

Health & Social Care Partnership

INDEPENDENT ADVOCACY STRATEGIC PLAN 2024-2027



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1. INTRODUCTION

Welcome to the Independent Advocacy Strategic Plan 2024-2027 for East Ayrshire ('the Plan'). It sets out our shared ambitions for improving opportunities for everyone in our communities to have their voice heard.

The Mental Health (Care and Treatment) (Scotland) Act 2003 imposed a duty on local authorities and health boards to collaborate to ensure the availability of independent advocacy services in their area. The Act gave everyone with mental illness, learning disability, dementia and related conditions the right to access independent advocacy support.

The Mental Health (Scotland) Act 2015 builds on the right in the 2003 Act to independent advocacy support, by requiring health boards and local authorities to tell the Mental Welfare Commission how they have ensured access to services up to now, and how they plan to do so in the future. The duty in East Ayrshire is taken forward by East Ayrshire Health and Social Care Partnership ('the Partnership').

1.1 Developing the plan

The Plan has been developed by engaging with our partners, workforce and the communities we serve. Through them, we understand the ways in which independent advocacy can help achieve the Health and Social Care Partnership's vision for East Ayrshire:

"Working together with all of our communities to improve and sustain wellbeing, care and promote equity."

Information from the Scottish Independent Advocacy Alliance (SIAA) and the views of local people, particularly those who have used independent advocacy services, their carers and families have informed this plan.

1.2 What is independent advocacy?

Definition

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 rights are recognised, respected and secured. Independent advocacy supports people to navigate systems and acts as a catalyst for change in a situation.

Independent advocacy can have a preventative role and stop situations from escalating, and it can help individuals and groups being supported to develop the skills, confidence and understanding to advocate for themselves.

Independent advocacy is especially important when individuals or groups are not heard, are vulnerable or are discriminated against. This can happen, for example, where support networks are limited or if there are barriers to communication. Independent advocacy also enables people to stay engaged with services that are struggling to meet their needs.

Independent advocates do not have the same conflicts of interest as other professional workers who are expected to make judgements about who is in need, deserving or most eligible for a service. Because independent advocates do not have this sort of power over people and do not control access to resources, they are in a better position to see things from the person's point of view. From the outset of the advocacy relationship, they are more likely to have the trust of the people they are working with.

Types of independent advocacy

There are two types of independent advocacy – individual and collective.

Individual or one-to-one advocacy

This includes professional or issue-based advocacy. It can be provided by both paid and unpaid advocates. An advocate supports an individual to represent his/her own interests or represents the views of an individual if the person is unable to do so. Advocates provide support on specific issues and provide information, but not advice. This support can be short or long term.

Another model of individual advocacy is **citizen advocacy**. Citizen advocacy occurs when an ordinary citizen is encouraged to become involved with a person who might need support in the community. The citizen advocate is not paid. The relationship between the citizen advocate and the advocacy partner is on a one-to-one, long term basis. It is based on trust between the partner and the citizen advocate and is supported, but not influenced, by the advocacy organisation. The citizen advocate supports the advocacy partner through natural skills and talents rather than being trained in the role. Individual advocacy can also include peer advocacy.

A **peer advocate** has life experiences they share with their advocacy partner. The peer advocate and their advocacy partner may share age, gender, ethnicity, diagnosis or issues. Peer advocates use their own experiences to understand and have empathy with their advocacy partners. Peer advocacy works to increase self-awareness, confidence and assertiveness so that the individual can speak out for themselves, lessening the imbalance of power between the peer advocate and their advocacy partner.

Collective advocacy

Collective advocacy creates spaces for people to get together, support each other to explore shared issues and find common ground. It supports people to speak up about their experiences, values and expectations. It enables people to find a stronger voice, to campaign and influence the agendas and decisions that shape and affect their lives. Collective advocacy can help planners, commissioners, service providers and researchers to know what is working well, where gaps are in services and how best to target resources. It helps legislators and policy makers to create opportunities for people to challenge discrimination and inequality and helps people learn to become more active citizens. Collective advocacy groups benefit from skilled help from an independent advocacy organisation and with the support of resources.

Principles and Standards

The Scottish Independent Advocacy Alliance sets out the Principles, Standards & Code of Best Practice for Independent Advocacy.

The principles and underpinning standards are set out below.

