

# Independent Advocacy In Welfare Reform 2015 - 2016



## **Independent Advocacy in Welfare Reform**

The Scottish Government's Welfare Reform (Further Provision) (Scotland) Act 2012 - Annual Report – 2015 looked at how Welfare Reform is continuing to effect people in Scotland and how this can be mitigated. It found that people felt an underlying sense of precariousness and experienced considerable anxiety over how they would be financially affected in the future and that they found the process of claiming benefits stressful and had difficulty in accessing information relating to benefit changes. This added to the overall sense of uncertainty and had a detrimental impact on their mental wellbeing.

For those already suffering from mental ill health, this additional anxiety and stress can be detrimental to their recovery process. When you consider that the UK Government is currently the subject of a confidential United Nations (UN) investigation into the detrimental impact of welfare reform on people's human rights, it is easy to see how that fear and anxiety will grow in correlation with the increasing changes to Welfare Support and Social Security in Scotland.

The Welfare Reform Advocacy provision at AdvoCard has now been in place since September 2013 and aims to help mitigate some of the negative impacts of Welfare Reform for those with mental health conditions. In this time the number of referrals received has doubled from 107 in the initial period to 214 this year.

This report will look at the main issues that I, as the Welfare Reform Advocacy Worker at AdvoCard, have seen in the past year and will show the steps that I have taken to provide support on an individual basis and to provide opportunities for those who use our service to get involved in campaigning on a collective level. It will also look at the provision of Welfare Reform Advocacy and the capacity to maintain this service in light of the growing number of referrals and will end by looking ahead to the next year and providing information on what problems I expect to see and what I aim to achieve in this time.

Arlene Astley, AdvoCard

## **Abbreviation Key**

CA	Carers Allowance
CPN	Community Psychiatric Nurse
DHP	Discretionary Housing Payments
ESA	Employment and Support Allowance
HB	Housing Benefit
JSA	Jobseekers allowance
MHAS	Mental Health Assessment Service
PIP	Personal Independence Payments
SWF	Scottish Welfare Fund
UC	Universal Credit
WFI	Work Focussed Interview
WTC	Working Tax Credits

## **Individual Advocacy Statistics**

Over the past year, the main issues that I have been asked to provide support around continue to be ESA applications and assessments and PIP applications and assessments.

ESA has replaced Incapacity Benefit and Income Support, (if claimed because of incapacity). ESA is based on assessing what work, if any, an individual is capable of carrying out and involves completing a work capability questionnaire and attending an assessment. Personal Independence Payments have replaced Disability Living Allowance and are awarded to those who need additional support to manage their condition.

The ESA and PIP application processes and assessments can be distressing and confusing for those with poor mental health and because of the difficulty that many with mental health conditions have in explaining how their condition affects them, there is a risk that they will be wrongly assessed. The responsibility for collecting medical evidence also lies with the claimant. Individuals who do not have a good relationship with their care team may have difficulty in collecting this information.

Initially Edinburgh was only dealing with new claims to PIP but has now began the transfer process of migrating existing DLA claimants onto PIP, meaning that all DLA claimants in Edinburgh will face reassessment over the next year. Additionally, the DWP have now began the migration of Income Replacement benefits to Universal Credit in the Edinburgh area. At the moment this is only for Jobseekers claims, however, the transfer of ESA claimants is due to begin in 2017.

