



Annual Report 2011

AdvoCard is a service user-led, independent advocacy organisation. Our services are primarily for people with experience of mental ill health in Edinburgh. We aim to provide opportunities for people to participate more effectively in decisions that affect all aspects of their lives. AdvoCard is committed to equality, inclusion and human rights.

Project Report

In 'times of change' such as these, it is reassuring to note that the quality and quantity of independent advocacy provided by AdvoCard is maintained and developed. To this end, I would draw your attention to the reports from our various service areas on the following pages.

In addition, I would like to highlight AdvoCard's continued partnership with the Royal Edinburgh Hospital Patients' Council. This 'light-touch' management arrangement has successfully supported the on-going development of the Patients' Council whilst allowing it the freedom to function as an independent collective advocacy organisation.

This collaborative approach has been further developed by AdvoCard as part of the recent advocacy tender process in Edinburgh. As well as work with the Patients' Council, AdvoCard will develop a similar management approach in order to safeguard the integrity of the independent advocacy service provided by Edinburgh Carers' Council.

Besides securing the next three years funding for the organisation, success in this tender means that AdvoCard will take on the support for community collective advocacy. We look forward to this new challenge, and to working with service users across Edinburgh in this endeavour.

Chris Mackie
Director

Convenor's Remarks

Our financial year 2010/11 ended with the creation of AdvoCard as a company limited by guarantee. We are pleased that this largely administrative change took place without any interruption to the services provided by AdvoCard. Those who attended our Extraordinary General Meeting in February will recall that this incorporation process has been driven by a desire to limit the potential financial liability of the voluntary trustees of the organisation.

The Review of Independent Advocacy carried out by City of Edinburgh Council and NHS Lothian has loomed large over every decision taken by the Management Committee (as was – now the Board of Directors). Whether we agreed or not with the outcome, the subsequent tender process was a reality that all statutory funded advocacy providers had to address.

AdvoCard's tender success has been overshadowed by the knowledge that some other organisations will lose their funding. However, we look forward to working with those that remain for the ultimate benefit of those individuals and groups who require our support.

I would like to conclude by thanking all the staff, volunteer advocacy workers and my fellow Board members for their efforts in what has been a very challenging year. I hope that with their commitment, AdvoCard will continue to flourish for many years to come.

Nick Gardner
Convenor

Learning and Development

Learning and development is one means to ensure that AdvoCard provides quality advocacy that service users can depend upon.

Training opportunities in the past year across our range of stakeholders included:

Delivering our Stage 1 training for new volunteer advocacy workers twice. This programme continues to be well received by potential volunteer advocacy workers. A current, experienced volunteer co-facilitates the sessions so that questions can be answered by someone with first-hand experience.

Sessions for our experienced volunteer advocacy workers cover specific topics that add to and develop the volunteer's skills. Opportunities have ranged from offering the Scottish Mental Health First Aid course as well as one off sessions covering topics such as "Letter-Writing", "Assertiveness" and "Mindfulness". More informal discussion has come through our new "Film-nights" complete with popcorn and hot-dogs.

Staff training focuses on ensuring that staff have the necessary level of awareness, knowledge and skills to uphold AdvoCard's policies such as Health and Safety.

Having recently become a Company Limited by Guarantee, AdvoCard's Board of Directors took part in training, with a session to clarify their duties and responsibilities under company and charity law.

Individual Advocacy at the Royal Edinburgh Hospital

The year started with the adoption of a Hospital-wide smoking ban. The anticipated demand for advocacy following this move did not materialise and, with a few exceptions, the ban has been adopted.

At the same time, significant restructures have taken place within acute wards and care of older people. This resulted in a north/south split, with consultant changes in both areas.

Generally, patients in the acute wards can be either acutely unwell, or awaiting a transition to a rehabilitation ward. It can be hard for those we work with to manage the unpredictability of the ward. For the team, being able to get a consistently expressed wish from quite vulnerable or challenging individuals proves difficult at times, until much later on in their hospital stay.

The team continue to work closely with the Patients' Council in ensuring that collective issues are passed on anonymously to them through their referral process. The feedback we receive from such referrals is then fed back to individuals.

