholders a range of questions around advocacy provision, what worked, what was in place and areas of unmet need and gaps. This gathered data for all advocacy provision in the City not just exclusively for IA.

Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

Not via a formal commissioned service but several referrals have been made to DIAS our IA for adult services. This has been via telephone contact.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

This is predominately driven by the prison service making sure prisoners have access to IA if needed. From discussions with DIAS, they have confirmed that staff are aware of IA and local supports. No formal representation is made routinely inside the prison; however, updates can be obtained via websites and social media.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

DIAS support Dundee patients when they are in Murray Royal. If they have a Dundee postal address, DIAS will travel through and support. There are the odd Dundee patients that Perth Independent Advocate takes on. There are plans to move patients from Strathmartine and Carsview to Murray Royal – consultation is underway, and IA is involved to ensure the voice of these patients and carers are heard. Discussions are taking place with respective commissioners about the implication of this move.

For those further afield, such as the State Hospital, Ayr Clinic, then the local independent advocacy services provide the service.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Organisations are required to report on the following:

- New Referrals
- Active Clients
- Adult Support and Protection cases
- Mental Health Tribunals
- Advocacy Issues
- Volunteer Hours (where applicable)

We also consider:

- Capacity
- Pressure Points
- Compliments/Complaints
- Staffing Issues

Anonymised case studies to get a “real life” view of the difference the services are making

Formal contracts are in place for all IA provision with agreed aims and outcomes outlined in service specifications. Copies of these are available if needed.

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Monitoring meetings are scheduled every 6 months with providers. A monitoring report in an agreed format is submitted in advance of each meeting. Financial audits are also carried out and each provider submits a financial return each quarter.

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

- Yes
- No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

DIAS - [DIAS Monitoring Report Jan - Sept 2024.docx](#) [2024 - DIAS Monitoring Report Oct - Dec 2024.docx](#)

Advocating Together - [2024 Advocating Together Monitoring 16-10-24.docx](#) [2025 Advocating Together Monitoring 11-03-25.docx](#)

Partners in Advocacy - [2024 PIA - Q.1 and 2 Report Dundee Apr-Sept 24 - Final.docx](#)

[Dundee Annual Monitoring Report 2024-25 FINAL.docx](#)

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

Details of waiting lists are incorporated in the above monitoring reports. This area is then discussed in detail at monitoring meetings.

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Experiential data is collated. Courtesy calls and feedback are sought routinely. Range of approaches used as outlined in above monitoring reports including surveys, evaluations and case work conversations.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

6 monthly monitoring meetings or ad hoc catch ups in between if this is required.

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Information about independent advocacy organisations is readily available within inpatient settings. Each organisation has their own website which gives a comprehensive summary of their local services with clear referral information. Routine publicity via group talks and briefings.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes (Children's Rights more broadly)

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Partners in Advocacy (PiA) provides independent advocacy for all inpatients up to the age of 21 in Dudhope Young People's Unit and the Carseview Centre in Dundee. In 2024/25, a total of 21 young people subject to the MHCTA were supported by PiA; of these, 14 were young people were from other local authorities outwith Dundee.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Organisations are required to report on the following:

- New Referrals
- Active Clients
- Adult Support and Protection cases
- Mental Health Tribunals
- Advocacy Issues
- Volunteer Hours (where applicable)

We also consider:

- Capacity
- Pressure Points
- Compliments/Complaints
- Staffing Issues

Anonymised case studies to get a “real life” view of the difference the services are making

Formal contracts are in place for all IA provision with agreed aims and outcomes outlined in service specifications. Copies of these are available if needed.

Outcomes: SHANARRI indicators for ER HSCP commissioned work.

Outcomes: Informed of rights under MHCTA, NHS GGC commissioned work.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

Yes

No

If Yes, please provide the most up to date information provided by each organisation

[2024 PIA - Q.1 and 2 Report Dundee Apr-Sept 24 - Final.docx](#)
[Dundee Annual Monitoring Report 2024-25 FINAL.docx](#)

In 2024/25, Partners in Advocacy supported a total of 91 children and young people in Dundee. The following conditions were identified:

Learning Disability (7); Mental Health (43); Physical Disability (3); Autism (9); ADHD (7); Additional Support for Learning (3); Other* (6).

NB: Not all children and young people referred have a diagnosed ASN/condition.