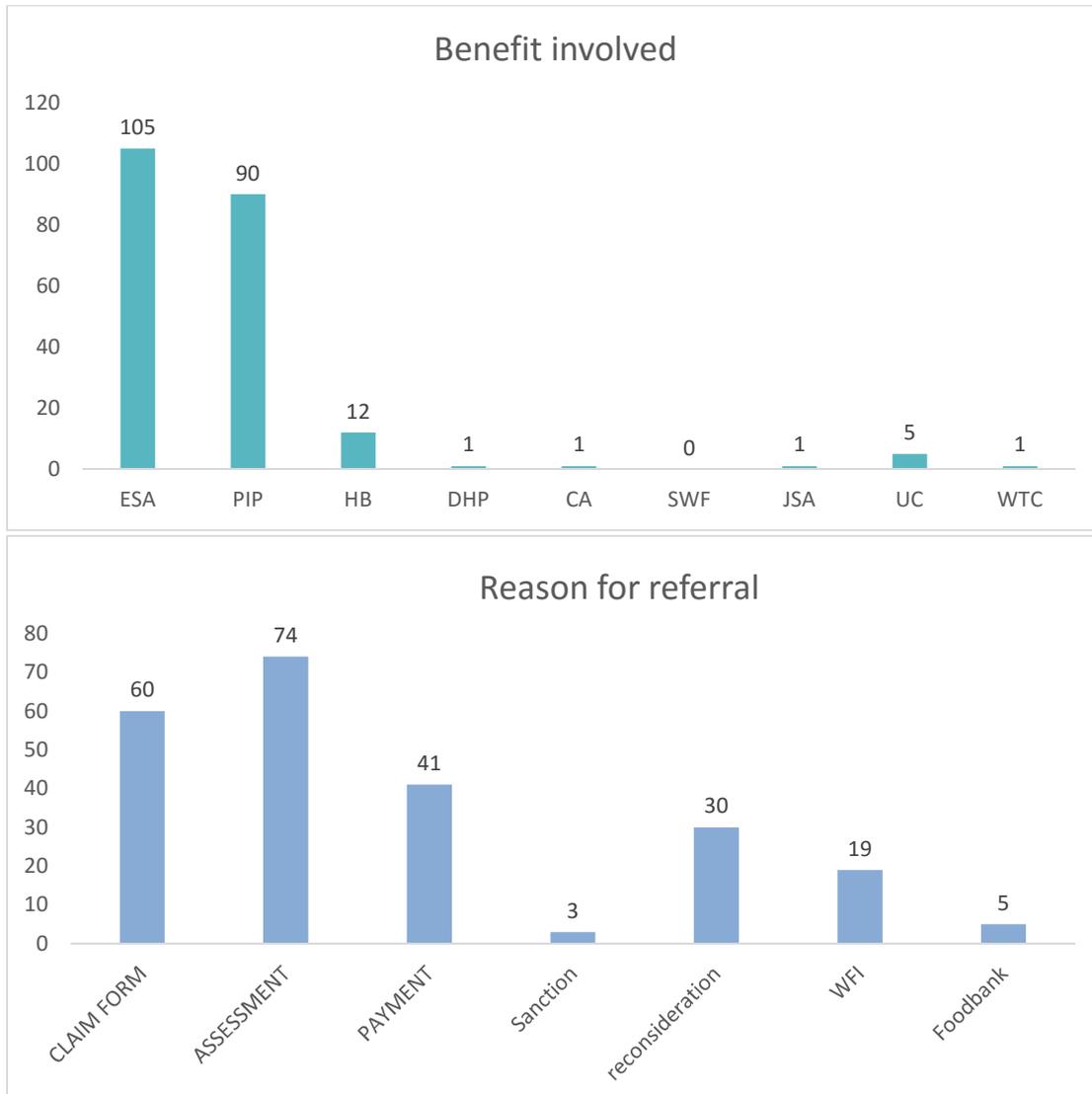
2017 also brings further challenges as the process of devolving disability benefits to the Scottish Government begins. I have been working with other organisations to look at how we can continue to support those who use our service through this challenging time.

## **Number of referrals (2015/2016)**

There has been a steady increase in referrals from other agencies who are becoming more and more aware of the service that we offer. CPN and GP Practices also continue to refer regularly and over 50% of the referrals that we received were self-referrals or recommended by a friend. However, no data was collected on where the person who had self-referred had heard of our service or whether they were signposted from their GP, CPN etc.

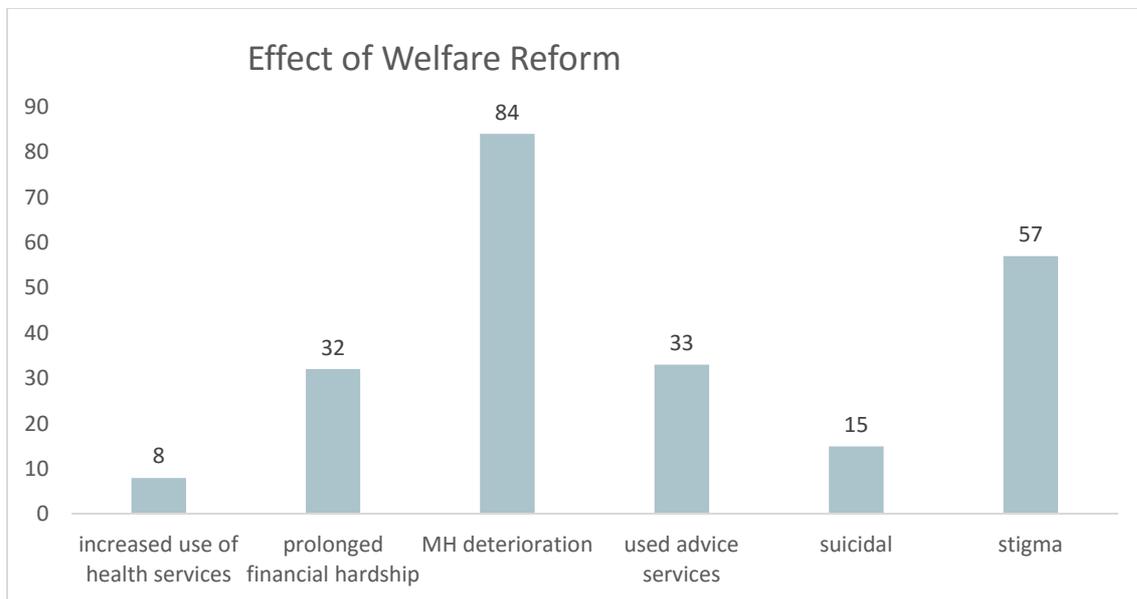
In total there have been 214 referrals which can be split into 140 new referrals and 74 re-referrals from those who have used our Welfare Reform service previously. This is up from 107 referrals in the first year and 161 in the second.

