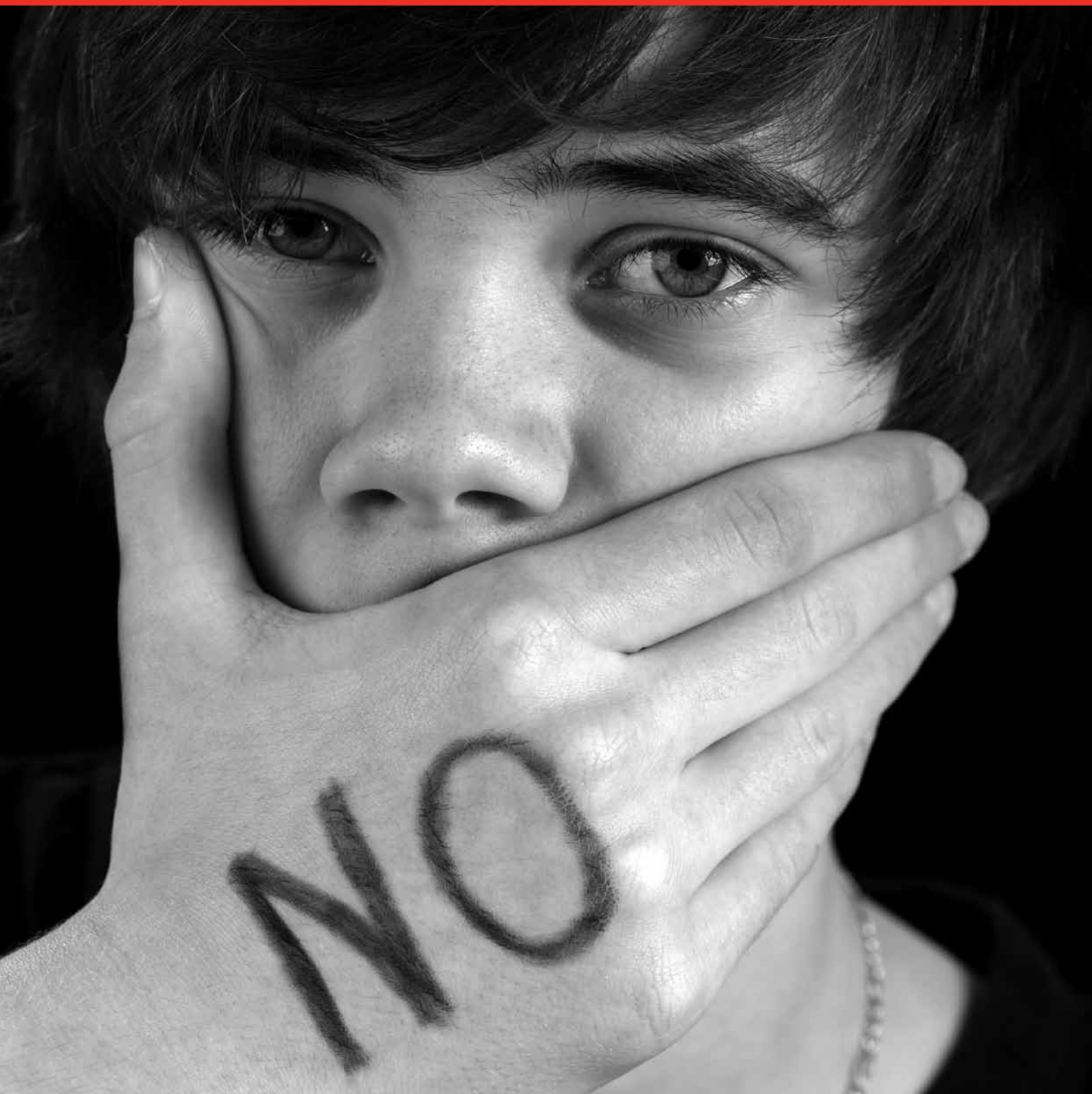


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The Scottish Independent Advocacy Alliance Magazine

Autumn 2013



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Editorial

This packed edition focuses on Scottish Government legislation and strategy that will impact advocacy organisations and the people who use advocacy. We have contributions on the Tribunals (Scotland) Bill which was introduced to the Scottish Parliament in May this year, Children in Scotland give their view of the Children and Young People Bill currently making its way through the Scottish Parliament and the Scottish Government's recently launched learning disability strategy, The Keys to Life, is welcomed by the Scottish Consortium for Learning Disability. Learn more about joint working as proposed by the Public Bodies (Joint Working) (Scotland) Bill and the new tool developed by Self Directed Support Scotland to help individuals identify supports and services. Finally we welcome the news from EARS Advocacy of the development of a new dedicated independent advocacy service for stroke survivors.