*includes domestic abuse, family/access/custody issues, homelessness, child protection issues



2025 Who Cares
Advocacy Report Jan

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

PiA conducts end of advocacy partnership feedback surveys to rate levels of satisfaction with the service, what could be improved, etc. Very low return rates, hampered by the fact that often children and young people are discharged from hospital and advocacy is not informed, and mailouts of our survey receives little or no response. Sent out via mail, email and available on Survey Monkey.

The following questions are asked:

- Advocacy helped me share my thoughts and views
- My Advocacy worker supported me to take part in meetings about me
- Advocacy helped me understand what was happening and my rights
- Advocacy helped me to feel more confident to speak up
- Would you recommend Advocacy to others?
- Any other comments for us to improve or make things better?

PiA also provides direct feedback and quotes from children and young people, parents and carers, and other professionals.

WC's carry out feedback as outlined in the above report.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

To date, PiA has had no complaints about their advocacy service. In addition to the above, they would make the commissioner aware of any complaints or issues immediately, as per the service specification for the contract.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

PiA, together with other independent advocacy organisations in Dundee, undertakes regular in-person and online outreach with key stakeholders, including Social Work (Children & Families) and Health (CAMHS) colleagues, parents and carers, schools, youth groups and community hubs in Dundee. Online presence via website: [Dundee Children & Young People – Partners In Advocacy](#) and social media channels. [\(20+\) Facebook](#) [\(22\) Partners in Advocacy: Posts | LinkedIn](#) [PIAScotland \(@piascotland1\)](#) • [Threads, say more](#)

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Focused discussions are held within supervision re LAC and high-risk cases to ensure workers and managers promote/use advocacy. There is also a focus around case conferences to ensure parents and children have advocacy if required. Promotion carried out by Review Officers and Who Cares also does proactive work with fostering and residential services. PIA operates in Dundee for Children's Hearing cases, with flyers being circulated and service promoted via range of communication channels.

More broadly Dundee has in place an online referral tracking system (FORT) which includes orgs that provide advocacy. Information and contact details held and publicised.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

- Yes
- No

If the budget has changed (either an increase or decrease) please say how.

Additional £34,341 paid to DIAS to support IA at Strathmartine Hospital and revised management structure.
Additional £119,521 paid to DIAS to support individuals with substance use issues including the implementation of MAT Standards.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

LD/MH Continuation of services following reduction in funds from other source.
Substance Use – additional provision with focus on particular client group – has proved very successful and very positive feedback from range of stakeholders.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

- Yes
- No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

Our services are commissioned to support adults in need/community care classification – It would be anticipated that our generic commissioned service for Adults provided by DIAS would pick most of these referrals up and report back via formal monitoring any gaps/unmet need and/or capacity issues.

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

- Yes
- No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

Detailed priority groupings detailed in the service specification in place with Partners in Advocacy who cover this area.

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	5 – this includes the Dundee Assist service provided by Dundee Woman’s Aid. Not formally IA and total funding from Scottish Govt
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	2
	People with learning disability	3
	People with dementia	1
	People with autistic spectrum disorder	3
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	2
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	2
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	1
		3

	<ul style="list-style-type: none"> ▪ Adults up to 65 	
	<ul style="list-style-type: none"> ▪ Adults over 65 	3
		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	<ul style="list-style-type: none"> ▪ Individual 	5
	<ul style="list-style-type: none"> ▪ Collective 	4
	<ul style="list-style-type: none"> ▪ Citizen 	1
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	3

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£613,504.75 Dundee Assist Service funded by Scottish Govt – funding is £467,906
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	This is not possible to do for all as our funding is provided to cover a range of service user groups. Details provided where possible
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	£68,300 PIA £32,051 Who Cares – LAC coverage.
	Children & young people with a learning disability	PIA mainly
	Children & Young people with ASD or ADHD	PIA
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	Who Cares/PIA would work collaboratively
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	Who Cares
	Children & young people with any other condition (specify)	PIA

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	5
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	<p>DIAS</p> <ul style="list-style-type: none"> • generic support equates to 3.82 FTE • Posts at LDAU / Strathmartine is 0.88 FTE • ADP / Corra posts 3.68FTE <p>PIA</p> <ul style="list-style-type: none"> • 1.4 FTE Advocacy Workers <p>WC's</p> <ul style="list-style-type: none"> • 1 – FTE <p>Advocating Together</p> <ul style="list-style-type: none"> • 1.2 - FTE

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

A first draft Advocacy Strategic Plan has been developed and final draft due by end July 2025.