As well as participating in the local Acute Inpatient Forum and the Safety, Privacy and Dignity meeting, the Service is also represented on the Wayfinder Action Group, looking at the future of rehabilitation services across the City of Edinburgh. We are also involved in the Mental Health Tribunal Service Professional Reference Group.

As a team, we recognise the evolution of our work, with an increase in the complexity and detail of our work and the need for advocacy to be consistently available for those people requiring our input remains strong, irrespective of a persons' age, or their location, within the REH.

REH Statistics	2009/10	2010/11
No. of service users	362	429
No. of MH Tribunals	211	175
No. of contacts	10,887	10,383



Volunteer Delivered Advocacy

This has been another interesting year, full of challenges but equally full of interest and positive outcomes. During the year we adjusted to having three workers providing advocacy support and have been able to work effectively together ensuring that advocacy support is provided through the week.

The number of individuals approaching us for support in relation to their contact with DWP and with the ATOS disability assessment service continues to grow. Other areas where we have been busy are in relation to housing. This still seems to be one of our busiest areas, only surpassed by medical issues and access to services.

During this year we decided to update and improve the way we run our group support meetings. We have added a development element so that they are now 'Support and Development meetings'. This has proved to be a successful innovation and the meetings have been enjoyed and well attended by volunteers. So far our sessions have included presentations from The Crisis Centre, Edinburgh Housing Advice Partnership and Health in Mind's Edspace project.

The presentations are followed by an opportunity for the volunteers to discuss what they have heard and how it relates to the work they have been doing.

As ever, we have to pay tribute to our volunteers. They are a tremendous group of people who show endless amounts of enthusiasm, commitment and compassion. We wouldn't be able to deliver the service without their hard work.

Mental Health Act Advocacy

Last year saw a significant rise in the number of people using the service (15%), Mental Health Tribunals attended (38%) and direct contact Time with service users (9%) in a year-by-year comparison.

The number of people using the service at any one time includes a significant number of people (c.25%) who have used the service continually for over two years (some up to five years) and around 30%, who have used the service at least once before. This provides evidence that a consistent, accessible advocacy service in the community is required for people with long-term needs and a service whose quality ensures people trust it enough to revisit it at times of need.

Promotion of the service continued, targeting service users' groups, supported accommodation staff and residents, and meetings with community groups such as SACRO. Representation has been made to the Intensive Home Treatment Team, whose referral rate for advocacy is very low, in spite of the service working with several hundred service users per year.

The past year has seen an increase in the number of people seeking assistance with Advance Statements, with 30 requests being met which is well above any percentage level quoted in any national take-up figures.

We have participated in consultations into the 5-year Review of The Mental Health Act, MHTS Convenor Research, and SIAA MHTS Guidelines and continue to contribute to Volunteer Training about The Act.

Our cooperative work with the Individual Service at the Royal Edinburgh Hospital has been enhanced with the introduction of Peer Support Meetings of all AdvoCard Advocacy Workers.

Volunteer Statistics	2009/10	2010/11	MHA Statistics	2009/10	2010/11
No. of service users	237	290	No. of service users	150	173
No. of appointments	689	719	No. of MH Tribunals	21	29
Total hours	1466	1749	Contact time	1338	1462

Summary of Accounts

Extracts from the Financial Statements of AdvoCard for the year ended 31 March 2011 are shown below. Copies of the full audited financial statements are available from AdvoCard.

Income		Expenditure	
City of Edinburgh Council	301,400	Paid to Patients' Council*	8,376
NHS Lothian	267,896	Staffing	470,542
Donations	202	Premises	26,270
Interest received	42	Running Costs	18,553
		Travel	5,376
		Accountancy	8,220
		Interest and Finance	784
		Depreciation	958
		Governance	6,843
Income Total	569,540	Expenditure Total	545,922
		Surplus	23,618

*Monies remaining from NHS Lothian funding once staffing and management costs have been paid

Management Committee

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Dot Twyman

Sara Hvidsten
John Stuart

Staff

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Jean Crombie
Vincent Gill
Katie James
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