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Dear SIAA member,

As you will be aware, the Advocacy Map is a useful resource to help track the annual spend on advocacy across Scotland. We are now gathering information which covers the period **1 April 2020 to 31 March 2022.**

We will use your information to lobby and campaign for:

* + - * Increased funding for independent advocacy
      * Increased access to independent advocacy
      * Better strategic planning

Following the creation of advocacy duties for the Mental Welfare Commission through the Mental Health Act (2015) we will also be providing the information gathered to the Mental Welfare Commission. This will be included within their report on The Right to Advocacy which will be published early 2023.

The survey has five sections:

1. [About you and your organisation](#_Section_1:_About) you and your organisation
2. [Monitoring information](#_2._Monitoring_&)
3. [Funding from local authorities, NHS boards & Integration Joint Boards (IJBs)](#_3._Statutory_funding)
4. [Grant funding from other sources](#_4._Grant_funding)
5. [Understanding need and promoting advocacy your local area](#_5._Understanding_need)

Please complete this survey and return by email to [enquiry@siaa.org.uk](mailto:enquiry@siaa.org.uk) by **Wednesday, 21 September 2022.**

We encourage members to participate as this information is essential to understanding the current situation of advocacy provision across Scotland.

Thank you for your time and assistance. If you have any questions, please contact us at [enquiry@siaa.org.uk](mailto:enquiry@siaa.org.uk)

**Section 1: About you and your organisation**

**1a) Your contact details**

**Q1. What is your name?**

|  |
| --- |
|  |

**Q2. What is your job title?**

|  |
| --- |
|  |

**Q3. What is your email address? (In case we need to clarify your survey information)**

|  |
| --- |
|  |

**Q4. What is your telephone number? (In case we need to clarify your survey information)**

|  |
| --- |
|  |

**Q5. Which organisation do you represent?**

|  |
| --- |
|  |

**Q6. What is your organisation's address?**

|  |
| --- |
|  |

## 1b) Your areas of work

**Q7. What types of advocacy does your organisation provide? (Select as many as apply)**

|  |  |
| --- | --- |
| One to one advocacy (involving volunteers or paid staff) |  |
| Collective or group advocacy |  |
| Peer advocacy |  |
| Self-advocacy |  |
| Citizen advocacy |  |

**Q8. In which local authority areas do you provide advocacy?**

|  |  |  |  |
| --- | --- | --- | --- |
| Aberdeen City |  | Highland |  |
| Aberdeenshire |  | Inverclyde |  |
| Angus |  | Midlothian |  |
| Argyll & Bute |  | Moray |  |
| Borders |  | North Ayrshire |  |
| Clackmannanshire |  | North Lanarkshire |  |
| Dumfries & Galloway |  | Orkney |  |
| Dundee City |  | Perth & Kinross |  |
| East Ayrshire |  | Renfrewshire |  |
| East Dunbarton |  | Shetland |  |
| East Lothian |  | South Ayrshire |  |
| East Renfrewshire |  | South Lanarkshire |  |
| Edinburgh |  | Stirling |  |
| Falkirk |  | West Dunbarton |  |
| Fife |  | West Lothian |  |
| Glasgow |  | Western Isles |  |

## 1c) Your team c) Your team

**Q9. How many of the following paid staff do you have?**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Total** | **Paid advocates** | **Collective advocacy development workers** |
| Full time staff |  |  |  |
| Part time staff |  |  |  |

**Q10. How many of the following volunteers do you have?**

|  |  |
| --- | --- |
| Active volunteer advocates |  |
| Active citizen advocates |  |
| Volunteers on management committee or board |  |
| Service user representatives on management committee or board |  |
| Others (please specify) |  |

## If you don't have any service user representatives on your management committee or board, how do they influence and/or they involved in the work of your organisation?

|  |
| --- |
|  |

## 1d) Your client groups

**Q11. What is/are the client group(s) or access criteria for your organisation? (Select as many as apply)**

|  |  |
| --- | --- |
| Adult - mental health |  |
| Adult - dementia / frail older people |  |
| Adult - learning disability |  |
| Adult - at risk of harm, the protection of |  |
| Adult - NHS patients |  |
| Adult - Prisoners (mental health) |  |
| Child/young person req. Additional Support for Learning |  |
| Child/young person - Mental Health (Care & Treatment) (Scotland) Act |  |
| Other: |  |

**Q12. Does your organisation have a target age group? (Select as many as apply)**

|  |  |
| --- | --- |
| Up to 16 years |  |
| Up to 18 years |  |
| 16 + |  |
| 18 + |  |
| 16 - 65 |  |
| 18 - 65 |  |
| 65 + |  |

# Section 2: Monitoring & service usage information

## 2a) Service referrals and usage

**Q13. How many people accessed advocacy during the 1 April 2020 to 31 March?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **One to one advocacy** | **Collective or group advocacy** | **Peer advocacy** | **Self-advocacy** | **Citizen advocacy** |
| **TOTAL** |  |  |  |  |  |

**Q14. How many referrals did you receive during this period?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **One to one advocacy** | **Collective or group advocacy** | **Peer advocacy** | **Self-advocacy** | **Citizen advocacy** |
| **TOTAL** |  |  |  |  |  |
| From the NHS |  |  |  |  |  |
| From a local authority |  |  |  |  |  |
| From another service provider |  |  |  |  |  |
| From Patient Advice & Support (PASS) |  |  |  |  |  |
| Self-referrals |  |  |  |  |  |
| Word of mouth |  |  |  |  |  |
| Other (please specify): |  |  |  |  |  |

**Q15. In relation to the Adult Support & Protection Act, between 1 April 2020 to 31 March 2022:**

|  |  |  |
| --- | --- | --- |
|  | **Number of referrals** | **Number accessing advocacy** |
| Adult Support & Protection cases |  |  |

**2b) Service monitoring**

**Q16. How do you collect information about the outcomes and change that you help people to achieve??**

|  |
| --- |
|  |

**Q17. What information do you record, and how do you use the information**

|  |
| --- |
|  |

how do you use the information?