Muriel Mowat, Guest Editor

Next issue:

Please contact enquiry@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.

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SIAA News

SIAA is growing

By the time you read this we hope to have welcomed several new staff members to the SIAA team and we expect that the next few months will be an exciting and challenging time. Those of you who subscribe to our e-bulletin may have noticed posts advertised in late Spring, early Summer of this year. These were as a result of funding for three new projects and also a restructuring of the SIAA. Following the restructuring the former Research & Quality Officer, Muriel Mowat, has been appointed as Operations Manager.

Quality Assurance Project

After a long period of planning and consultation the pilot Quality Assurance Project is underway. The pilot will last for 20 months and by the end of that period will have conducted evaluations of advocacy practice in several advocacy organisations. A number of advocacy organisations have already expressed interest in taking part and progress of the pilot will be monitored.

Self-directed Support

Following the enactment of the Social Care (Self-directed Support) (Scotland) Act 2013 the SIAA was asked by the Scottish Government to develop a project to support building capacity of advocacy organisations in work around SDS. The work of this project will be taken forward over the coming months.

Families at Risk

We were successful in a bid to the Scottish Government Third Sector Early Interventions

Fund (managed by the BIG Fund) to develop a project to support advocacy organisations working with vulnerable parents, particularly in relation to child protection issues. The Families at Risk project aims to support advocacy organisations to be better equipped in this work.



We are moving!

With all the new bodies about to arrive we are now looking for new premises. This is not simply to accommodate new team members but also to ensure that the office is fully accessible to all. We will be notifying everyone of our new address when we move so look out for that in the coming weeks.



Tribunal Reform in Scotland

Delina Cowell, Scottish Government Justice Directorate

Delina Cowell of the Scottish Government Justice Directorate writes about proposed Tribunal Reform in Scotland

The Scottish Government's *Strategy for Justice* sets out the approach to making the justice system in Scotland fit for the 21st century. Reform of the justice system is at the heart of the Scottish Government's public service reform agenda.

The Scottish Government programme *Making Justice Work* underpins the strategy. It is two years into a four year programme and brings together a range of reforms to the structure and processes of the courts, access to justice, tribunals and administrative justice. Over the years tribunals have been created to deal with a number of issues affecting the lives of the people of Scotland. All have worked in isolation of each other with no overarching leadership, no clear system for making appointments and with varying appeal routes. The case for tribunal reform is supported by advice prepared by independent expert reports¹. As noted by Lord Philip in his 2008 report 'Options for the Future Administration and Supervision of

Tribunals in Scotland' this isolation can lead to a narrowness of outlook, duplication of effort and almost certainly means a variation in standards and performance across the tribunals landscape.

The first phase of tribunal reform was the creation of the Scottish Tribunals Service in 2010. This brought together the administrations of 5 of the devolved tribunals in Scotland. This was followed by the introduction of the Tribunals (Scotland) Bill to the Scottish Parliament on 8 May this year. The Bill aims to improve the organisation and structure of the devolved tribunal system in Scotland making it more cohesive, less complicated and more independent.

The Bill will establish a simple two-tier structure under the leadership of the Lord President — a First-tier Tribunal for first decisions and an Upper Tribunal which will primarily hear appeals. Most tribunal business will be heard within the new First-tier Tribunal. The First-tier Tribunal will be divided into chambers dealing with similar subject matter. Chambers will be led by Chamber Presidents who will be responsible

for the management of the jurisdictions within their chamber.

The Bill also introduces a new office—the President of Scottish Tribunals. This individual will be assigned by the Lord President from amongst the Senators of the College of Justice and will have the responsibility for the overall running of the new system under the direction of the Lord President.

Existing tribunals will continue to operate in the new structure with their specialist members, expert staff, specific venues, and tailored procedures. There will be a new process for appointing members, independent of Ministers and run by the Judicial Appointments Board for Scotland.