Independent advocacy is loyal to the people it supports and stands by their views and wishes.

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

Independent advocacy ensures people's voices are listened to and their views taken into account.

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

Independent advocacy stands up to injustice, discrimination and disempowerment.

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

The <u>Scottish Independent Advocacy Alliance website</u> is a comprehensive resource for further information, including a <u>Map of independent advocacy</u> available throughout Scotland.

2. PLANNING INDEPENDENT ADVOCACY IN EAST AYRSHIRE

2.1 Policy context

Independent advocacy contributes to the local and national policy context in a number of ways. The legal and strategic context in which advocacy operates is described in the list of legislation and policy guidance below:

- The Mental Health (Care and Treatment) (Scotland) Act 2003 imposed a duty on local authorities and health boards to collaborate to ensure the availability of independent advocacy services in their area. The Act gave everyone with mental illness, learning disability, dementia and related conditions the right to access independent advocacy support.
- The Mental Health (Scotland) Act 2015 builds on the rights in the 2003 Act to independent advocacy support, by requiring health boards and local authorities to tell the Mental Welfare Commission how they have ensured access to services up to now and how they plan to do so in the future.
- The **Patient Rights (Scotland) Act 2011** emphasises the right of every patient to receive healthcare which takes accounts of the patient's needs. The Act allows for patient participation in decisions about their healthcare and provides appropriate support and information to allow them to do so. The Act allows for the provision of a Patient Advice and Support Service, which includes directing people to representation and advocacy services.
- Independent Advocacy A Guide for Commissioners (2013) captured the many developments since the publication of the original Guide to Commissioners in 2001 by the then Scottish Executive Heath Department and the subsequent revision and publication by the Scottish Independent Advocacy Alliance (SIAA) in 2010. The Scottish Government's expectation set out in this guide is that local strategic advocacy plans should be developed.
- The Mental Welfare Commission's reports on **'The Right to Advocacy' published in 2018 and 2023** reviewed how local authorities and NHS Boards are discharging their responsibilities under the Mental Health (Care and Treatment) Act 2003.
- The **Scottish Mental Health Law Review** was an independent review and its main aim was to improve the rights and protections of persons subject to mental health, incapacity or adult support and protection legislation. The Review published its final report in September 2022 and made several recommendations on independent advocacy including consistency of how it is accessed and commissioned, the development of a national advocacy service and register of advocates and develop a national training programme.
- The Scottish Government's response to the Scottish Mental Health Review (June 2023) agreed to address gaps and improvements in provision and will also develop a consistent definition of independent advocacy.

Other relevant legislation includes:

- The Adults with Incapacity (Scotland) Act 2000
- The Adult Support and Protection (Scotland) Act 2007
- The Education (Additional Support for Learning) (Scotland) Act 2004
- The National Health Service Reform (Scotland) Act 2004
- The Social Security (Scotland) Act 2018
- The Carers (Scotland) Act 2018
- Self-Directed Support (Scotland) Act 2013
- Children's Hearings (Scotland) Act 2011
- Education (Additional Support for Learning) (Scotland) Act 2009
- The Promise
- Getting It Right For Everyone
- National Drugs Mission Plan 2022-2026
- Independent Review of Adult Social Care in Scotland
- Cross-Border Placements (Effect of Deprivation of Liberty Orders) (Scotland) Regulations 2022

Locally, the Health and Social Care Partnership's <u>Strategic Plan</u> for the period 2021-2030 highlights the importance of the wellbeing of people, families and communities. An early intervention and prevention approach to supporting communities is central to any success and is embedded through the key priorities set out in the plan. People are at the centre of the Strategic Plan to ensure health and social care is delivered in a way that promotes wellbeing and suits people and families.

The Partnership's commissioning intentions focus on the 'triple aim' of the national Health and Social Care Delivery Plan, summarised as;

- 'Better Care' improving the quality of care by targeting investment at improvement and delivering the best, most effective support;
- 'Better Health' improving health and wellbeing through support for healthier lives through early years, reducing health inequalities and focusing on prevention and self-management, and;
- 'Better Value' increasing value and sustainability of care by making best use of available resources, ensuring efficient and consistent delivery, investing in effectiveness, and focusing on prevention and early intervention.



East Ayrshire's Community Plan (2015-2030) prioritises working together to improve and sustain wellbeing, care and promote equity.

