

About Advocacy

The Scottish Independent Advocacy Alliance Magazine

Summer 2016



**"Okay,
why don't we
start at the
beginning."**

**"Opening Doors" the new animation from
The Scottish Independent Advocacy Alliance**



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Editorial

In this edition read about the new Advocacy Qualification launched by The Advocacy Project which aims to raise the role, profile and status of advocacy in Scotland. Learn about Partners In Policymaking and how it is helping to empower parents of children with learning disabilities.

Don't miss the article highlighting the launch of our film Opening Doors which aims to raise awareness of the power of advocacy for families who are at risk of having their children taken into care.

Check out the article by the New Chief Medical Officer for Scotland outlining her role and the findings of her new Annual Report.

We also learn about the new system of independent prison monitoring in Scotland as well as a telephone service based in East Dunbartonshire which aims to help connect people with the support and services they need.

Finally meet Judith Robertson the new Chair of the Scottish Human Rights Commission who talks about her commitment to building a Human Rights culture in Scotland.

Kiren S. Zubairi, Editor

Next issue:

Please contact Kiren.Zubairi@siaa.org.uk if you have content for a future edition.

Thank you:

The SIAA would like to thank all the individuals who have contributed to this magazine.

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Disclaimer:

The views expressed in this magazine are those of the individual authors and should not be taken to represent those of the Scottish Independent Advocacy Alliance.

Editor:

Kiren S. Zubairi
Kiren.Zubairi@siaa.org.uk
0131 556 6443
SIAA
London House
20–22 East London Street
Edinburgh, EH7 4BQ

The Scottish Independent Advocacy Alliance
Scottish Charitable Incorporated Organisation
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An electronic copy of this magazine can be downloaded from our website: www.siaa.org.uk.



SIAA News

Map of Advocacy Across Scotland 2015-2016

Work on the next edition of the Advocacy Map has begun and we plan to begin analysing the data we have received from Advocacy organisations and local Commissioners. We plan to publish final report in September.

The Advocacy Map has been described as a “crucial tool” and “essential reading” as it is the only regular quantitative research into advocacy in Scotland. The Map captures how much funding advocacy organisations have received and the groups that they work with.

Look out for the article highlighting the main findings in the Autumn Edition of About Advocacy.

Opening Doors

Friday 4th March saw the launch of our new animation *Opening Doors*. The film aims to raise awareness of the importance of advocacy for parents who are at risk of having their children taken into care.

Take a look at the article on page 8 which tells you about the film



Opening Doors is available in a number of languages and formats on our new YouTube channel (www.youtube.com/c/SiaaOrgUkFilms)

Please share the animation widely amongst your networks and on social media using the hashtag #thepowerofadvocacy

Forthcoming research

You may be aware that our research intern Caitlin Macaulay is working on a report detailing the impact of the SIAA.

The report will be available later this year and we would like to thank all those who have taken part in the research.

Shaben Begum
Director

A new practice qualification in advocacy – what's it about?

Gerry McGuire, *The Advocacy Project*

The Advocacy Project has developed an accredited qualification in professional independent advocacy and has been successful in having it credit rated by Edinburgh Napier University. It's called the Professional Practice Award (PPA) and it's a first for the advocacy sector in Scotland. As you can imagine we are all very excited and happy that our hard work in developing this has paid off.

Having it credit rated means that the award has been quality assured by a credit rating body (CRB) and that it meets recognised academic and assessment standards. The CRB is independent of the qualification and works with the Scottish Qualification Authority (SQA) and the Scottish Credit & Qualifications Frameworks (SCQF).

Why a PPA in Advocacy?

Why not? Independent Advocacy should be a quality service and deserves recognition and respect. Our view is that the professionalism, knowledge and skills of our advocates merit recognition. Being able to sit down, think about what we do and shape these around occupational standards means we can measure professional practice against accredited standards.

Just to be clear, our advocates have pushed for this qualification to become a reality – for them and the people they support. It is great for the advocates to get a chance to show the quality of the work they do, and get a qualification at the end of it that is recognised and sits on the SCQF database alongside every other qualification in Scotland.

We are also aware that almost every other occupation has practice standards that define the job at the individual practitioner level.

We think that what we do is unique and deserves similar professional recognition.