The Mental Health Tribunal for Scotland (MHTS) is likely to be one of the first tribunals to transfer in as part of the First-tier Tribunal. The Scottish Government is committed to protecting and maintaining the distinctive and valued characteristics of the MHTS. When the MHTS transfers into the new structure it will be in a chamber on its own in the first instance. We are committed to putting the patient at the centre of everything we do and the Scottish Government will continue to respect the valued provisions made in the Mental Health (Care and Treatment) Act 2003, such as the Millan Principles.

A commitment has already been made to allow certain exclusions for MHTS for example, in appeals. Decisions made in relation to certain matters concerning restricted patients will

continue to be appealed to the Court of Session as they are now. This is in recognition of these matters being about a person's liberty rather than settling a dispute between parties.

As a further step in the reform of tribunals the Scottish Government issued a consultation on 27 June on the proposed merger of the Scottish Tribunals Service and the Scottish Court Service. The consultation looks at the feasibility of merging the administrations under the leadership of the Lord President. The joint administration would be independent of Ministers and would provide support for both courts and tribunals led by a corporate body, chaired by the Lord President. This would support the long-term independence of tribunals by putting their administration on the same footing as courts. The consultation also asks for views on how best to preserve the unique character of both tribunals and courts in a joint organisation. The Scottish Government would welcome your views. You can find the consultation at www.scotland.gov.uk/Publications/2013/06/2764.

The Scottish Government believes that these reforms will create a more professional structure, independent from the Scottish Government and will enable the sharing of good practice across tribunals. It will also provide a platform to build on existing practice such as that already developed by the MHTS and the Scottish Government will ensure that this good work continues and improves in the new structure.

¹ The Franks Report (1957), the Leggatt Report (2001), and the Philip Reports (2008 and 2009)

A view on the Tribunals (Scotland) Bill

May Dunsmuir, Convener with the Mental Health Tribunal for Scotland

May Dunsmuir is a Convener with the Mental Health Tribunal for Scotland. She is also Vice Convener of the Law Society's Mental Health and Disability sub-committee. May's personal views on the Bill are set out below.

The Mental Health (Care and Treatment) (Scotland) Act 2003 (the 2003 Act) established a new judicial body to be known as the Mental Health Tribunal for Scotland¹ (the Tribunal), replacing the Sheriff Court as the forum for deciding applications in relation to the detention of patients and appeals against detention. This followed from the recommendation² of the Millan Committee in January 2001, which had completed a review of the former *Mental Health (Scotland) Act 1984*. Prior to this there had been no fundamental review of mental health law in Scotland for more than 40 years.

The Tribunal has the power to make or to prevent significant interventions in patients' lives. The Tribunal makes compulsory treatment orders, hears appeals by patients and their named persons and conducts statutory reviews of the patient's order. With such an extensive range of powers over vulnerable patients' lives it is essential that the Tribunal retain its existing highly specialised competence.

It is against this backdrop that I welcome many of the Bill's proposals, recognising the advantages of a Scottish Tribunals structure, which will provide for a common system of leadership and member appointment and consistency in practice and procedure. However, I do not agree with all of the Bill's provisions. In particular, I consider that the Tribunal's specialism can only be preserved

by placing the Tribunal within a single chamber (a Mental Health Chamber) in the First-tier Tribunal and making explicit provision for this in primary legislation. The Bill³ would confer a power on the Scottish Ministers, by regulations, to make provision for the organisation of the First-tier Tribunal into chambers. These regulations will be subject to the affirmative parliamentary procedure, which requires the approval of Parliament to allow the provisions to come into force or to remain in force.

I acknowledge the Scottish Government's initial commitment (in the Policy Memorandum to the Bill) to the maintenance of a specialised Tribunal. However, the chamber structures go to the very essence of the Bill. It should not be possible for Scottish Ministers to alter the organisation and functions of the First-tier chambers by secondary legislation. The Tribunal's place within the proposed chamber structure ought to be enshrined in primary legislation, which could only be amended by a further Act of the Scottish Parliament. This would ensure full parliamentary and democratic scrutiny of any change to the Tribunal's status.

The Tribunal plays a vital role in ensuring that an individual's rights to liberty, freedom from inhuman or degrading treatment and autonomy⁴ are protected. This role could be compromised if the Tribunal's current expertise and functions were to become diluted through the process of being placed in a multi jurisdiction chamber now — or in the future.

This is too important for secondary legislation.

New Directions — Report on the Review of the Mental Health (Scotland) Act 1984

Recommendation 9.10

The forum for mental health hearings should be a new mental health tribunal.

