## EAST AYRSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP

## **INTEGRATION JOINT BOARD: 1 NOVEMBER 2018**

## THE RIGHT TO ADVOCACY & STRATEGIC ADVOCACY PLANNING IN EAST AYRSHIRE

# Report by Senior Manager Planning and Performance

## **PURPOSE**

1. To present to the Integration Joint Board 'The Right to Advocacy' report published by the Mental Welfare Commission for Scotland and to present the strategic planning activity in relation to independent advocacy, being carried out in East Ayrshire.

#### **BACKGROUND**

- 2. The Mental Welfare Commission published its report: 'The Right to Advocacy' in March 2018, reviewing how local authorities and health boards are discharging their legal responsibilities in relation to provision of independent advocacy.
- 3. The Mental Health (Care and Treatment) (Scotland) Act 2003 imposes a duty on local authorities and health boards to collaborate to ensure the availability of independent advocacy in their area. The Act gave everyone with a mental illness, learning disability, dementia and related conditions the right to access independent advocacy.
- **4.** The Mental Health (Scotland) Act 2015 builds on the 2003 Act rights, by requiring health boards and local authorities to share with the Mental Welfare Commission how they ensure access to independent advocacy and plan for future access.
- **5.** The Right to Advocacy report ('the Report') also covers provision of independent advocacy for children and young people in local integrated children's services plans.
- 6. The Report is based on information provided by local authorities, health boards and Health and Social Care Partnerships in 2017. East Ayrshire Health and Social Care Partnership ('the Partnership') responded to this consultation alongside 28 other areas in respect of independent advocacy for adults and 30 local authority areas in respect of children and young people.

# THE RIGHT TO ADVOCACY: RECOMMENDATIONS & EAST AYRSHIRE STRATEGIC PLANNING FOR INDEPENDENT ADVOCACY

- 7. The Report states that, given the role and remit of Integration Joint Boards ('IJB') and their responsibility for planning integrated arrangements, for strategic planning and for the delivery of services, the Commission's expectation is for its recommendations to be discussed by individual IJBs.
- **8.** The relevant recommendations are shown below, followed by the corresponding position for East Ayrshire:
  - 1. Ensure that there is clarity about which organisation will be responsible for the coordination and preparation of strategic advocacy plans for their area;
    - **1.1.** The Health and Social Care Partnership is responsible for strategic planning for independent advocacy.

- 2. Ensure that strategic advocacy plans are in place by December 2018;
  - **2.1.** The East Ayrshire Independent Advocacy Strategic Plan 2019-22 ('the Advocacy Plan') is in development and the working final version will be presented to the December meeting of the IJB, for approval.
- 3. Ensure that strategic plans are developed based on a local needs assessment and information about unmet need and gaps in local provision. They should be developed in partnership with people who use or may use services, and with service providers. Barriers people may be experiencing accessing advocacy support, including barriers created by prioritisation criteria and people being placed out-with their home areas, should be addressed in plans.
  - **3.1.** The Advocacy Plan has been developed through a Steering Group, comprising representatives of advocacy service providers, carers, third sector and intendent sector and through engagement with the full range of stakeholders. The Strategic Planning/Wellbeing Delivery Group will be engaged in the capacity of Advocacy Planning Group as part of the development activity.
  - **3.2.** The matters highlighted are addressed in the Advocacy Plan.
- **4.** Ensure that advocacy planners carry out equalities impact assessments and develop approaches to monitoring and enabling access to advocacy which cover all the protected characteristics.
  - **4.1.** Engagement to develop the Advocacy Plan captures baseline equalities considerations to enable access to advocacy for protected characteristics.
- **5.** And, specifically in relation to services for children and young people:
  - **5.1.** Ensure there is clarity about where the responsibility lies for planning and commissioning independent advocacy services which are accessible for all children and young people under 18 with a mental disorder, including children and young people receiving care and treatment on an informal basis, or in placements outwith their home area.
    - 5.1.1. The Health and Social Care Partnership is responsible for the planning and commissioning of independent advocacy for children and young people.
  - **5.2.** Ensure that arrangements for planning and the provision of independent advocacy services for children and young people include processes for assessing the projected need for these supports.
    - 5.2.1. The projected need for these supports is addressed in the Advocacy Plan.

## INDEPENDENT ADVOCACY STRATEGIC PLAN

**9.** Engaging with stakeholders is key to local strategic developments and hearing the voices of people who are involved in independent advocacy. Upon completion of the engagement activities, the Advocacy Plan will be developed via the Strategic Planning Group/Wellbeing Delivery Group and reported to the Integration Joint Board for approval.

#### PEOPLE WHO USE SERVICES AND CARER IMPLICATIONS

**10.** Developing and delivering a strategic Advocacy Plan contributes to improving outcomes for people who use services and carers by ensuring a strategic approach to including peoples' voices in decisions that affect them.

## **FINANCIAL IMPLICATIONS**

11. The Right to Advocacy recommends that independent advocacy is available to all children and young people under 18 who have a mental disorder. Should this be identified as a gap in current local provision, extending independent advocacy provision to fully meet this recommendation may have financial implications, which require to be understood, within recognised budget constraints.

#### **HUMAN RESOURCE IMPLICATIONS**

**12.** There are no human resource implications arising directly from the contents of the report.

#### POLICY/LEGAL IMPLICATIONS

**13.** Developing and delivering a strategic Advocacy Plan is aligned to Wellbeing and broader Community Plan priorities.

## **COMMUNITY PLANNING IMPLICATIONS**

**14.** Developing and delivering a strategic Advocacy Plan is aligned to Wellbeing and broader Community Plan priorities.

#### TRANSFORMATION IMPLICATIONS

**15.** Developing and delivering a strategic Advocacy Plan is consistent with the Council Transformation strategy; a Vibrant and Empowered East Ayrshire.

## **EQUALITY IMPLICATIONS**

**16.** Equality implications are being considered in engagement activities as described in the report.

#### **RISK IMPLICATIONS**

**17.** There are no risk implications arising directly from the content of the report.

#### RECOMMENDATIONS

- **18.** It is recommended that Members:
  - (i) Note and consider the recommendations of The Right to Advocacy report;
  - (ii) Note and consider the corresponding current position in East Ayrshire in relation to independent advocacy;
  - (iii) Note the ongoing engagement activities to develop an East Ayrshire Independent Advocacy Strategic Plan; and
  - (iv) Note that the Independent Advocacy Strategic Plan will be reported to a future meeting of the IJB, for approval.

Erik Sutherland Senior Manager, Planning and Performance 16 October 2018

## **Implementation Officer:**

Claire Kavanagh, Planning and Performance Officer, East Ayrshire Health and Social Care Partnership.