So what kind of a qualification is a PPA?

It is a work based learning qualification. What that means is that the learning, knowledge and skills we develop in work are assessed at the advocate practitioner level. It's about understanding that what we do on a day to day basis is really important in the lives of the people we support and work with.

They deserve a quality service, to get that you need quality standards. The PPA sits alongside the SIAA Code of Practice and Principles and Standards.

Our assessors are currently studying for the SQA workplace assessors award, an important element in the quality assurance process to make sure we are competently accessing practice.

Is the PPA the same as an SVQ?

Yes and no. The Advocacy Project own this award. SVQ's are owned by the SQA. We have a fair degree of independence in how the award is implemented and further developed.

The similarity is that it is a vocational award like an SVQ and some of the assessment and quality assurance processes have a natural overlap.

Does the advocacy sector need a PPA?

We think it does, otherwise it runs the risk of being left behind. Let's face it, unless the sector can define what makes it unique and different it could easily be incorporated into say, advice & guidance or be marginalised as non-essential.



The people we support think it is essential and it is up to us to show that.

We think it's about how the advocacy sector measures up against the demands of Continuous Professional Development.

The health and social care sector we work in is heavily regulated, and every case conference, AWI hearing and Mental Health Tribunal is attended by multi-agency professionals.

Our view is that the advocate is also a professional and the PPA gives them the chance to achieve that status.

The current economic climate is a great threat to the sector. We need to demonstrate to funders that investing in independent advocacy is investing in quality outcomes. The sector needs to clearly define itself better and one way of doing that is raising the bar at the advocate practitioner level and start asserting our right to professional status.

Can anyone undertake the PPA?

We are now 9 months into implementation so it's early days yet. Our idea is that once all advocate practitioners have joined the course we will be thinking of making it available externally.

The award will be restricted to SIAA member organisations, and specific to the advocate practitioner, so it is not for managers. We also have the ambition of becoming a Centre of Learning Excellence and would envision making the award externally available once that is complete.

How many advocates are doing the qualification?

Currently 16, with another 20 joining the course over the next 6 months. The award takes a year to complete.

Is the PPA the same as the qualification in England?

Inevitably there are similarities, but this is a new qualification specific to the advocacy sector in Scotland. The context is Scottish as are the concepts and themes.

The thing that could be said about the City and Guilds Diploma in England is that it has raised the role, status and profile of advocacy and empowered individuals and their advocates to have a powerful voice in challenging professionals and the care system. We would like to see the same thing in Scotland, which the PPA will hopefully do.

For more information contact:
The Advocacy Project on 0141 420 0961

Partners In Policymaking

Keith Etherington, National Co-ordinator, In Control Scotland

In Control Scotland is a registered charity and a not for profit organisation. We work with organisations, local authorities and people across Scotland to support the development of a sustainable system of self-directed support. We provide training, development and consultancy and share what we learn to improve the experience of self-directed support for everyone.

In Control Scotland were successful in securing core funding from the Scottish Government to run the 'Partners in Policymaking' programme over 3 years from 2015 - 2018. 'Partners in Policymaking' is an internationally acclaimed leadership course that supports parents of children with a disability under 18 years of age, together with self-advocates, to experience, learn and develop the skills, knowledge and expertise to influence policy, service design and practice at a local and national level for the benefit of all.

The programme is run once a year on a national basis and is made up of 8 sessions that take place over a weekend (Friday and Saturday) for an 8-month period from October through to May. During these 8 months, participants are exposed to best practice, latest research and innovative thinking from across the world.

The content of the programme covers aspects such as the history of the Disability Movement, Employment, Education, Housing, Person-Centred Working, Planning and Practice, Legislation and most recently the inclusion of Self Directed Support, which is woven throughout the agenda over the 8 months.

The programme includes a very varied range of local, national and international speakers and presenters.

The current programme has been running since October 2015 and here is some of what existing participants have had to say so far:

"Partners has provided me with a wealth of information around every aspect of disability. I have been privileged to hear from an array of inspirational speakers and fellow parents who sought to make positive change. Sharing experiences has enabled me to develop my skills and knowledge and plan for all of my family's futures, not just for my disabled son... I would wholeheartedly recommend this course to any family wishing to give their disabled son or daughter the same opportunities as everyone else"

"Partners has provided me with a platform of support at a crucial time in both my children's young adult lives...This course has helped provide me with the confidence and drive I need to speak out for what I

believe in. I am proud to feel part of a disability rights movement and keen to strive to help make change possible, knowing that even a small change can go a long way..."