Recommendation 9.11

There should be a national structure for mental health tribunals, with a senior member of the judiciary at its head.

European Convention on Human Rights

Article 3 prohibits ‘inhuman or degrading treatment or punishment’

Article 5 provides that ‘everyone has the right to liberty and security of person’

UN Convention of the Rights of Persons with Disabilities

Article 14

Liberty and security of the person

1. States Parties shall ensure that persons with disabilities, on an equal basis with others:

- a. Enjoy the right to liberty and security of person;*
- b. Are not deprived of their liberty unlawfully or arbitrarily, and that any deprivation of liberty is in conformity with the law, and that the existence of a disability shall in no case justify a deprivation of liberty.*

Article 15

Freedom from torture or cruel, inhuman or degrading treatment or punishment

1. No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.

¹ Section 21

² New Directions — Report on the Review of the Mental Health (Scotland) Act 1984; Recommendation 9.10

³ Section 19(2)

⁴ Articles 5 and 3 European Convention on Human Rights and corresponding rights in the UN Convention on the Rights of Persons with Disabilities

Making children's rights real

Ross Gilligan, Policy Officer, Children in Scotland

They said...

The Children and Young People Bill currently making its way through the Scottish Parliament has been hailed as many things. To some, it is a game-changing piece of legislation which will help realise the Scottish Government's stated ambition of making Scotland 'the best place to grow up' through provisions for working families, vulnerable youngsters and children in care. To others, the legal provisions in the Bill, around children's rights for example, fall well short of these aspirations.

The Bill originally started life as proposals for two separate pieces of legislation — one on children's rights and another on children's services. When the amalgamated proposals were unveiled in April it was the Bill's promise of extending state funded early learning and childcare for three and four-year olds, along with arguments over its delayed implementation, how it will work in practice and whether it allows for enough flexibility, which captured headlines. However, an area where the Bill could have been transformative — in entrenching in law children's rights — has to a large extent been squeezed out of the current debate.

The policy intentions of the Bill and the Scottish Government's stated commitment to 'make rights real', demonstrated by proposals to place a duty on Scottish Ministers to promote public awareness and understanding of the rights of children, and the extension of the powers of Scotland's Commissioner for Children and Young People (SCCYP) to include investigations relating to individual children and young people, are warmly welcomed.

However in 2011, the Scottish Government also made a commitment to give the United Nations Convention on the Rights of the Child (UNCRC) a statutory basis in Scots law by placing a legal duty on Ministers to give 'due regard' to the UNCRC in all their decisions — a duty which was subsequently watered down in the Bill consultation document. Despite responses from a wide range of NGOs, academics and public bodies calling for a stronger duty, the published Bill merely requires Ministers to 'keep under consideration' these matters and to act 'if they consider it appropriate to do so'. This is ambiguous at best, difficult to implement and could make little meaningful difference in practice.

The UN Committee on the Rights of the Child has twice called for the UK to fully incorporate the rights, principles and provisions of the UNCRC into domestic law. As a devolved area there is no constitutional impediment preventing the Scottish Government from doing this for Scotland. Working closely with colleagues in Together — the Scottish Alliance for Children's Rights, Children in Scotland will be making the case for the Scottish Government to match its commitment to 'making rights real' by at least taking the steps it previously proposed and setting a new benchmark for children's rights in the UK by implementing the UN Committee's recommendation in full. Not to do so through this Bill, we believe, would represent a huge missed opportunity.

Children in Scotland is the national agency for voluntary, statutory and professional organisations and individuals working with children and their families in Scotland.

SIAA responds

“Children’s views must be considered and taken into account in all matters affecting them.”