## Reason for referral



Again, this year the significant majority of advocacy work involved working with changes to Employment and Support Allowance and Personal Independence Payments. Most people have now been migrated to Employment and Support Allowance from Incapacity Benefit, however, this means that for many it is now time to be reassessed and go through the process again. For those who had a negative experience the first time, the prospect of facing reassessment can cause a great deal of anxiety and many are re-referring to AdvoCard for support with their Work Capability Questionnaires and subsequent Assessments. 97% of those who sought advocacy support to make a claim and to attend an assessment were awarded benefit at a rate that they were happy with. For the 3% who were unhappy with the results, support was sought and given to lodge a mandatory reconsideration request with all but 2 of those being successful. Of those two who were unsuccessful, support was given to find an advice worker who could represent them at an appeals tribunal.

## **Negative effects faced whilst going through changes in benefits as a result of Welfare Reform**

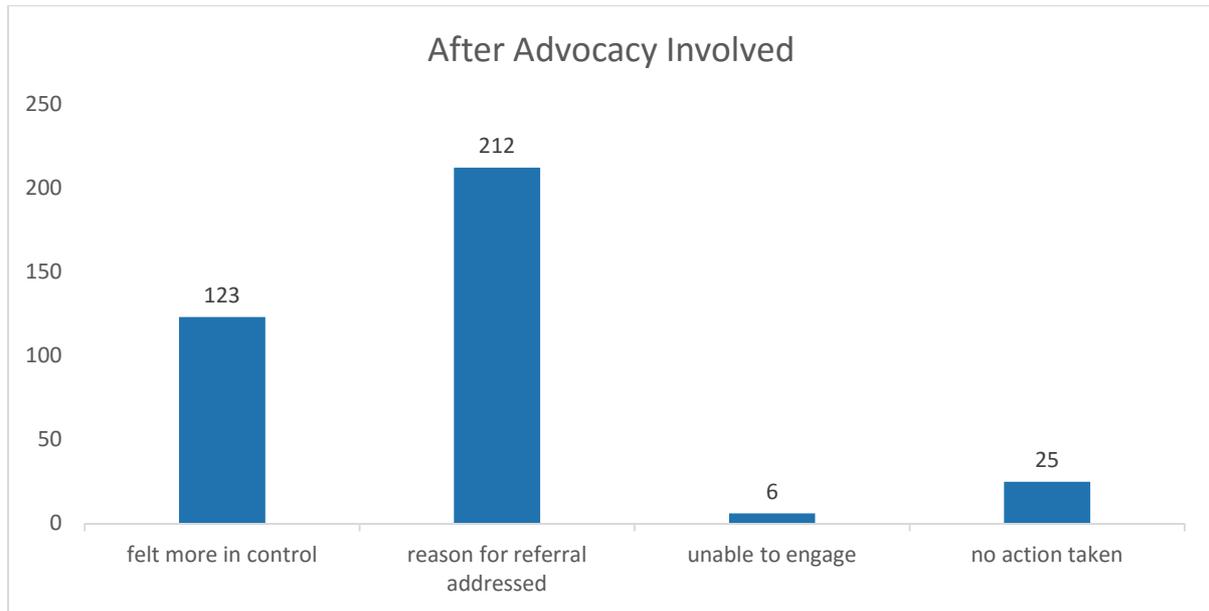


39% of those referred to AdvoCard experienced a deterioration in their mental health, throughout the claim process, with 7% showing suicidal ideation or actual suicidal behaviours. This is down from 15% in year one.

The number of people experiencing financial hardship is down from 45% in year 1 to 15% this year. This is a positive result and can be attributed, in part, to people being referred for advocacy support earlier in the claim process.

On a negative note the number of people feeling stigmatised due to claiming benefits has risen to 27%. In part, due to the widespread campaigns by the media to portray benefit claimants as scroungers. Not only does this affect the persons mental wellbeing there is also the risk that the person does not seek help for changes to their benefits due to feeling shame and stigma.