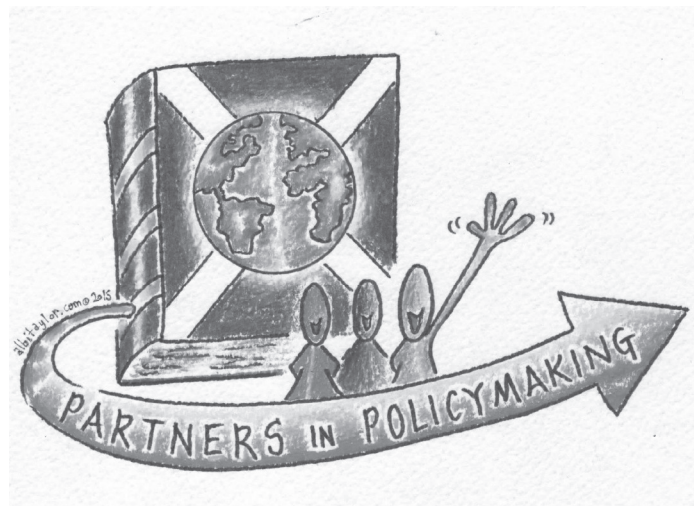
"I'm halfway through the Partners journey and I'm unrecognisable. The course content, the participants and the speakers are all changing the way I think and act for the better! The energy I have gained from being part of this process is going to help change my son's life and our family's future. I'm becoming braver and thinking bigger with every month... Thank you"

"Thanks for such a liberating experience guys - It's totally changed the way I deal with things, for the better. "

We have now confirmed the dates for the 'Partners in Policymaking' programme for 2016/2017. There are 40 places available on each Partners in Policymaking programme and we are keen to get applications from people living in all areas of Scotland for the next programme which is due to start 30th September 2016.

Following the closing date for applications (final date for this mid-August 2016) a selection process will be held to decide on the final participants. There is no cost to participants attending the programme which will take place in Dunblane and if you are unsure about what attending will involve, or are unsure about the support you might need to attend successfully, please get in touch to talk more about this. Many previous participants have said that the programme has been life changing!

For more details on the Partners in Policymaking programme, (including general information, programme descriptor and application form) contact In Control Scotland.



For more information visit the In Control Scotland website:
www.in-controlscotland.org/

Launch of SIAA Animation 'Opening Doors'

SIAA

The premiere of the new SIAA animated film 'Opening Doors' took place 4th March at the Glasgow Film Theatre. The packed audience included attendees from advocacy organisations, Social Work departments, NHS Boards, other voluntary sector organisations and advocacy service users. The film aims to raise awareness about the power of advocacy for families in difficult circumstances who are at risk of having their children taken into care.

We know that parents with learning disabilities, mental health issues and/or drug and alcohol problems are disproportionately likely to lose their children. However, reports from advocacy organisations on their work with parents demonstrate that early intervention by independent advocacy can help bring better outcomes for families.

The film is the culmination of our three year Families at Risk project funded by the Scottish Government Third Sector Early Intervention Fund which was administered by the Big Lottery. The initial project was designed to raise awareness about child protection issues amongst advocates and to inform social care professionals and children's hearing panel members about independent advocacy.

Phase 1 developed and delivered training specifically for advocates, providing grounding in key legislation and policy. Alongside this, guidelines for advocates working with Families at Risk were developed in consultation with advocacy organisations. The guidelines provide a useful reference to best practice in advocacy. They also are used by people using advocacy to get clarity about what they can expect from an advocate and for professionals who want to understand the advocacy role further.

Phase 2 the film, is based on real stories of actual families in Scotland. We developed an animated film to protect their privacy.

Opening Doors follows 3 characters, Laura a young woman with learning difficulties who is pregnant, Ahmed who has a young son and has issues with alcohol and Teresa who has mental health issues. It shows how Moira their advocate helps them know and understand their rights, navigate the system, ensure they are listened to and speak for themselves.