Wellbeing improvements within the Community Plan have four key aspirations:

- Children and Young People, including those in early years, and their parents / carers are supported to be active, healthy and to reach their potential at all life stages;
- All residents are given the opportunity to improve their wellbeing, to lead an active healthy life and to make positive lifestyle choices;
- Older people and adults who require support and their families and carers are included and empowered to live the healthiest life possible, and;
- Communities are supported to address the impact inequalities has on the health and wellbeing of our residents.

East Ayrshire's <u>Alcohol and Drug Partnership's Strategic Improvement Plan 2020-2024</u> aims to ensure East Ayrshire is a place where individuals, families and communities are included and fully supported to find their own unique concept and working model of recovery.

2.2 Advocacy Planning Group

In East Ayrshire, the Partnership leads planning for independent advocacy. Thus, the Strategic Planning Group and Wellbeing Delivery Group have come together in recognition of the shared agenda described above and meet regularly as one body. As part of its overall portfolio of responsibility for local planning and implementation, the Strategic Planning/Wellbeing Delivery Group has adopted the role of Advocacy Planning Group. The Group includes representation from statutory sector, third and voluntary sector, independent care sector, people who use services, carers and independent advocacy.

2.3 What is currently available in East Ayrshire?

East Ayrshire Advocacy Services ('EAAS') provide independent advocacy for the groups below.

- People aged 16-65 years, living in East Ayrshire who have:
- a learning disability or;
- a mental health issue or;
- an acquired brain injury or;
- a drug and/or alcohol addiction or;
- been detained under the Mental Health Act
- People living in East Ayrshire aged over 65 years, including residents in Care Homes
- Men in HMP Kilmarnock;
- Vulnerable Parents;



- East Ayrshire residents in the psychiatric setting at Woodland View Hospital or any other hospital in Ayrshire and Arran;
- Young people aged 5-18 years who are involved in the Children's Hearing System or subject to a Deprivation of Liberty Order;
- Young people aged 14+ years who are subject to mental health legislation, and;
- Children and young people who are involved in the Children's Hearing System.

Importantly, EAAS does not require any diagnosis of mental illness in order to help someone. It is sufficient for someone to present as stressed or anxious in relation to their situation to have access to independent advocacy support, including situations arising from addiction or caring responsibilities.

EAAS has an open approach, accepting referrals from people who believe they need advocacy, from carers, family members and friends, as well as from professionals/ workers who are involved in people's lives, such as social workers and health visitors. Referrals can be made in person, by telephone or online. The service aims to contact the person within 2 working days to scope the need for advocacy and will withdraw if it is against their wishes. East Ayrshire Advocacy Services' website (http://eaas.org.uk/) provides full information about the types of advocacy offered. Referrals can also be made online via the website.

In East Ayrshire, Who Cares? Scotland provide independent advocacy for:

- Children and young people who are Looked After and Accommodated in East Ayrshire, and in external placements where capacity allows.
- Young people in East Ayrshire who are going through the permanency process.
- The service aims:
- to provide individual representation, support and advocacy for a Child or Young Person– where appropriate – at meetings, panels and reviews;
- to assist the Child or Young Person to understand and access complaints systems, understand Care Inspectorate standards and the level of service that is expected from the Scottish Social Services Council code of conduct as well as local authority policies and procedures;
- to provide information and support on rights and responsibilities;
- to work in partnership with the Commissioners to raise awareness on issues affecting the Child or Young Person;
- to support the Child or Young Person to become involved in sharing their experiences to directly influence policy, practice and training both locally and nationally;
- to participate / lead consultation with the Child or Young Person and others as agreed with the Commissioners in relation to specific local themes and other areas linked to the Commissioners policies and activities, for example Service reviews;

- to encourage and involve the Child or Young Person in local forums; and
- Who Cares?Scotland to provide opportunities for the Child or Young Person to be actively involved in governance of the organisation and can participate in national work including campaigning, policy review and the delivery of training inputs.