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

We consulted by focus groups and survey with a number of key stakeholders who support advocacy including the Independent Advocacy organisation in Perth and Kinross – the draft strategic plan is being developed in collaboration with the latter.

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

Focus groups, survey, interviews, drop-ins at inpatient care units.

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

Advocacy Support is provided in HMP Perth and HMP Castle Huntly.

1.9 Can you please outline how prisoners are informed about independent advocacy services?

Through information points and from operational staff. Independent Advocacy PK provide a regular in-person service.

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

1. Provision of an independent advocacy service to promote participation, inclusion, dignity and control over decisions in people's lives.
2. Ensure human rights are respected and voices are heard.
3. Support people in recognising, understanding and challenging power imbalances that influence their lives and empower them to self-advocate.
4. Improve local services strategically in line with the national outcomes for independent advocacy by collaborating with partners, stakeholders and with representation on steering groups

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

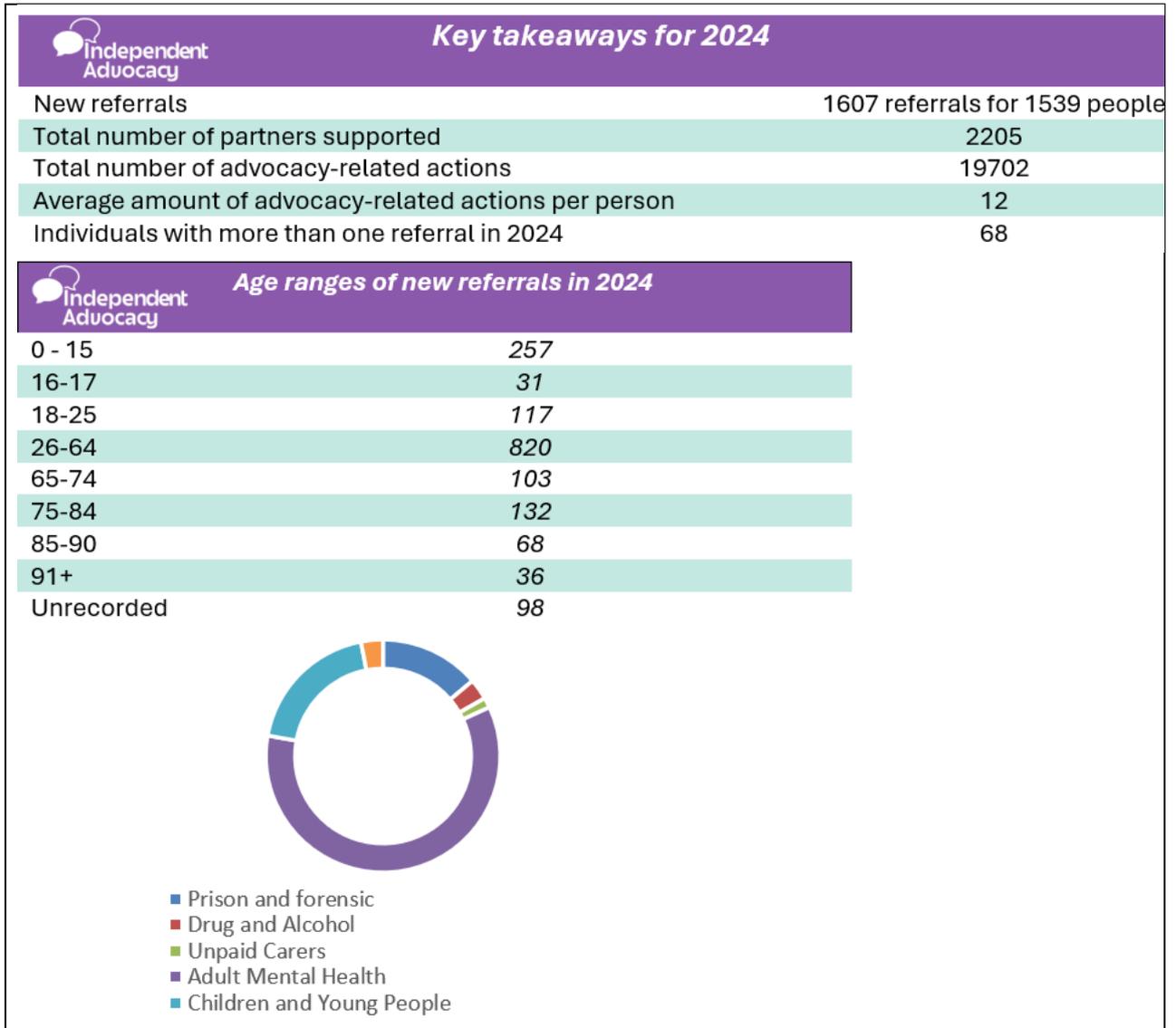
- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation



Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

1.14

Yes

No

If Yes, please provide the most up to date information (within the last year) available

We are currently working with the organisations to provide meaningful information.

1.15 **What arrangements are in place to measure the satisfaction of people using advocacy services?**

Through ongoing contract monitoring arrangements and annual SLA review activity, we request qualitative feedback to be included in their annual review.

1.16 **How do you monitor complaints about advocacy services?**

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 **How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?**

Through events such as our Community of Practice Event (PKC HSCP) – Advocacy and Human Rights.
Independent Advocacy’s campaign work and their own online content/website.

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

We have 29 children and young people who are placed out with Perth 2 have a diagnosed mental health issue. 3 children have a learning disability, but all have experienced trauma. There is an agreement that these children will have advocacy from the unit in which they live, provided by Who Cares? Scotland and their social worker.

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

We ask that they attend meetings to give the child's view, support the child through processes and ensure that their rights are upheld.

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

Through individual meetings records are kept ensuring attendance and that the advocate has met with the child.

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

Independent advocacy provide advocacy for 270 children - 165 were new referrals in 2024. 24 of the 165 had used IAPK, or independent advocacy before. Over 400 advocacy partner meetings to gather views of the child. Collectively over 2,500 actions were carried out by independent advocates on behalf of children and young people represented by IAPK.

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

During 2024 Independent Advocacy took part in an independent evaluation done on children's advocacy. IAPK staff and families who have used the service fed into this work. The report has been overwhelmingly positive. [Advocating for children and young people - gov.scot](https://www.gov.scot/resources/consultations/web_publications/advocating-for-children-and-young-people/)

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

Through individual discussions but very rarely do we have complaints.

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

For all children open to social work especially those who are looked after there is an automatic right to have advocacy support. Social workers are aware where to refer to and how best to support their child to access the service.

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Advocacy is part of our service plan. Training around children's right has been delivered and attendance at team meetings to raise awareness.

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

The budget has increased in line with annual inflationary uplifts. Additional 3-year ADP funding has also been awarded in 2024.

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

52 partners received advocacy from our Drug & Alcohol project. 25 of these were new referrals to our service. 14% of the overall number were returning advocacy partners. The predominant theme was child protection, with independent advocates supporting parents in meetings and Children’s Hearings about their child.

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	1
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	1
	People with a mental health/illness related condition.	1
	People with learning disability	1
	People with dementia	1
	People with autistic spectrum disorder	1
	Mentally disordered offenders	1
	Homeless people with mental illness, learning disability, dementia	1
	Carers of people with mental illness, learning disability, dementia	1
	Children & young people with a mental health problem	1
	Children & young people with a learning disability	1
	Children & young people with ASD or ADHD	1
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	1
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	1
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	1
	▪ Under 18 with mental health issues, learning disability	
	▪ Adults up to 65	
	▪ Adults over 65	

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	1
	▪ Collective	1
	▪ Citizen	1
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	HSCP Independent Advocacy – £322,355 ADP Independent Advocacy Substance Use – £34,176 Prisons Independent Advocacy – £27,226 Children’s Services Independent Advocacy - £70,000
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	5.5 FTE posts (193hrs per week). Additionality is provided by management.

Part One: Adult Survey

Current Planning

1.1 At what level is advocacy strategic planning carried out in your area?

- NHS board-wide
- HSCP
- Local Authority
- Jointly (please specify)
- Other (please specify)

1.2 Is there a current independent advocacy strategic plan for your area?

- Yes
- No

If Yes, can you please submit a copy along with your questionnaire?