The film was made with the help of a focus group made up of parents and advocates with experience of child protection procedures.

A focus group, directing the development of the film, was established and was made up of representatives from advocacy organisations with experience of working with parents and also the Chair of the People First Scotland Parents Group.

The focus group helped identify the key issues and used their experience to highlight the difference advocacy makes. Members of the focus group met with the writer to inform the script and ensure that the language was clear and accessible they also met with the animator to ensure that scenes were realistic and that characters were portrayed positively.

The whole process of producing and launching the film was a collaboration with Media Co-op who have a track record of producing high quality, award winning films with a social message.

They worked with us to recruit a professional writer, animator and cast of actors. The part of Laura was played by a woman with learning difficulties.

“Must be shown in communities, so people will demand the services”

Opening Doors was launched at the Glasgow Film Theatre with approximately 100 people in the audience. The showing was followed by a plenary session made up of representatives from Scottish Government, Children’s Hearings, an independent Safeguarder and an advocate.

The discussion and questions from the audience raised interesting issues around how complex the child protection system is, how difficult parents find it to engage with and how disempowered they feel and crucially the difference support from an advocate can make for everyone involved even if the outcome isn’t what the parents are looking for.

Since the launch the film has been shared widely across various social media networks with much positive feedback. Advocacy organisations have also held local screenings and report positive feedback on the film. One organisation told us:

“The film was well received and gave rise to lively debate, especially as we had people there with personal experience of having their children removed, and of how advocacy can help. We are a collective advocacy organisation, and some of our members have started a group called ‘Hear Me’ which is for people experiencing this issue. The film will be an excellent tool for their group.”

Comments on the film include:

“I’m impressed at how clear the message was”

*“Needs to be seen” ...“Brilliant”
...“Fantastic”*

“Opening Doors is a powerful example of collective advocacy.”

Opening Doors will be used as part of training programmes for a range of professionals wanting to learn more about the difference advocacy can make in emotionally difficult and legally complex situations. The film is available in a number of different languages including; Arabic, Urdu, Punjabi, French, Polish and BSL (British Sign Language).

We know that there isn’t enough independent advocacy for people who have a statutory right to access it but we believe that in situations where decisions are made that have a long term and life changing impact then advocacy should be available.

We believe that in the ideal world services would be person centred following a human rights based approach so that no one needed the support of an independent advocate but until that day arrives we believe that where families are going through child protection procedures then both parents and children should have access to separate independent advocates.

You can watch the film in a number of languages and formats on our YouTube channel www.youtube.com/c/SiaaOrgUkFilms

Annual Report of the Chief Medical Officer for Scotland

Catherine Calderwood, Chief Medical Officer for Scotland, General Medical Council

I am delighted to have been asked to write for About Advocacy magazine – there is nothing quite like the power of hearing people's stories in health and social care so doctors, like myself, can ensure people have as much control as possible over their own lives.

As you may know my first annual report as Chief Medical Officer for Scotland was published earlier this year. It set out the data which shows the health of our nation, but I also chose to focus on the issue of Realistic Medicine – in a nutshell, this is about asking if clinicians can deliver care differently or better by:

- Changing our style to shared decision making?
- Building a personalised approach to care?
- Reducing harm and waste?
- Reducing unnecessary variation in practice and outcomes?
- Managing risk better?
- Becoming improvers and innovators?

Scotland has an increasingly aging population and a growing number of people who live with multiple and complex conditions. The subsequent increase in demand for services in an age of austerity requires us to achieve more through better use of resources.

Current models of healthcare services are stretched and do not always suit patients, their carers or indeed the aspirations of the workforce.

Our health services have also tended to focus on urgent care rather than the early detection and even prevention of illness. The training of doctors has been mainly in a traditional model of care with patients reliant on healthcare professionals for information, diagnosis and referral, and with interventions decided mainly by healthcare professionals. The future model of care, I believe, is one with the person (as patient) in a shared decision-making partnership with the clinician, to build a personalised approach to care.

I'm pleased that there has been a positive response to Realistic Medicine. It helps me in my role of providing a clinical voice - shaping the direction of Scotland's future health policies and its approach to healthcare and public health; leading medical and public health professionals in driving forward improvements to ensure a health service fit to meet the challenges of the future; providing trusted clinical advice on professional standards and guidelines on behalf of the Scottish Government; and, of course, offering independent advice to Scottish Ministers.