## Using Advocacy in Welfare Reform



Only 3% of all those referred for Welfare Reform issues were unable to engage with advocacy. 57% of all those who were referred to AdvoCard specifically for issues relating to Welfare Reform felt more in control when working with advocacy. It is regularly commented on that the person feels that the DWP staff / Healthcare Assessor takes more time with the person and that they are listened to more when advocacy is present. This has also helped prevent a further deterioration in mental health as some of the stress and anxiety is reduced.

Of those who re-referred, many felt better equipped to cope with claiming and being assessed again as they had a better understanding of the process and had had such a positive experience of using advocacy in their previous assessment.

## **Outcomes**

As the Welfare Reform Advocacy Service at AdvoCard was initially a new service, the decision was made to allow the service users to lead the direction in which the support would be provided. As my post is now established within the overall advocacy provision at AdvoCard it is possible to track changes and outcomes within the support offered. For ease of comparison the outcomes for Welfare Reform have been adapted from the overall advocacy specification outcomes directed by City Of Edinburgh Council.

These outcomes are laid out in the following table with a brief discussion on how each of these outcomes was met on the following pages. The Personal Outcomes look at what the service user was expecting when they referred to my service. For Welfare Reform these tend to be more clear cut than in other areas of advocacy provision, in that the person usually has very clear needs when they refer, such as an upcoming benefits assessment that they need support with or a claim form that they need help completing.

High Level Outcomes	Process Outcomes	Advocacy Service Outcomes	Personal Outcomes
1.Competence (maintaining a level of skill to promote independence)	People will have negative experiences of Welfare Reform mitigated to some extent by positive interactions with agencies involved.	<ul style="list-style-type: none"> <li>• More people feel listened to by agencies involved in the benefit process</li> <li>• More people feel better informed about available options when making benefit claims</li> <li>• More people feel better prepared for the assessment process.</li> <li>• More people feel involved in decisions that affect them</li> </ul>	<ul style="list-style-type: none"> <li>• To feel more listened to when attending benefits assessments</li> <li>• To feel better able to describe the effects of health conditions when applying for benefit.</li> <li>• To feel more involved in the benefits process.</li> </ul>
2.Community presence (having a sense of belonging)	People will feel more involved in changes to the benefit system.	<ul style="list-style-type: none"> <li>• More people feel better understood by agencies involved in benefit provision</li> <li>• More people feel able to influence and improve services (collective advocacy)</li> <li>• More people feel knowledgeable about accessing community resources and work related activity opportunities</li> </ul>	<ul style="list-style-type: none"> <li>• To feel more informed about any current campaigns</li> <li>• To feel better informed about current legislation changes in Welfare Reform to make sure I can make informed choices</li> <li>• To know where to turn to when I need support.</li> </ul>
3.Choice and influence (looking at situations from your perspective)	People will be supported throughout any Welfare Reform changes to attempt to avoid deterioration in their physical and mental health as a result of these changes	<ul style="list-style-type: none"> <li>• More people feel better informed about services and resources available to them when they are in crisis.</li> <li>• More people feel involved in decisions that affect them.</li> <li>• More people feel more in control of their life</li> </ul>	<ul style="list-style-type: none"> <li>• To be better aware of crisis services available to me throughout the benefit process.</li> <li>• To be heard more clearly in the benefit process thus reducing stress and anxiety</li> </ul>

<p>4a. Partnerships and relationships (meaningful interaction with others)</p>	<p>People will be given support to manage their feelings around stigma</p>	<ul style="list-style-type: none"> <li>• More people feel that they are treated as equals within the advocacy relationship</li> <li>• More people feel able to address stigma when faced with it.</li> </ul>	<ul style="list-style-type: none"> <li>• To have more opportunity to work with others to raise awareness of stigma in Welfare Reform</li> <li>• To feel better informed about the advocacy service provided and how advocacy can support me through the Welfare Reform changes</li> </ul>
<p>4b. Partnerships and relationships (meaningful interaction with others)</p>	<p>More people will receive services at an earlier stage to support them to develop and retain their own independence and resilience</p>	<ul style="list-style-type: none"> <li>• More people feel better informed about advocacy services and resources available to them</li> <li>• More people feel involved in decisions that affect them</li> </ul>	<ul style="list-style-type: none"> <li>• To find out about Welfare Reform Advocacy at the correct time when I need support.</li> <li>• To understand better how advocacy can help me when going through benefit changes.</li> </ul>

## Outcomes

### Outcome 1 – Competence (maintaining a level of skill to promote independence).

People had negative experiences of Welfare Reform mitigated to some extent by positive interactions with agencies involved. They felt more listened to and understood by others.

#### Service Outcomes met –

- More people felt listened to by agencies involved in the benefit process
- More people felt better informed about available options when making benefit claims
- More people felt better prepared for the assessment process.
- More people felt involved in decisions that affected them.

#### How these were met

In this period I attended 74 assessments for ESA and PIP and provided support to 60 people with their work capability questionnaire and PIP2 forms.