1.3 If No, is an independent advocacy strategic plan in the process of being developed?

- Yes
- No

If Yes please provide details of when the independent advocacy strategic plan will be completed

If No please can you advise why this is not being developed?

Advocacy embedded strongly within services and within commissioning therefore no priority for a strategic plan at this time

Consultation & Involvement

1.4 Please describe how advocacy provider organisations were consulted or involved in the development of the plan

1.5 Please describe how people who use advocacy services were consulted or involved in the development of the plan

1.6 Was there an Equality Impact Assessment completed with the development of your Advocacy Strategic Plan?

Yes

No

Prisons and advocacy services

1.7 Do you have any prisons in your HSCP area?

Yes

No

If No go to Q10

1.8 If Yes, do any of the services currently commissioned provide independent advocacy support in the prison(s)?

Yes

No

If Yes, please provide details

1.9 Can you please outline how prisoners are informed about independent advocacy services?

NHS patients placed in private healthcare facilities out with home health board area

1.10 Please specify how NHS patients from your area, who have been placed in private healthcare facilities out with their home health board areas, receive advocacy support?

- From a local service where they are receiving care
- From home health board / local authority
- Both options above
- Don't know
- Not applicable

Any further details

Advocacy support is available through the locally commissioned service should individual require this. The decision to seek out of area placement is made in consultation with family/individual concerned through the governance of the Exceptional Care Board.

Monitoring and review arrangements

1.11 What are the outcomes you are seeking the advocacy organisation to achieve?

Timely action taken on referrals / service user feedback / performance reporting / activity reporting

1.12 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfaction surveys
- Evaluation
- Key performance indicators
- Other (please specify)

1.13 Do you get information from each organisation about the number of people accessing advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) provided by each organisation

1.14 Do you ask services to provide information about unmet needs, e.g. about people waiting to access advocacy support?

Yes

No

If Yes, please provide the most up to date information (within the last year) available

No unmet need or waiting lists within the area – the service meets the demand

1.15 What arrangements are in place to measure the satisfaction of people using advocacy services?

Satisfaction assessment is undertaken by the commissioned service through their governance arrangements. This is captured within the contractual arrangements for the service.

1.16 How do you monitor complaints about advocacy services?

Annual monitoring data from providers

Quarterly reporting

Monitoring meetings

Complaints proforma submitted to HSCP

No monitoring

Other (please specify)

1.17 How do you currently raise awareness and deliver public information about the availability of mental health, learning disability or dementia advocacy services in your area?

Through the social work staff raising the availability of advocacy services within social work assessment and contact – it is routine within adult support & protection processes and recorded

1.18 Have there been any specific actions to promote the use of advocacy among health and social care/social work staff?

Yes

No

1.19 Do you commission advocacy services in your area which comply with the principles and standards set out in Appendix 1 of the Scottish Government Guidance: *Independent advocacy - a guide for commissioners* (2013).

Yes

No

Part Two: Children & Young People Survey

Current Planning

2.1 Do you have an integrated children's service plan?

Yes

No

2.2 If Yes, does it include independent advocacy?

Yes

No

NHS patients placed in healthcare facilities out with home health board area

2.3 Please specify how many children or young people with a mental illness, learning disability or related condition and in a placement out with their home local authority would receive advocacy support?

From a local service where they are receiving care

From home health board / local authority

Both options above

Don't know

Not applicable

Any further details

Monitoring and review arrangements

This section is only applicable if you commission independent advocacy services for children and young people with mental illness, learning disability or related condition.

2.4 What are the outcomes you are seeking the advocacy organisation to achieve for the children and young people?

Not applicable- we do not commission advocacy services for these specific groups, but provide a generic advocacy service

2.5 How do you monitor the outcomes with the advocacy organisations? (please tick all that apply)

- Quarterly reporting
- Monitoring meetings
- Annual review
- Service review
- Satisfactory surveys
- Evaluation
- Key performance indicators
- Other (please specify)

2.6 Do you get information from each organisation about the number of children and young people with mental illness, learning disability or related condition accessing advocacy support from each organisation?

- Yes
- No

If Yes, please provide the most up to date information provided by each organisation

2.7 What arrangements are in place to measure the satisfaction of children and young people with mental illness, learning disability or related condition using advocacy services?