Since the report was published my team and I have been engaging with health professionals around the country to hear feedback and share ideas for implementing realistic medicine. Twitter has been alive with comment - Prof Sir Muir Gray, a leader in screening, public health and information management and Ben Goldacre, the Senior Clinical Research Fellow at the Centre for Evidence-Based Medicine have both offered very positive feedback on the content of the report. There has been feedback also from many clinicians supportive of the concept of realistic medicine. I heard from one who regularly deals

with people with multiple co-morbidities. While he puts in place considered and personalised plans for care, his experience is that these are often ignored when the person is admitted to hospital and a whole range of tests and procedures are instigated; which not only are a waste of time and resource, but critically not in the best interests of that person. The concept of 'waste' in healthcare also being intervention which does not add value for that person. I've had many personal stories from doctors themselves – particularly about over-treatment – of their own relatives and friends. Studies show that doctors choose less treatment themselves than they offer the people they care for, especially at end of life when choosing to avoid treatments that may extend their life but not improve the quality of their lives.

We as clinicians can acknowledge our powerlessness at times, and ensure that a difficulty on our part (or on the part of a person or their family) in accepting the inevitable does not reduce the patient's experience of death. I have heard of times when deterioration (and death) of a patient with a long history of multiple illnesses with complications comes as a complete shock to that person and their family when this inevitability has been obvious (but unspoken) to those looking after them over many years. Yet patients and their families welcome transparency and the evidence is that, rather than not revealing the full story, having more information helps people cope better with bad news.

I do realise that if we are to implement Realistic Medicine we will need to take the public - and the people who become patients - with us.

That is why after I present my thoughts following my engagement with clinicians later this year, I intend to look at how we reassure ordinary people about what this means for their health and care. That is why I am so pleased to have been asked to write for About Advocacy.

I recognise the important role of independent advocacy in helping bring about the realisation of realistic medicine: helping people get the information they need so they can make real choices about their circumstances; putting their choices and wishes across to others; and speaking on their behalf when they are unable to do so for themselves.

Catherine Calderwood (@CathCalderwood1) is the Chief Medical Officer for Scotland, appointed in March 2015. She is an obstetrician and gynaecologist and continues to have a maternal medicine antenatal clinic at the Royal infirmary of Edinburgh. Catherine qualified from Cambridge and Glasgow universities. She blogs at <http://blogs.scotland.gov.uk/cmo/> The Executive Summary of her Annual Report which includes details of the ways you feedback to her is available at: <http://www.gov.scot/cmoannualreport201415execsummary>

Independent Prison Monitoring in Scotland

Beth Macmaster, National Prison Monitoring Coordinator, HM Inspectorate of Prisons for Scotland

Around 7,800 people are held in prison in Scotland – an imprisonment rate of 143 per 100,000 population, amongst the highest in Europe.

Prisons form an important part of the justice system in Scotland. It is crucial that they provide safe places both to detain those who have been given custodial sentences and to prepare them for release back into their communities.

The United Nations has recognised that people held in custody are vulnerable to ill treatment. Scotland, as part of the UK, is committed to the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) and under this has a duty to provide regular, independent monitoring of prisons. This forms a crucial safeguard, ensuring that prisons perform their role safely and well.

A new system for Independent Prison Monitoring, set out in the Public Services Reform (Inspection and Monitoring of Prisons) (Scotland) Order 2015 came into force on 31 August 2015. Independent Prison Monitoring in Scotland, replacing the previous mechanism of Prison Visiting Committees.