Article 12 of the UN Convention on the Rights of the Child



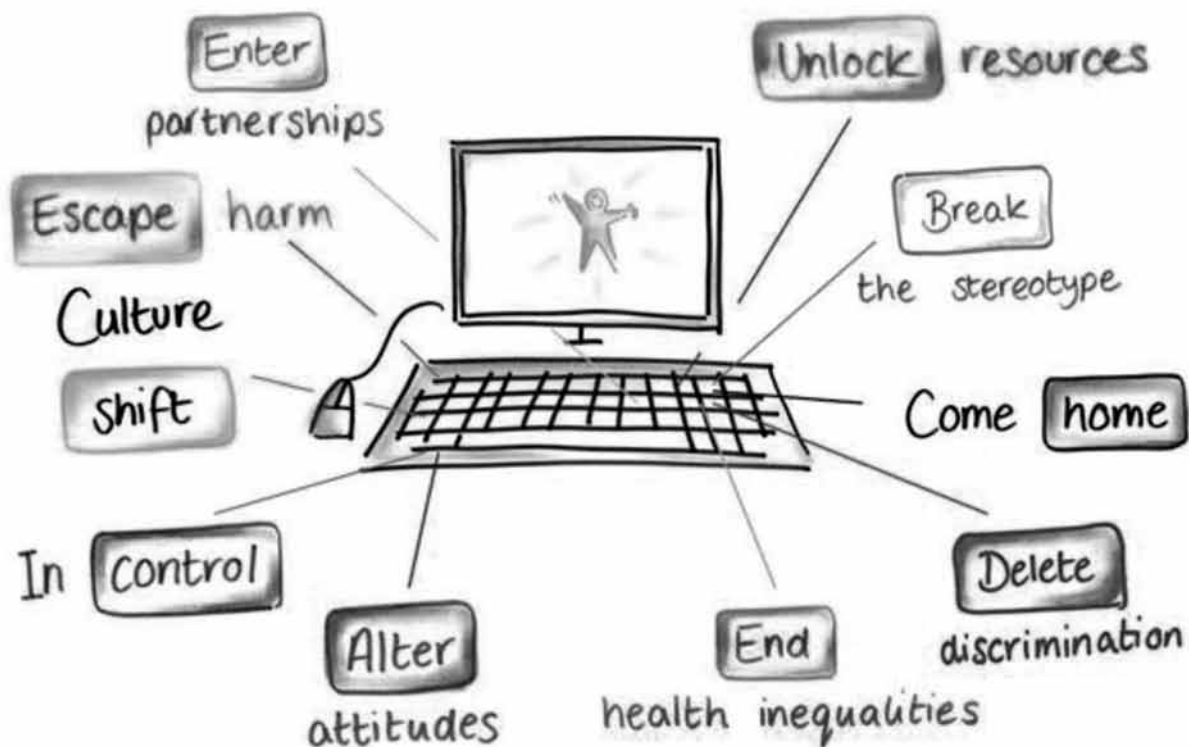
The value of advocacy has been recognised for many years, playing a major role in helping people have their voices heard and ensuring access to appropriate help and support. Independent advocacy supports people to gain access to information and to explore options and consider possible outcomes. Most importantly it helps ensure views, opinions and wishes are listened to and taken into account when decisions are made about their lives. Advocates may also speak on behalf of people who are unable to speak for themselves or who choose not to do so, they safeguard people who are vulnerable or discriminated against.

The Scottish Government has acknowledged that independent advocacy is vital in effectively supporting people to have their views heard and taken into account. Throughout history some children’s voices have not been heard and their wishes have not been considered. Much has and is being done in Scotland and elsewhere to redress this imbalance of power—in Scotland, access to independent advocacy is enshrined in

legislation for children with particular challenges, such as mental health disorders or a learning disability. Independent advocacy aims to ensure that the child is at the centre of decision making, and Government policy in relation to children and young people recognises the importance of access to independent advocacy, demonstrated by ‘putting the child at the centre’, and ‘supporting informed choice’ as outlined in the Getting It Right For Every Child (GIRFEC) framework.

Despite this the Children and Young People Bill does not include any mention of independent advocacy.

The SIAA believes that the inclusion of a right of access to independent advocacy in the Bill will be a vital factor in making children’s rights real, in ensuring the wellbeing of vulnerable children and young people and that, in Scotland, we meet Article 12 of the UNCRC, and in contributing to the culture change that GIRFEC requires.



The Keys to Life

Chris Creegan, Chief Executive of the Scottish Consortium for Learning Disability

Chris Creegan, Chief Executive of the Scottish Consortium for Learning Disability discusses the new Scottish Government learning disability strategy.

I joined the Scottish Consortium for Learning Disability (SCLD) as chief executive in June. In my first week, the Scottish Government published *The Keys to Life*, Scotland's new learning disability strategy. It was a timely moment to arrive because SCLD was borne out of *The Keys to Life*'s predecessor, *The Same as You?*, published in 2000.