None, however, stakeholder surveys are being designed in line with the Promise to address this issue.

2.8 How do you monitor complaints about advocacy services for children and young people with mental illness, learning disability or related conditions which you commission?

- Annual monitoring data from providers
- Quarterly reporting
- Monitoring meetings
- Processes within Council
- No monitoring
- Other (please specify)

2.9 How do you currently raise awareness and deliver public information about the availability of any advocacy services for children and young people with mental illness, learning disability or related conditions in your area?

Through use of leaflets and local posters

2.10 Have there been any specific actions to promote the use of advocacy among staff?

- Yes
- No

Please provide any further details below.

Children's Services discuss use of Advocacy as part of team meetings
Advice given to young people and Families during intervention

Part Three: Independent Advocacy Services Commissioned for Adults, Children & Young People

Adults Services

3.1 Has the commissioning budget for mental health, learning disability or dementia independent advocacy organisations changed over the past two years?

Yes

No

If the budget has changed (either an increase or decrease) please say how.

The overall the core budget has been retained over the last 2 years

3.2 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

No

3.3 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

3.4 If Yes to Q3 above - How do you provide independent advocacy services to people with mental health, learning disability or dementia not just those detained in hospital or on a community compulsory treatment order?

3.5 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Children & Young People

3.6 Has the commissioning budget for children and young people's mental health/learning disability independent-advocacy organisations changed over the past two years?

Yes

No

3.7 If the budget has changed (either an increase or decrease) please say how.

In line with inflation. As advised our advocacy services SLA's are not designed specifically for young people with mental health, but take a more generic form. Whilst mental health and learning disability have advocacy support services are delivered within the Comhairle, the context of the individuals' specific advocacy needs are the focus and not specifically a service for the client groups you identify.

3.8 Have services changed as a consequence? Please provide details, e.g. increased or reduced provision, limited access/prioritise referrals

No

3.9 Do you specify that any organisations prioritise referrals for independent advocacy support, e.g. support for people subject to compulsory measures under the Mental Health Act?

Yes

No

If yes, please provide details

3.10 Do you specify that any organisations apply a limit to the amount of advocacy support per person?

Yes

No

If yes, please provide details

Advocacy Organisation Information

Please complete this section for all organisations you currently commission services from in your area.

		Total number of organisations for each
3.11	How many organisations do you commission advocacy services from?	One for adult services – Advocacy Western Isles covers all adult service provision
3.12	Can you please detail how many organisations you commission advocacy services from which cover the following categories:	
	Generic service (ie, it covers all the categories below)?	
	People with a mental health/illness related condition.	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mentally disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	
	Looked-after children & young people but <u>not</u> including those who have mental illness, learning disability or related conditions	
3.13	Can you please detail how many organisations you commission advocacy services from which cover the following age ranges	
	▪ All ages	
	▪ Under 18 with mental health issues, learning disability	
	▪ Adults up to 65	
	▪ Adults over 65	

		Total number of organisations for each
3.14	Can you please detail how many organisations you commission advocacy services from who offer the following types of advocacy	
	▪ Individual	1
	▪ Collective	
	▪ Citizen	
3.15	How many organisations do you commission advocacy services from who provide non-instructed advocacy?	1- Advocacy Western Isles

Budget Information

		Total budget for each category £
3.16	What is your total advocacy budget?	£46,377
3.17	Can you please provide a breakdown of the total budget information allocated into the following categories (if possible):	
	People with mental health problems	
	People with learning disability	
	People with dementia	
	People with autistic spectrum disorder	
	Mental disordered offenders	
	Homeless people with mental illness, learning disability, dementia	
	Carers of people with mental illness, learning disability, dementia	
	Children & young people with a mental health problem	
	Children & young people with a learning disability	
	Children & Young people with ASD or ADHD	
	Looked-after children & young people including those who have mental illness, learning disability or related conditions	Overall budget noted above
	Looked-after children & young people but not including those who have mental illness, learning disability or related conditions	
	Children & young people with any other condition (specify)	

3.18	What is the term of funding allocated to each organisation? Can you please detail how many organisations for each term.	Total number of organisations for each term of funding
	1 year	1
	2 years	
	3 years	
	4 years	
	5 years	
	Over 5 years	
	Other – please explain	
3.19	How many Independent Advocacy Workers are supported by this funding in your area?	1