The New System

The new system brings monitoring under the remit of HM Chief Inspector of Prisons for Scotland, alongside but separate to prison inspection. Key principles of the new system include:

- **Community:** Independent Prison Monitors (IPMs) are volunteers from local communities – local people act as the eyes and ears of their community in monitoring treatment and conditions in prisons, improving understanding beyond the prison walls.
- **Independence:** IPMs have free and unfettered access to prisons as set out in the legislation. They monitor without any escort by prison staff and may go to any part of the prison and look into any issue they observe or any issue raised by a prisoner. The Independent Prison Monitoring Advisory Group, which sits quarterly and has an independent chair and 6 IPM members, provides an additional safeguard to independence.
- **Accessibility:** HM Inspectorate of Prisons for Scotland (HMIPS) undertook consultation with people held in prison to establish the best communication routes for them. As a result, a new freephone number (0800 056 7476) is available to place a request to see a monitor as well as request boxes. Monitors attend prisons on a weekly basis.
- **Consistency:** the new Independent Prison Monitors have the Standards for Inspection and Monitoring as a framework. Monitoring Co-ordinators are in place to provide training, support and to check monitoring practice, and also to escalate and resolve issues raised in a consistent way across the prison estate.

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- Continuous improvement: under the new system there is a mechanism to review findings from monitoring at a local, regional and national level to explore patterns, identify concerns and highlight good practice. This can be fed in to local prisons, the Scottish Prison Service nationally and also other key stakeholders, including the Scottish Government and the NHS. Information from monitoring can also be shared with Prison Inspectors to inform their work.

About the Independent Prison Monitors

There are around 150 IPMs working in 15 teams, one in each prison in Scotland. IPMs include people from all walks of life, including young people completing study or training and keen to learn new skills, professionals who fit the role around their working day, parents or carers who spare time from their caring responsibilities to offer their input and retired people who are keen to offer their experience and skill. All the new IPMs share a strong commitment to human rights and continue to build their expertise around prison conditions and treatment in Scotland.

The Team at HMIPS

The Independent Prison Monitoring Team at HMIPS provides day to day support and coordination for Independent Prison Monitoring. The team, which reports to the Chief Inspector of Prisons, includes three Regional Prison Monitoring Coordinators and one National Coordinator.

The coordinators link in with prisons and other stakeholders locally and nationally to develop routes to highlight and resolve concerns and issues and share good practice.

The Independent Prison Monitoring Advisory Group

The Advisory Group provides an important safeguard in the form of independent governance. The Group is chaired by Dr Alan Mitchell of the Scottish Human Rights Commission and includes members with a range of expertise in prisons, healthcare and human rights. There are 6 IPM members from across Scotland, ensuring an independent route to identify and highlight any concerns with the system. The Group reviews the guidance and support for Independent Prison Monitoring, and its impact.

- Direct approaches: IPMs are in prisons every week and wear clear identification so that people know who they are. People held in prison can approach IPMs directly.
- Third party: we often receive requests through third parties – family members, staff from third sector agencies or prison officers.

We aim to see people held in prison within a fortnight of receiving a request, although we may arrange a visit sooner for any urgent matters.

For more information see:
www.prisoninspectorscotland.gov.uk/

OPAL

Roy Hunter, CEARTAS

OPAL is a telephone helpline for adults in East Dunbartonshire who use, or might want to use, health or social care services. OPAL connects people with the services and support they need, and the service is free: all they pay for is a local telephone call. OPAL is a co-operative venture between Ceartas Advocacy, East Dunbartonshire Citizens Advice Bureau, and Carers Link, supported by East Dunbartonshire Voluntary Action.

OPAL started in July 2012 as a Change Fund project for older people, aimed at reducing avoidable admissions to hospital and care homes. It uses a preventative and anticipatory approach, dealing with little problems before they become crises. East Dunbartonshire has the second oldest population in Scotland, so we had our work cut out. When the Change Fund finished, OPAL kept going by expanding its remit to all adult service user groups.

Since the inception of the project, OPAL has achieved a client gain of over £300,000 p.a. in Income Maximisation. Citizens Advice Scotland's own research shows that the vast majority of that money is immediately spent in the local economy, boosting local businesses and local employment.

In 2015 alone, OPAL made more than 300 referrals to services like Home Care, Occupational Therapy, Falls Prevention, Care and Repair, Meals on Wheels and Community Alarms.

These services reduce the chances of injury, neglect or harm; but also have a hidden benefit, they reduce anxiety and self-limiting behaviour for vulnerable people and keep them more active.

OPAL has also identified gaps in local services like Community Transport, and social and leisure activities in the area. Through our partnership with EDVA, our local Third Sector Interface, we have been able to address these issues.