Much has changed since 2000 for people with learning disabilities in Scotland. As the Ministerial foreword to the new strategy points out, people with learning disabilities feel that they are now more accepted and valued in their communities. We've seen a fresh focus on their human rights — enabling them to live and work independently wherever possible. For me this moment feels like the end of the beginning. *The Same as*

You? represented a start and the important progress that's been made has paved the way for change. Crucially we've seen the closure of long stay hospitals. But we're responding to decades of inequality, institutionalisation and low expectations.

The Keys to Life represents a new chapter. It's an exciting and significant moment; an opportunity for everyone connected with learning disability in Scotland to reflect on how we move forward and deliver the quality of life ambition at the heart of the strategy. In my first few weeks at SCLD I've been struck by the thirst for progress amongst people with learning disabilities and those working with them.

One of the things that has happened as a result of *The Same as You?* is that people with learning disabilities have increasingly made their voices heard. They have demanded that right. We have



scottish
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for learning
disability

Building respect in the
Scottish community

created an expectation that real and lasting change will be delivered. With the launch of *The Keys to Life*, we all have a responsibility to meet that expectation head on.

There is, fittingly, a very strong emphasis on partnership in *The Keys to Life*. And I'm delighted that one of its recommendations is about advocacy. SCLD will be working alongside SIAA and PAMIS with the Scottish Government to develop an action plan to improve the efficacy of independent advocacy at local level.

In a previous role I was involved in research for the Scottish Government on advocacy and participation in the Children's Hearings system. So I need no persuading about the central value of advocacy to people's lives when they are accessing services and seeking to get their voices heard. And I know that for people with learning disabilities, as for children and young people, advocacy is not a one size fits all thing. It's a skilled and person centred approach to providing support and it comes in different forms.

At the new strategy's core is an emphasis on health inequalities and outcomes. The stress on health is, as Michael Matheson, Minister for Public Health, reminds us, not a return to an old fashioned medical model. Rather it's a recognition that for all the progress we've started to make, we cannot ignore the stark reality that people with learning disabilities die younger — 20 years younger. As the Minister pointed out at the launch, changing that unacceptable fact isn't just about specialist care — it has to be about the core business of the NHS in Scotland. In that sense, and many others,

making *The Keys to Life* real will involve many who don't currently see themselves as part of the learning disability world.

And there's another sense in which implementing the strategy must look at health beyond a narrow medical model to the social factors which underpin health inequalities. The critical importance of tackling health inequalities is fundamental to the new strategy because we all know that health is one of the keys to a meaningful and long lasting life. That's no less true for people with learning disabilities. But improving health outcomes isn't just about access to services. It's a public health issue too and like everyone else, people with learning difficulties need to be able to make informed choices.

Health equality matters because it's so fundamental to other aspects of *The Keys to Life* — housing, employment and relationships to name just three. Having good health can create opportunities to work; working can foster better health and well being. Advocacy has a powerful role to play in enabling people with learning disabilities to access services, take control of their lives and realise those opportunities. It has the potential to make a tangible difference to improving outcomes.

The Keys to Life is a big moment. But as one of the people with learning disabilities tellingly said at the launch, strategies alone don't change the world. It's implementing strategies that makes the difference. At SCLD we're excited by the opportunity created by *The Keys to Life* to work in partnership with others like SIAA to drive lasting change.

Joint working putting people at the centre

Andrew Strong, Policy and Information Officer. Health and Social Care Alliance Scotland

The Health and Social Care Alliance Scotland (the ALLIANCE) is the national third sector intermediary for a range of health and social care organisations.

Encouraging joint working between health and social care professionals has been the subject of a number of policy initiatives since the formation of the Scottish Parliament in 1999. From the Joint Working Group, the Community Care and Health (Scotland) Act 2002 and the creation of community health partnerships, each initiative has worked on the understanding that people's experiences of the health and social care system needs to be better.

Despite this many people who are disabled or live with long term conditions in Scotland still experience "disconnect" within the system. A disconnect within our health service and between health and social care services. Not to mention disconnects between formal and informal service provision and statutory and non-statutory sectors.

In May 2013, the Public Bodies (Joint Working) (Scotland) Bill took the most radical move yet, proposing to draw health and social care professionals together in new partnerships aiming to improve the experiences of people who use support and services. The Bill proposes:

- The creation of Health and Social Care Partnerships (HSCPs) in each local authority area. These will replace the Community Health Partnerships and Community Health and Care Partnerships which currently operate across Scotland. The Bill provides four different models that partnerships can adopt to achieve this.