These services in East Ayrshire are provided by a single Advocacy and Participation Worker. WhoCares?Scotland accepts referrals from children and young people



themselves, from carers and families, as well as from professionals/workers who are involved in their lives. As part of this open approach, referrals can be made in person, by telephone or online. <u>WhoCares?Scotland's website</u> provides full information about the services offered (<u>https://www.whocaresscotland.org/</u>)

2.4 Beyond East Ayrshire

In Ayrshire, the North Ayrshire Health and Social Care Partnership leads on leadership, management and development of Mental Health in respect of: all Mental Health Inpatients Services (including Addictions), Psychiatric Medical Services, Eating Disorders, Forensic, Intensive Community Psychiatric Nursing Team, Liaison (Adult, Alcohol and Drug, Advanced Nurse Practitioner Services), Emergency Services Mental Health Pathway, Child and Adolescent Mental Health Services and Psychology Services, while the East Ayrshire Partnership retains full responsibility for community services within these specialties.

2.5 Funding local advocacy services

EAAS is jointly commissioned by East Ayrshire Council and NHS Ayrshire and Arran, with the Council acting as lead agency. The service is Grant Funded through the Council via a service level agreement, most recently in 2022/23 table below:

Core Funding	£221,248
NHS Funding	£134,546
Total	£355,794

Who Cares?Scotland is commissioned on a contracting basis. The contract value is £52,780 per annum and is commissioned by East Ayrshire Council.

Total funding per	£52,780
annum	

2.6 Working together

The things that support people to express their views go beyond those services commissioned for professional independent advocacy. Collaborative working with local partners ensures a rounded offering of information and advice that empowers people to express their views.



Carers

East Ayrshire Carers Centre works independently and in partnership in East Ayrshire to ensure that adult and young carers know all of their rights with regards to the Carers (Scotland) Act 2016; that they get the support, advice and guidance they require to live a life alongside caring; that they receive full benefits maximisation to reduce poverty; that they receive bespoke options to get breaks away from their caring role and; that they are less isolated and more able to contribute to their local community.

In relation to advocacy, East Ayrshire Carers Centre supports carers through discussion, to identify and understand their issues and related rights, the outcomes they want to achieve and potential ways to achieve them, making them more able to self-advocate. They work jointly with local independent advocacy providers to ensure people are supported by the most appropriate organisation and that it is well coordinated.

For more information, visit the website: <u>https://www.eastayrshirecarers.org.uk/</u>

Adult Carers and Young Carer Support

The Carers Centre employs Adult Carer Support workers who are working with carers to create their individual Adult Carer Support Plans, advising on Self Directed Support and carers rights to ensure outcomes are met.

Three part time Young Carer Peer Mentors work with young carers in the same way, helping them to identify what would make a positive difference to their lives and caring experiences and using this understanding of what matters to develop the Partnership's Young Carers Statement.

Hospital Discharge Carer Support

The Carer Centre's Hospital Discharge pilot project, works in partnership with East Ayrshire Health and Social Care Partnership and the Discharge without Delay teams to ensure family members understand their rights as unpaid carers in the discharge journey of their loved ones.

Working with a variety of agencies, 2 employees are based at University Hospitals Ayr and Crosshouse and make daily ward visits to meet and support family members – they can liaise with other services to ensure the right support is in place at the right time so that the discharge is sustained and supported.



Citizens Advice Bureaux

Citizens Advice Bureaux are local, independent charities that provide free and confidential advice and information. They provide practical advice, negotiate on behalf of clients and even represent them formally, such as at tribunal hearings.

Common areas of inquiry include:

- Benefits entitlements, support with applications and appealing decisions
- Debt and money advice how to manage debts, improve your financial situation and maximise your income
- Consumer issues from used cars to difficulties with gas and electricity suppliers
- Work-related problems terms and conditions, dismissal, redundancy and intimidation
- Housing from renting through to homelessness
- Relationships splitting up, children and bereavement

For more information, visit the website: <u>https://www.cas.org.uk/bureaux/east-ayrshire-citizens-advice-bureau</u>

Patient Advice and Support Service

Patient Advice and Support Service supports anyone who uses the NHS to understand their rights and responsibilities as a patient in Scotland, raise concerns, give feedback or comments, or make a complaint about NHS treatment in Scotland.

The Patient Advice and Support Service can:

- Help you to give feedback or comments, raise concerns, or make complaints about the treatment you have received from the NHS in Scotland.
- Help you to prepare if the NHS offers a meeting to discuss a complaint or concern.
- Help you write letters and make phone calls.
- Help you access your medical and clinical records.
- Help you to understand your options regarding treatment, care and support.
- Help you make a complaint on behalf of someone else. You will need to have signed authorisation, be a legal guardian or have welfare Power of Attorney.
- Help you make a complaint on behalf of someone who has passed away.