Although the majority of people who had to attend an assessment still felt anxious, most reported that they felt that they were listened to with an advocacy worker with them and that they felt prepared for the assessment.

When supporting someone with an assessment I primarily arranged to have a pre-assessment appointment with the person where I went through the questions that would be asked during the assessment. I took notes on what answers the person would like to give to each question. Typically this involved just a one hour appointment, however, for some, 2 or 3 appointments were necessary to get an understanding of what the person would like to say. During the assessment itself, if the person was very anxious or distressed or was feeling intimidated into agreeing to something that they would not necessarily agree with, I was able to respond on their behalf and / or provide prompts to the person to allow them to answer in the way that they had agreed before the assessment. I made sure that the assessor was listening to the person and fully understood the severity of the health conditions presented. I also checked with the person before leaving the assessment that they were happy with what had been said and that they had said everything they wished to say. Making sure that the person felt listened to and in control throughout the assessment helped to create a less negative perception of the Health Care Assessment agencies.

On the occasions where the person was unhappy with the results, I arranged to meet with the person to go over the decision notification. I then worked with the person to identify the areas that they were unhappy with and what areas they wanted the DWP to reconsider. I then drafted a reconsideration request with the person and notified the DWP on their behalf.

All but two of the 30 Mandatory Reconsideration requests that I have provided support with have been returned with the decision changed to a more positive one. In those where the original decision was upheld I have helped the person to connect with an advice agency and secure representation at an Appeal Tribunal.

Although assessments and helping with claim questionnaires accounts for the majority of the support that I provide I also provided support with a large variety of other issues. These included -

- Attending appointments at the Jobcentre to complete a work focussed activity plan or claimant commitment.
- Arranging and attending appointments with advice agencies to seek advice on benefit claims.
- Helping with completion of DHP forms and contacting CEC regarding Housing Benefit and Council Tax Reduction.
- And although, Edinburgh is only 'live' for single, simple claims I have supported 5 people with issues around Universal Credit.

As previously stated, one of the major issues that affects people with mental health conditions when claiming benefits is the difficulty that most have in describing how their condition affects them on a daily basis. Most people have lived with an enduring mental health condition for so long that their everyday behaviour has become normal and problems faced have become trivialised to the extent that they no longer recognise the barriers that they face.

As a result of working with advocacy more people felt listened to and understood when going through the assessment process but - more importantly - more people felt that they were better prepared to face the assessment, having spent time going over how their conditions affect them. This meant that the person was better able to give an exact account of their illness and barriers that they face and was then able to receive the level of benefit that they were entitled to.

## **Personal Outcomes - Case study A**

Personal Outcomes met

- To feel listened to when attending benefits assessments
- To feel better able to describe the effects of health conditions when applying for benefit.
- To feel involved in the benefits process.

(A) was referred to our service by her CPN as she had an ESA assessment coming up and was feeling very anxious about this, this was causing her mental health to deteriorate to some extent. I met with A and went over the questions that she would be asked in her ESA assessment, taking notes of the answers that she would like to give. I helped her to think about how her conditions affected her and what barriers they created to her seeking work. I gave her information on the benefit and assessment process and let her know what would happen both at the assessment and afterwards. I also made sure that she was aware of her rights in the assessment process. I attended the assessment with A and made sure that the health care professional conducting the assessment listened to A and understood what she was trying to say. As a result A was prepared for her assessment, she was aware of her rights and she felt listened to throughout the assessment. This helped her to give an accurate description of her health care needs and resulted in her being correctly assessed for the benefit that she was entitled to.

## **Outcome 2 .Community presence (having a sense of belonging)**

People were given the opportunity to be more involved in changes to the benefit system.

### **Service Outcomes met –**

- More people felt better understood by agencies involved in benefit provision
- More people felt able to influence and improve services (collective advocacy)
- More people felt knowledgeable about accessing community resources and work related activity opportunities

### **How these were met**

One of the main issues that I deal with is the feeling of powerlessness when it comes to benefit changes. Most benefit changes happen at Westminster and the person affected has very little say in how these changes are carried out. It is difficult to then

feel any sense of involvement in the process which leads to a feeling of loss of control and creates anxiety and stress for those going through the process. By providing our service users with the chance to be involved in campaigns that will help influence and improve the Social Security System in Scotland and to feed into consultations at Westminster I have helped people feel more involved and less powerless. This creates a sense of confidence when dealing with the agencies involved which the person carries with them to their individual assessments.

I have also supported people to be more knowledgeable about accessing community resources and work related activity opportunities by signposting them to organisations that could help them and by attending work coach interviews when necessary. As a result, more people have felt knowledgeable about accessing community resources and work related activity opportunities. This has led to people accessing training and voluntary opportunities that they had previously not considered.