"A human rights based approach has the power to not only protect basic dignity and quality of life, but also to act as a practical driver of change and improvement."

- An integration plan written by each Partnership on how it intends to plan and deliver integrated services. This will detail the delegated functions and budget calculations
- Principles on which the HSCPs will make decisions about their integrated functions
- A framework of new health and social care outcomes will be developed and reported upon. The Scottish Government will carry out a further consultation process on the detail of these outcomes over the summer of 2013.

The aspiration of the bill is not simply to improve how health boards and local authorities work together; it is to significantly improve the lives of people in Scotland, bring about new ways of making decisions about how we invest our public money and design services with and for people and communities.

Third sector organisations have welcomed this intention. Many in the sector have long campaigned for integrated, effective support that enables people to access their right to

independent living. After all, this means everyone having the same freedom, choice, dignity and control, being able to participate in society and live a fulfilled life.

Yet the question remains whether the Bill goes far enough to achieve the long lasting, transformational change to public services as recommended by the Christie Commission's report on the future of public services in 2011.

At the ALLIANCE our initial reaction to the legislation is that it requires further strengthening in order to achieve such a dramatic change. Whilst we welcome the inclusion of principles on the face of the Bill, these should have an explicit basis in human rights. A human rights based approach has the power to not only protect basic dignity and quality of life, but also to act as a practical driver of change and improvement—as has been demonstrated through Scotland's National Dementia Strategy (2010).

The role of the third sector should be a key partner in this agenda, yet this is not reflected strongly enough in the Bill. A major concern to date has been over a lack of voting rights, both for the sector and for people who use support and services, on integration committees. There is, however, a wider issue about engagement with the sector, and we are concerned that the Bill as it stands does not sufficiently reflect wider Scottish Government policy on strengthening engagement between the statutory and third sectors and co-production between those designing and providing support and services and people using support and services.

ALLIANCE Chief Executive Ian Welsh says

"We must make sure the focus of the bill remains on the realities for people, families and communities and that their voices are the driving voice for change. We need to support people to enjoy high quality independent lives and drive lasting sustainable transformation in the design and delivery of our support and service landscape."

Over the coming months the ALLIANCE will be working with our members and partners, as well as politicians and the Scottish Parliament's Health and Sport Committee, to influence the Bill as it progresses through the Parliamentary process.

Beyond that we will also be working hard to support local partnerships to place the fundamental principles of human rights, person-centred approaches and co-production at the heart of their integration activities, even when the temptation may be to focus on the complexities of structures, budgets and processes.

For more information on the Health and Social Care Alliance Scotland (the ALLIANCE) or the Public Bodies (Joint Working) (Scotland) Bill visit www.alliance-scotland.org.uk

New national SDS interactive tool

Jess Wade, Manager, SDSS

A self-directed support (SDS) information and support database has recently been launched by Self Directed Support Scotland (SDSS). This fully accessible online tool will allow individuals to search the available support and find information providers to answer their queries around SDS throughout Scotland. This, in turn, will enable individuals to have more choice and control over their own care.

SDS aims to provide individuals with freedom, choice, dignity and control. It is key to achieving a Scotland where disabled people live independently and with the right support. SDS is when you arrange some or all of your (or your child's) support instead of receiving services arranged by your local authority. It is for people who would like more flexibility, choice and control over their care so they can live more independently.

The website is a vital tool for anyone to use to get the information and support they need to navigate self-directed support (SDS) any time in their lives, whether they are disabled people, people with long term conditions, older people, carers or professionals. SDSS would really encourage people to use the fully accessible website (www.sdsinfo.org.uk) as one of their first points of call in their SDS journey so they are able to get the right information and support to achieve independent living.

The website was developed based on the research findings of a report which maps self-directed support information and support services in Scotland. This project identifies the gaps and maps organisations that currently

provide information and support around SDS, direct payments, individual service funds and related areas. The findings were that the greatest concentration of information and support providers were in the Glasgow and Edinburgh council areas and accounted for 44%, with significantly fewer agencies located in Scotland's other cities and towns. This may lead to a gap in supply and demand if information requirements around SDS grow in areas outside of Scotland's two major cities.

Jess Wade, Manager of SDSS, said *"In terms of gaps, the report highlights the relatively low number of user-led organisations working in this area, and that fewer organisations are operating outwith Edinburgh and Glasgow"*.