For more information, visit the website: <u>https://pass-scotland.org.uk/</u>



3. WHAT IS THE NEED FOR INDEPENDENT ADVOCACY?



Between 2001 and 2021, the 25 to 44 age group saw the largest percentage decrease (-16.4%). The 65 to 74 age group saw the largest percentage increase (+33.9%).



Between 2018 and 2028, the 45 to 64 age group is projected to see the largest percentage decrease (-10.1%) and the 75 and over age group is projected to see the largest percentage increase (+25.3%).



In 2020/21, the number of people referred for dementia post-diagnostic support was 179. 84.9% received a minimum of oneyear's support which has decreased from 96% in 2018/19.



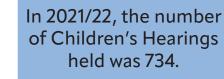
2020/21 Population with anxiety, depression and psychosis prescriptions 20.9%



2020/1 Alcoholrelated hospital admissions per 100,000: 561.1

2018/19-2020-21 Psychiatric patient hospitalisations per 100,000: 185.6







2020 Population in most deprived SIMD quintile: 30.6%



2017/8-2019/20

Drug-related hospital

admissions per

100,000: 371.9

In 2021/22, the number of children subject to Compulsory Supervision Orders was 197. 2020/21 Population with long-term health condition 26.7%



At 30th June 2023, there were 81 children on the Child Protection Register.



In 2022/2023, there were 108 looked after children in East Ayrshire

3.1 Meeting the demand

East Ayrshire Advocacy Service have received 1,206 referrals for support from January to December 2023. With 36% of all referrals to the Adult Service, this is service area with most demand. The demand for the Adult Service increased by 58% since 2022. The demand for the Older People's Service increased by 50% since 2022. There were also 70 referrals to the Children's Hearing Service in 2023 which is an increase of 19% from 2022.

WhoCares?Scotland have supported between 23 and 53 children/young people per year since 2021/22, who account for an average of 276 advocacy 'asks' per year in total. There has been an increasing trend, with the number of asks increasing to 303 in 2022/23. This is a 22% increase from 2021/22. During this period, the service has supported young people to express themselves in relation to a number of themes. The top themes being maintaining relationships, legal aid and education.

Out of Area Placements

We recognise that where a child or young person needs to be placed somewhere outside East Ayrshire, maintaining connections with home and ensuring that their voice continues to be heard in local processes and decisions is a significant part of achieving a positive outcome.

In relation to mental health, East Ayrshire Mental Health Officers ('MHO') retain their responsibilities for the duration of legal interventions that require the person to be placed out of area; part of which is a duty to ensure the person has access to independent advocacy.

EAAS and Who Cares?Scotland work with independent advocacy providers in other areas to ensure a continuity of service when someone is placed outside East Ayrshire. The East Ayrshire advocate will travel to the other area, provide independent advocacy for the person and work with the other advocacy provider to manage the transition to a new advocate where necessary. Similarly, when the person is coming back to East Ayrshire, the independent advocates work together to make this a seamless process.

These reciprocal arrangements are also in place for people from other areas being placed locally.

3.2 What people have told us?

In developing this Plan, we asked people for their views and experiences of advocacy in East Ayrshire, as well as asking for thoughts on how we can improve. Some key things you told us were:

Advocacy support needed for children and young people going through the child protection process.

Feel that we are in a better position now having Rapid Access to Drug and Alcohol Recovery (RADAR) as an initial contact point.

Helps me understand what's coming next and helps me share my views.

> My advocate makes sure I know what my options are and she explains what each thing means so I can make the best decision.

They help me speak with social work and let them know how I feel.

They listen and my advocacy

Share your experiences of local advocacy services in East Ayrshire

> East Ayrshire Health and Social Care Partnership are developing a new Advocacy Plan for East Ayrshire. We want to hear what you think about advocacy and your experiences.



Scan the QR code or go to www.smartsurvey.co.uk/s/Advocate to take part in our short survey.