When the OPAL phone rings, it is answered by a real person, not a machine that thanks you for holding and tells you how important your call is. Research suggests that many of our service user groups tend to be less willing or able to engage with technology like that. The OPAL Advisers work in East Dunbartonshire, and they know the local area, know the local services, but most importantly they have the time to talk.

We all know that it takes a while to build up rapport with a new service user, and that is when they start to tell you about the real issues and how these issues affect them. OPAL Advisers try to do the same with their callers.

If someone calls about a handrail on the stairs at the front door, the obvious answer is an Occupational Therapy referral. But in the course of the conversation, OPAL can investigate other aspects of the person's life:

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- How are you managing with household tasks like changing a light bulb or hanging curtains? We can ask Care & Repair to do that for you.
 - Are you feeling socially isolated? We can refer you to Befrienders, or give you information about lunch clubs or other social activities.
 - Do you feel inactive and unfit? We can direct you to local health walks, or to fitness classes specifically aimed at people in your situation.

So why is Ceartas involved in OPAL? Simply, it generates advocacy referrals. Likewise, Citizens Advice Bureau gets Income Maximisation referrals, Carers Link finds carers, and EDVA finds out about gaps in service provision.

OPAL generates a steady stream of advocacy referrals for Ceartas: Power of Attorney, Self-Directed Support, support for ESA and PIP assessments, communicating with Social Work, all the usual issues. But as we all know, the advocacy referral often arrives once the issue has already become a conflict, the relationships are breaking down, in short when it is too late. OPAL referrals tend not to do that.

OPAL Advisers can help callers to understand service processes, and to manage their expectations:

“Yes, I can make a referral to OT for you, but there is a waiting list. You will receive a phone call from the Duty OT.”

That call is not a casual chat, it is a triage process.

“You have to tell the Duty OT how bad your mobility is, do not tell them you are fine. The Duty OT will tell you what risk category you fall into, which will determine how long you have to wait for an assessment...”

Taking five minutes to talk through the process, and managing the caller’s expectations, seems to reduce the stress that people can feel when they become involved with a service for the first time. If it looks like there is going to be a problem, OPAL can make a referral to Advocacy at the right time, but in general we do not have to because the caller has started the process fully informed and with realistic expectations.

OPAL does not spend a lot on advertising: we rely on word-of-mouth, referrals from other services, and repeat business. But based on the satisfaction expressed by both callers and other services in the area we fully expect to keep growing, and we fully expect the people of East Dunbartonshire to have a better quality of life as a result.

**OPAL East Dunbartonshire helpline number is:
0141 438 2347**

Introducing the new Chair of the Scottish Human Rights Commission

Judith Robertson, Chair of the Scottish Human Rights Commission

It was with great pleasure and a sense of privilege that I took up the post of Chair of the Scottish Human Rights Commission in March this year. Coming from a background in international development, community development and mental health, I am looking forward to the opportunity and scope that working with the human rights framework presents.

In March, the Commission laid its third Strategic Plan with the Scottish Parliament. Building on our first eight years as Scotland's National Human Rights Institution, the new Strategic Plan sets out five priorities for our work until 2020.

First, we will continue to build a human rights culture in Scotland – where people are empowered to claim their rights, where government and others know how to respect people's rights and are held to account when things go wrong.

Second, we will build on our strong track record of work in health and social care to embed human rights in practice throughout services. Our aim is to place a particular focus on mental health during this Strategic Plan, including work to secure supported decision making. We see this as fundamental to realising other rights, including the right to independent living.

Third, we will work to put human rights at the heart of how Scotland achieves social justice. We will build on our experience of working with people directly affected by poverty and exclusion and work actively to influence policy in this area.



Our fourth priority is to increase accountability for rights by defending existing human rights laws, scrutinising other legislation, spotlighting issues and holding organisations to account when things go wrong.

Finally, we will put a greater emphasis on learning, sharing and promoting good practice when it comes to human rights, both nationally and internationally.

The Commission's third Strategic Plan has been developed against the backdrop of a vibrant, positive discussion about human rights in Scotland. Increasingly, both policy makers and frontline organisations understand that human rights are about things like people's health, their housing and their right to an adequate standard of living. In short, human rights are about securing dignity for everyone in everyday life.

Now is the time to make rights real for people and we will build on our work with SIAA to make that happen.