The research showed a good provision of general information on SDS from the organisations that took part, specifically in regards to helping service users setting up a SDS package. 80% of this information is provided in either telephone advice, appointments, home visiting or practical hands on support, with 20% provided in alternative formats such as leaflets or web based communications. However, information and advice on funding for SDS and clarifying to service users how to spend their individual budgets was limited, as was support on managing personal assistants and direct payments.

"This highlights the continued need for capacity building, particularly of user-led and

*Disabled People's Organisations,
to ensure everyone can access
quality SDS information and
support, including peer support,
wherever they are in Scotland."*

— Florence Garabedian, Chair of SDSS

The research shows that though some information and advice is available across all areas relating to SDS, the extent to which this information is available is not extensive. Only 60% of organisations are providing general information on SDS and the percentage is much lower for specific elements of information and advice regarding SDS. The conclusion of the research is that further investment is needed to enhance the number of organisations that can provide a full information and advice service around SDS.

Self Directed Support Scotland (SDSS) is a national membership organisation which actively promotes Independent Living by supporting, working with and championing the aims of Self Directed Support disabled people's organisations. SDSS develop resources, material and training for member organisations and regularly deliver presentations which show that the social model is at the heart of self-directed support and independent living. We also work with local authorities, voluntary sector organisations, NHS health boards, universities and colleges to influence and guide the implementation of the Social Model within their own policies and programmes.

The SDS options are:

Option 1 — direct payment (this is when you are given a sum of money and direct what you want to do with it as long as it meets your assessment outcomes)

Option 2 — the person directs the available support (this is when you choose the support you want and the local authority or another agency will put it into place for you)

Option 3 — the local authority arranges the support

Option 4 — a mix of the above

For more information regarding the different options, you can visit SDSS' website to access our information sheets: www.sdsscotland.org.uk/resources/reports.php

For further information regarding SDS please visit www.sdsscotland.org.uk or contact 0131 516 4195.

To search the SDS information and support database, visit: www.sdsinfo.org.uk

New, A Dedicated Independent Advocacy Service For Stroke Survivors



Will Massaro Mallinson

Will Massaro Mallinson, Manager, EARS Advocacy. EARS has delivered independent advocacy for older people in Lothian for over 13 years. EARS now also works with people with physical disabilities in West, East and Mid Lothian.

EARS Advocacy Service has received funding from NHS Lothian to provide the first dedicated independent advocacy service to Stroke Survivors, of any age, living in Edinburgh and the Lothians.

Advocacy for people who have survived Stroke has been a recognised gap in advocacy provision for some time. The Stroke Association, in partnership with the Scottish Independent Advocacy Alliance, supported a pilot project with 4 independent advocacy organisations across Scotland delivering specialist advocacy support. One outcome from this work was the production of the Advocacy & Stroke Training Pack. Some of the work developed through this pilot continued. However most of those affected by stroke in most areas of Scotland access independent advocacy because they fit criteria required by Service Level Agreements for local independent advocacy provision; they are over 65, have a physical disability or have a mental disorder as defined by the Mental Health (Care & Treatment) (Scotland) Act 2003.

Stroke, for many people, can mean an immediate disruption and change in their lives, lifestyle, career, finances and relationships and may affect them physically, emotionally and mentally. Partners, friends and/or existing support networks (if any) can also be seriously affected and the strain of giving additional support could result in the breakdown of relationships and networks. In many cases partners

and families will take up the challenge and find themselves advocating for the Stroke Survivor.

However, often the stresses and strains of providing care or the emotions involved mean that it will be much more appropriate for advocacy to come from elsewhere. This is when independent advocacy becomes important, because it is simply there to support, to 'stand alongside' the person who has had the Stroke. Independent advocacy is truly 'independent' and has no other allegiances, agendas or conflicts of interest.

This new service will run, initially, for two years. EARS plans to start the service in the Lothian and Edinburgh Acute Stroke Units and Rehab Stroke Units and later, in the community, as the referrals increase and people move from hospital to home. This is an exciting opportunity for EARS and it looks forward to providing this new and innovative service.



Stroke Training Pack
Independent advocacy for
people affected by stroke

The Stroke Training Pack. Independent Advocacy for people affected by stroke is available on the SIAA website
www.siaa.org.uk/content/view/218/