Our service users have had the opportunity to contribute to consultations carried out by the Welfare Reform Commission on the future of PIP and the Fairer Scotland Discussions that have been held throughout the region.

I have also delivered a significant amount of work in this area to allow those who use our service to contribute to and influence forthcoming decisions in benefit legislation. In doing so they have the opportunity to be an active participant in the changes that will happen to them and to feel an element of control in this area of their life.

### **Collective opportunities**

#### **Scottish Campaign on Welfare Reform. (SCoWR)**

In order to provide an opportunity for our service users to have their voices heard at Holyrood I have joined the Steering Group of SCoWR. SCoWR are a collaboration of a number of organisations active in Scotland who are campaigning on Welfare Reform Issues and include the Child Poverty Action Group, Oxfam, SAMH, The Poverty Alliance and Inclusion Scotland.

In September we held a members meeting to ask what changes our service users would like to see happening in the new Scottish Social Security System. Working with our Collective Advocacy Workers I gathered information from our service users on what they would like to be included and raised these at the member's event. Results from the event were gathered and I collated these into a series of key points that SCoWR would like to see in the new system. These points formed the basis of the new Holyrood Manifesto 2016 which will be delivered in a Parliamentary reception in June, two of our service users will have the opportunity to talk at this reception about their experiences of the changes. Point 4 of the manifesto calls for investment in independent advocacy in Welfare Reform.

## **Disability Benefits Consortium (DBC)**

To enable our service users to contribute to changes at a Westminster level I have also joined the DBC. The DBC are a national coalition of over 60 different charities and other organisations committed to working towards a fair benefits system. Working with them, our service users have had the opportunity to contribute to consultations on changes that need to be made to the work capability assessment and plans to cut the amount payable to those in work related activity group of ESA.

## **Rights and Resilience**

I am currently working with Inclusion Scotland on their Rights and Resilience Project. This is a year long project looking at what our service users think would help them when they are facing changes to their benefits. Our service users were given the opportunity to contribute to a consultation on this in December 2015 which then formed the basis for an event that we co-hosted with Inclusion Scotland, LCoIL and People First. The report on that event is in the final stages and will be published sometime in May but preliminary findings show that there was a general consensus amongst those who attended the event that independent advocacy is helpful for people with mental health conditions experiencing problems with Welfare Reform. Several organisations committed on the day to signpost their clients to independent advocacy support where appropriate.

## **Heriot Watt**

A group of our service users had the opportunity to be involved in research carried out by Dr Abigail Marks and Dr Sue Cowan at Heriot Watt researching the detrimental effect the ESA assessment process is having on people with mental health conditions. I was also invited to give a talk to a class of fourth year students in the Psychology department on how advocacy can help in the assessment process. The final study should be published this year.

## **Collective Advocacy at Redhall.**

Our Collective Advocacy workers hold regular meetings at Redhall Walled Gardens with a dedicated 20 minute section on Welfare Reform. Before each meeting I let the advocacy worker know of any new developments in the area of Welfare Reform, any upcoming events or contributions and what's on that month. This is then delivered to the service users in that group and any issues that are raised are fed back to me. This helps the service users there feel involved in the benefit process and helps to reduce anxiety and stress caused by any changes.

## **Round Table Events**

I have attended the following four round table events this year where I have had the opportunity to highlight the problems that our service users are experiencing.

What can we expect with Scotland New Powers? Round Table with David Mundell, Secretary of State

What the Scottish Government aims to do with the new powers – Round Table with Alex Neil, Minister for Social Justice

Mitigating Welfare Reform in Edinburgh

Creating effective partnerships – I was invited to attend this event as an expert in Welfare Reform Support and held 2 workshops in that area.

By providing opportunities for collective advocacy more people have felt better able to influence and contribute services, they have felt listened to and understood by other and have felt involved in decisions that affect them.

## **Personal Outcome Case Study B**

Personal Outcomes met –

- To feel informed about any current campaigns
- To feel informed about current legislation changes in Welfare Reform to make sure I can make informed choices
- To know where to turn to when I need support.

B had previously used our welfare reform service for support with his assessments for PIP and ESA. He felt angry at the changes and wanted to be more involved in campaigning for changes to benefits. I signposted him to support groups in his area and provided him with information on campaigns that I was involved with on behalf of our service users. I also advised B that I updated our social media pages with any changes to benefit legislations or opportunities to contribute to consultations. As a result B took part in the study with Heriot Watt and provided information to feed into a consultation on PIP carried out by the Welfare Reform Committee. He also regularly checks our Facebook page for information. As a result B feels more involved in current changes and feels better informed about choices that he must make.

### **Outcome 3. Choice and influence (looking at situations from your perspective)**

People were supported throughout any Welfare Reform changes to attempt to avoid deterioration in their physical and mental health as a result of these changes.