If you would like more information please contact Lorna McIlreavy on 07826 914638 Lorna.McIlreavy@east-ayrshire.gov.uk worker was really knowledgeable



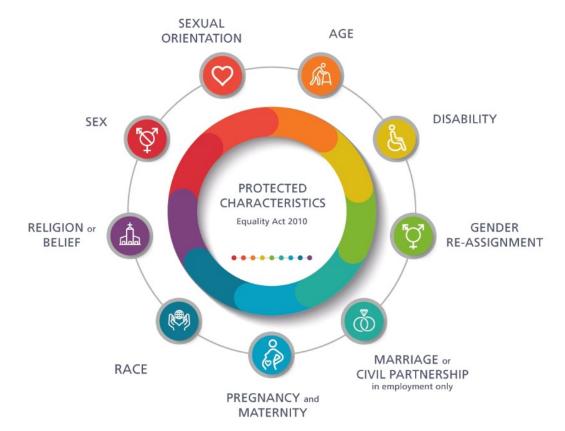
3.3 Engagement, Equalities, Monitoring & Evaluation

People can find it difficult at times for their voice to be heard when actions or decisions are being taken that affect their lives. Some people in society are much more likely than others to be treated badly, either because of structural barriers, inequality, discrimination and prejudice or because of their own vulnerability, or a combination of factors. The characteristics which may mean that people are at risk include the protected characteristics as identified by the Equality Act (2010). These are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.

Everyone, everywhere, has basic rights and freedoms which are needed to live together with dignity based on a common humanity. These human rights are secured in law. The law applies to everyone equally and provides an important means of protection for the most vulnerable in our communities, including those who use independent advocacy services. Independent advocacy plays an integral role in helping to ensure that an individual's human rights are respected by offering access to justice on an equal and non-discriminatory basis with others. It does this by addressing issues of autonomy and choice, and by supporting an individual's voice and opinions to be meaningfully heard. Independent advocacy helps statutory services to practice a human rights based approach.

We will engage with our communities throughout the lifetime of this Plan to continue to understand how advocacy contributes to achieving what matters to them. The Plan has been assessed for its impact on different groups of people.

The Advocacy Planning Group will retain oversight of progress towards our outcomes. Through ongoing monitoring and evaluation, we will continue to improve the quality of the services provided and raise awareness of the role of advocacy.



We will regularly review advocacy services and provision against the Scottish Independent Advocacy Alliance's Principles and Standards for Independent Advocacy.

4. OUTCOMES FRAMEWORK

Avocacy Standards	Where are we now?	Where do we want to be?
PRIORITY 1		
 Independent advocacy recognises and safeguards everyone's right to be heard. 	•Children and young people aged 14 years and above who are subject to the Mental Health (Care & Treatment) (Scotland) Act have access to independent advocacy.	•Widen access to independent advocacy for vulnerable children and young people.
• Independent advocacy enables people to have more agency, greater control and influence.	•Children and young people who are looked after, or who have previously been so have access to independent advocacy.	•Monitoring arrangements are in place to ensure service sustainability and manage emerging trends in unmet need.
	•All older people (including carers) in East Ayrshire have access to independent advocacy.	•People tell us they are involved in decisions affecting them.
	•Adults (including carers) who require support have access to independent advocacy as set out.	• Potential gaps in the advocacy offering are analysed and actioned as appropriate including advocacy for:
		-adults who have a physical disability and none of the characteristics within EAAS's remit;
		-adults who are detained under mental health legislation in the out of hours period; and
		-adults prior to discharge from hospital.
	•Carers including young carers have access to peer advocacy.	

Avocacy Standards	Where are we now?	Where do we want to be?
PRIORITY 2		
•People in East Ayrshire understand what independent advocacy is and can access it if required.	•95% of people who responded said they found it easy to access advocacy support services.	•Service providers and commissioners collaborate to further raise awareness of independent advocacy and promote self-advocacy.
	•89% of people who responded found it easy to express their views and opinions.	•People are given accessible information about their rights and the options available to them.
	•96% of people who responded rated the support and advice as good or very good.	
PRIORITY 3		
•Independent advocacy credibility and legitimacy is recognised and fully understood.	•Independent advocacy is connected strategically and locally to Boards, forums, steering groups as an equal partner whilst maintaining their independence.	•Independent advocacy is connected strategically and locally to Boards, forums, steering groups as an equal partner whilst maintaining their independence.





This information can be made available, on request, in braille, large print or audio formats and can be translated into a range of languages.

Scan the QR code or visit east-ayrshire.gov.uk/translationservices for further information.