**Q18. Do you record this information primarily for:**

|  |  |
| --- | --- |
| your funders |  |
| your organisation's use |  |
| both |  |

**Q19. Do you collect information about the following protected characteristics of people who use your services?**

|  |  |
| --- | --- |
| Age |  |
| Gender |  |
| Disability |  |
| People with long term conditions |  |
| Race |  |
| Sexuality |  |
| Other (please specify): |  |

**Q20. How do you use this information on the protected characteristics of those using your services? How do you this information on the protected**

|  |
| --- |
|  |

**Q21. Do you record this information on protected characteristics primarily for:**

|  |  |
| --- | --- |
| Your funders |  |
| Your organisation's use |  |
| Both |  |

**Q22. We're particularly interested in the provision of advocacy for groups that faced particular barriers. Do you collect information on, and provide services specifically for, people from the following groups?**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Do you collect information regarding this group?** | **Number supported in 2020/22** | **Do you have a collective advocacy group for this group?** |
| People from black & minority ethnic communities |  |  |  |
| People from gypsy traveller communities |  |  |  |
| People who identify as LGBTI |  |  |  |
| People with disabilities (incl. sensory impairments) |  |  |  |
| People with long term conditions |  |  |  |

# Section 3: Statutory funding from local authorities, NHS Boards and Independent Joint Boards (IJBs)

**Q23. What funding did you record as receiving in the period of 1 April 2020 to 31 March 2022, what was its purpose, who provided it, and for how long will it last?**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sum (£)** | **Purpose** | **Access criteria** | **Local authority funder** | **NHS board funder** | **IJB funder** | **Length of Funding: date from - to** | **Will it continue?** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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**Q24. Have you seen an overall funding increase or decrease from local authorities/NHS/IJB since we last surveyed 2017/18?**

|  |  |
| --- | --- |
| Increase |  |
| Decrease |  |
| Stayed the same |  |

**Q25. How has this affected your organisation?**

|  |
| --- |
|  |

**Q26. Did any of your funding pay for work in relation to:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Funding received (£)** | **Length of funding** | **Purpose** |
| Adult Support & Protection |  |  |  |
| Patients’ Rights Act |  |  |  |
| Advocacy in prisons |  |  |  |

**Q27. Does your Service Level Agreement require you to prioritise certain groups, such as people subject to compulsory measures?**

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**Q28. If it does, what impact has this prioritisation had on other aspects of your organisation? For those prioritised how long would they have to wait following referral before receiving advocacy?**

(Please note, we will not be attributing any of this information to specific organisations. We will use it to gather an overall picture of what is happening within the advocacy movement).

|  |
| --- |
|  |

# Section 4: Grant funding from other sources

**Q29. How many applications for grant, trust or foundation funding (i.e. not from a local authority, NHS or IJB) did you make between 1 April 2020 to 31 March 2022?**

|  |
| --- |
|  |

**How many were successful?**

|  |
| --- |
|  |

**Q30. How much grant, trust or foundation funding did you use to fund activities between 1 April 2020 to 31 March 2022:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sum (£)** | **Purpose** | **Access criteria** | **Local authority funder** | **NHS board funder** | **IJB funder** | **Length of Funding: date from - to** | **Will it continue?** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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# Section 5: Understanding need and promoting advocacy your local area

**Q31. Have you identified any need for advocacy arising from people approaching your organisation who were not included within your access criteria?**

|  |
| --- |
|  |

**Q32. Have you identified any other lack of advocacy provision in your area?**

|  |
| --- |
|  |

**you**

**Q33 Have you been involved / consulted with in the development of your Local Authority/Health Board/HSCPs Advocacy Strategy / Plan?**

|  |
| --- |
|  |

**Q34. Does your organisation have any involvement in your local:**

|  |  |
| --- | --- |
| Development of your Local Authority Advocacy Strategy/Plan |  |
| Adult Protection Committee |  |
| Child Protection Committee |  |
| Integrated Joint Board |  |
| Third Sector Interface (TSI) |  |
| Other (please specify): |  |

**Q35. Have you undertaken any awareness raising or publicity activities in relation to advocacy?**

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**Q36. What type of activities have you undertaken – or if you haven’t undertaken any, is there a reason for this?**

|  |
| --- |
|  |

**Q37. Is there any other information you would like to provide?**

|  |
| --- |
|  |

Thank you for taking the time to complete this survey.

We'll send you a copy of your answers for your own records after the survey closes and a copy of the Advocacy Map when it is produced. If you have any queries, please get in touch via [enquiry@siaa.org.uk](mailto:enquiry@siaa.org.uk) or 0131 510 9410.