#### **Service Outcomes met –**

- More people felt better informed about services and resources available to them when they were in crisis.
- More people felt involved in decisions that affected them.
- More people felt more in control of their life

#### **How these were met**

I have helped people to manage their anxiety levels throughout any Welfare Reform changes by keeping them informed about services and resources available to them and working with them to attempt to make them feel more involved in decisions that affected them. This has had the result of more people accessing crisis services, such as foodbanks or the Scottish Welfare Fund, when they needed them. I have registered AdvoCard as a foodbank referral agency with Edinburgh Foodbanks and am authorised to give out food vouchers to our service users should they need them. As a result more people are able to access food vouchers when they face a crisis with their benefit applications and are better supported to cope with this crisis.

If the person indicated that they were struggling to maintain their mental health I made them aware of mental health crisis services and other agencies that may be able to help and arranged appointments with these agencies when required. If the person needed me to, I also attended the appointment with the person. In cases where the person indicated that they were struggling to cope with the changes to their benefits I contacted the DWP, with their permission, and let them know that the person was too unwell at the moment to deal with what was been asked of them and arranged for an extension to the time period required.

39% of those who used the Welfare Reform service felt that their mental health deteriorated during the changes that they sought support for. This is down slightly from 41 % previously, with a drop from 15% to 7% of people reporting that they felt suicidal. This may be, in part, due to the fact that people are tending to be referred to the service at lot earlier in the stage of their benefit claim and have support throughout the whole process. 57% reported that they felt more in control after working with advocacy.

## **Personal Outcomes Case Study C**

Personal Outcomes met -

- To be better aware of crisis services available to me throughout the benefit process.
- To be heard in the benefit process thus reducing stress and anxiety

C was referred to me after she had failed to attend her ESA assessment due to poor mental health. Her ESA was then stopped and she had no money and her mental health was deteriorating. I provided information to C on accessing the Crisis Centre and MHAS and made sure that she was aware of what to do if she felt that her mental health was getting worse. I called the DWP on her behalf and made a new claim for ESA on the basis of a worsening health condition and requested a short term benefit advanced for her. I then helped her draft a letter to have the decision to stop her original claim reconsidered. I also gave her a foodbank voucher and information on foodbank opening times in her area for her to get food for her and her son. As a result C had access to support services should her mental health deteriorate, was able to access a small amount of money and was provided with food while the crisis was ongoing. She managed to get her ESA award reinstated and was supported to attend the new assessment.

## **Outcome 4a Partnerships and relationships (meaningful interaction with others)**

People were given support to manage their feelings around stigma and were provided information on campaigns that they could be involved in. People have felt that they were treated as equals within the advocacy relationship.

## **Service Outcomes met –**

- More people felt that they were treated as equals within the advocacy relationship
- More people felt able to address stigma when faced with it.

## **How these were met**

I have worked towards providing opportunities for people to work collectively with other agencies to raise awareness of stigma in Welfare Reform and have ensured that more people are aware of how advocacy can support people through the Welfare Reform changes.

Those who access the Welfare Reform Advocacy Service have the double stigma of having a mental health condition and being a benefit claimant. They are also at the

forefront of a media campaign at the moment to portray benefit claimants as scroungers and fraudsters. As a result some people either do not claim benefits that they are entitled to or trivialise the problems that their mental health condition causes them thus making themselves ineligible to claim benefits that they are entitled to.

I have worked with people to ensure that they are aware of their rights throughout the benefits process and as a result more people are requesting a mental health professional to carry out their benefit assessment and are requesting that reasonable adjustments be made in jobcentres when attending for work focussed interviews such as providing quiet areas or individual interview rooms as opposed to open plan rooms.

At the events that I have attended this year I have raised awareness of the stigma that is felt amongst our service users by telling the stories that they have given me to tell. By making their voices heard I am helping others understand how they might help. I am also currently in discussions with Carla McCormack of the Poverty Alliance around joining the Stick you Labels campaign

I aim to treat every person who uses my service equally with the respect and the dignity that they deserve. I work to build good advocacy relationships with those who use my service so that they feel comfortable discussing the sometimes traumatic issues that they must discuss with me in order to prepare for their assessments. As a result a high number of people who have previously used the service have re-referred themselves again for further support around additional benefit issues.

### **Personal Outcomes**

Personal Outcomes met –

1. To have the opportunity to work with others to raise awareness of stigma in Welfare Reform –

I am currently looking into joining the Stick Your Labels campaign to provide opportunities for our service users to raise awareness of stigma in Welfare Reform.

2. To feel informed about the advocacy service provided and how advocacy can support me through the Welfare Reform changes

I have provided a series of leaflets and give regular talks on how advocacy can support people through the Welfare Reform Changes.

## **Outcome 4b. Partnerships and relationships (meaningful interaction with others)**

More people received our Welfare Reform service at an earlier stage and were supported to develop and retain their own independence and resilience

### **Service Outcomes met –**

- More people felt better informed about advocacy services and resources available to them
- More people felt involved in decisions that affected them

### **How these were met**

I worked to raise awareness of Welfare Reform Advocacy to ensure that people were referred at an earlier stage in the process by building partnerships with the following agencies.

#### **Leith Jobcentre**

I attended the Leith Jobcentre Provider meeting and held a stall at their event in July 2015 giving information to staff and benefit claimants on how advocacy can help. I continue to have a good relationship with members of staff at Leith Jobcentre. I have also built a relationship with the manager of High Riggs Jobcentre which has helped a number of our service users who have experienced problems when attending the centre. Having a good relationship with the DWP staff has meant that the person who I am accompanying feels listened to and understood by the advisor and develops their own positive relationships with them.

#### **Stafford Centre**

I continued to strengthen the working partnership that we have with the Benefits Service at the Stafford Centre who regularly refers to me and vice versa. This helps our service users to feel that their services are better joined up and keeps them better informed of any decisions that affect them.

#### **Inclusion Scotland.**

I have formed a working partnership with the Rights and Resilience project and our service users will have more opportunities to contribute throughout the coming year.

I also gave talks at several organisations throughout Edinburgh to raise awareness of the advocacy service I provide and worked with members of SCoWR to have the need for a greater provision of advocacy services in Welfare Reform included in the SCoWR Holyrood Manifesto

I have designed information leaflets that detail how advocacy can help in Welfare Reform and what changes have been made to the benefit system. I have distributed

these to several organisations and have sent a mailshot to 100 GP practices in Edinburgh with a cover letter explaining my service along with some information leaflets. I have given information talks to each of the Community Mental health Teams and have also contacted all the MP's and MSP's in Edinburgh to make them aware of the service should any of their constituents come to them looking for help. As a result more GPs are referring to our service when the person needs support and people are able to access our service at an earlier stage in the benefits process than previously.

I have formed positive partnerships with other agencies to raise awareness of the importance of advocacy and am now beginning to see more and more referrals for people who are at the beginning of their claim journey, this helps to provide a more positive experience for the person who is supported from the beginning and therefore has a greater understanding of the changes that will affect them. I am also seeing a lot of people re-referring themselves to our Welfare Reform service, this is an extremely positive indicator of how helpful the people using this service have found it to be.

### **Personal Outcomes**

Personal Outcomes met -

1. To find out about Welfare Reform Advocacy at the correct time when I need support

I have continued to promote the Welfare Reform service to other agencies and Health Professionals, as a result, more people were referred to advocacy at the beginning of the claim process than in previous years.

2. To understand how advocacy can help me when going through benefit changes.

I continue to give talks and produce leaflets that provide information on our service.

## **What's next?**

Throughout 2016 we will continue to see the transfer of DLA claimants to PIP and the reassessment of ESA claimants. This will bring a high number of people needing support in their assessments and increased levels of anxiety from those who are currently in receipt of DLA and face the possibility of having their award removed or reduced.

2017 will bring further challenges with the devolution of Disability Benefits to the Scottish Government, the creation of a Scottish Benefits Agency and the transfer of ESA claimants to Universal Credit. This effectively means that those who have just gone through these changes will again be forced to change benefits and transfer to the new systems.

Throughout these changes it is important that we can carry on the work that we have started at AdvoCard and continue to provide a service that allows people to feel listened to and understood during these changes. Changes to benefits create uncertainty and fear amongst those who rely on them and it is important that we can continue to help people to feel more in control around these issues and feel involved in the changes.

At the moment I am working to full capacity regarding referrals and providing access to collective campaigns. I have, on occasion had to either have an assessment date changed to fit with my schedule or have changed jobcentre appointments to when I am available. This has had the result of creating more anxiety for the person who is waiting to attend the appointment / assessment as it extends the time that they have to wait to receive the benefit that they are entitled to.

Since December 2015 I have also had help from a colleague who has taken some of my referrals and worked with them when I have not been available. Our volunteer advocacy workers also continue to attend benefits assessments and jobcentre appointments, (however, the figures on these are not included in this report). To help provide consistency in the service that we provide, I have produced a guide to advocacy in the PIP assessment and am currently working on a similar guide for ESA that my colleague and our volunteers can use.

Working in this way has meant that, at the time of writing this report, everyone who is referred to AdvoCard for problems with Welfare Reform has been seen and has received the advocacy support that they requested. However, should the demand for advocacy in Welfare Reform continue to rise at the extent that it has in the previous two years then there may come a time when I will be unable to meet all the referrals that are made to my service and will have to look at ways that that can be managed.