

Speaking Up, Speaking Out, Taking Action

Advocacy Policy

November 2011

1. Policy Principles

Bracknell Forest Council Adult Social Care and Health Department (the “department”) is committed to meeting its obligations in the way it supports adults in receipt of social care and demonstrating ongoing commitment to person-centred and personalised outcomes for individuals by:

- ensuring individuals can access and make best use of information and resources from the Council, its partner agencies and broader support networks in the community
- enabling and empowering individuals to make their own lifestyle choices, in their own best interests and to determine their own preferred outcomes in relation to their support needs

This policy sets the framework for delivery of *Speaking Up, Speaking Out and Taking Action: A strategy for commissioning advocacy in Bracknell Forest 2011-2015* by committing to the principles of the Advocacy Charter and Code of Practice.

It is intended to support adult social care and health staff in their person-centred practice and to secure personalised outcomes by helping individuals, their families, friends and/or carers to:

- speak up for, or act on behalf of, themselves or another person
- take action to say what they want, secure their rights, represent their interests
- contribute their views, opinions, ideas and feelings to inform processes for continuous service improvement

2. Scope

This policy is applicable to all departmental staff in their day-to-day practice and the people they support who are in receipt of adult health and social care support and services and in relation to best-interest decisions in respect of people who fund their own support.

This policy does not supersede advocacy policies operated by third party organisations, but may, subject to agreement, be applicable where a third party provider does not have an advocacy policy in place and may also be used to inform and support individuals who wish to advocate for themselves or on behalf of others.

Where this policy conflicts with mandatory procedures (*see Mandatory procedures below*), relevant statutory guidance takes precedence.

3. Definitions

“Self-advocacy”	When an individual speaks up or takes action by themselves or is helped to speak up for themselves.
“Informal advocacy”	When an individual asks someone they know (such as a family member, friend or carer or someone who has the same disability, illness, condition or circumstances) to speak up or take action for that individual (also known as “peer advocacy”).
“Independent advocacy”	When an individual asks someone they do NOT know to speak up or take action for them.
“Group advocacy”	When an individual asks a group of people or an organisation to speak up or take action for them.

An **advocate** can be:

- A individual
- A friend, family member or carer
- A community volunteer
- A person or organisation
- A paid practitioner

Advocacy is **not**:

Information	This is a collection of facts which helps to improve understanding of a problem.
Advice	This is when someone gives their views or opinions about what could be done about a problem.
Mediation	This is when someone sorts out a problem between two or more people. A mediator is a person who gives their own views or opinions to help everyone involved to agree.

4. Effective date

The policy has been agreed by the Adult Social Care and Health Departmental Management Team on 8 November 2011 and is to be reviewed annually.

5. Responsibilities

All members of staff are responsible for following the policy, suggesting improvements to the policy or reporting issues with the policy where an adverse affect is caused on the organisation or the people it supports.

Anyone can make suggestions to improve this policy and practice guidance should be submitted explaining reasons for change and the preferred outcome for individuals to asc&h.commissioningteam@bracknell-forest.gov.uk

The Adult Social Care and Health, **Joint Commissioning Team** is responsible for ensuring the policy is up to date.

6. Mandatory procedures

There are certain circumstances in which an advocate must be offered:

Mental capacity issues

Under provisions in the Mental Capacity Act 2005, when a person, who upon assessment by a care professional, is determined to lack mental capacity and is facing a decision about serious medical treatment by an NHS body or a long-term change of accommodation by an NHS body or local authority, a referral should be made for an independent mental capacity advocate (IMCA) if there no person whom it would be appropriate to consult or the matter is of an urgent nature.

When a person is detained under the Mental Health Act 1983 (except short-term emergency sections and holding powers defined under sections 4, 5(2), 5(4). 135 and 136) that person has a right to an Independent Mental Health Advocate (IMHA).

Assessments

All individuals must be made aware of their right to advocacy when they are being supported to do a self-assessment and, if requested by the individual, practitioners must refer that

person to appropriate advocacy provision taking into account relevant eligibility criteria. Equally at any time during contact, advocacy must be considered if it will enable a person to participate more fully in the process.

Safeguarding

At a meeting where safeguarding issues are discussed, if the Chairperson has identified a need for an advocate and the person agrees, then an advocate must be provided. Separate advocacy must also be offered to any carers.

Complaints

There is no duty on local authorities to provide an advocacy service to complainants under the Adult Social Care Complaints Policy. The department will, where possible, facilitate the provision of independent advocacy services to complainants, by providing information and help to identify sources of advice - including relevant local voluntary organisations, community or self-help groups or specialist organisations.

7. Advocacy Charter and Code of Practice

The department is committed to the principles of the Advocacy Charter and Code of Practice as follows:

Principle	Practice impact
Clarity of purpose	The department will be clear on what advocacy is, what it is not, the benefits of advocacy, what types of advocacy exist and know how to obtain information advocacy provision in the Borough.
Independence	To avoid conflicts of interest, staff will not act as advocate for any individual with whom they have been involved as part of an assessment or planning process. Staff shall respect an advocate’s freedom to act according to the wishes and the needs of the person they are advocating for.
Putting People First	Staff shall be satisfied that the advocacy support for an individual is appropriate to that individual’s needs, their expressed wishes and preferred outcomes. Staff will take a holistic view and consider the needs of family, friends or carers who may also benefit from advocacy support when involved in or impacted by care decisions.
Empowerment	Staff shall be satisfied that individuals have been able to express a preference for advocates with particular skills, knowledge or attributes so that their preferred and personalised outcomes can be achieved. Staff will support and encourage individuals to self-advocate, or natural networks such as friends, family members, carers or other individuals to develop new skills and the confidence to act in the role of advocate in accordance with the wishes of the individual and where there is no conflict of interest.
Equal Opportunity	Staff will apply equal opportunities policies and be proactive in tackling all forms of inequality, discrimination and social exclusion where this is seen to exist.
Accessibility	Staff will ensure that information and environments are conducive to

Principle	Practice impact
	<p>ensuring advocacy is effective.</p> <p>Whilst respecting any limitations on services, staff will encourage advocates to be flexible in their approach and meet in places and at times that are mutually convenient.</p>
Accountability	<p>Staff will be satisfied that advocates are operating professionally and within the law at all times. Where there is cause to call into question the practice or conduct of an advocate, concerns will be reported immediately to line management so that alternative advocacy provision can be considered.</p>
Supporting advocates	<p>Staff shall, with due regard for policies on confidentiality and in accordance with the Data Protection Act 1998, participate fully in requests for information made by individuals through their advocate so that informed choices can be made.</p> <p>Staff will support advocates in their professional development by sharing skills, information, advice and knowledge and allowing advocates to observe professional practice so that they can better understand the contexts in which they work.</p>
Confidentiality	<p>Staff will be satisfied that individuals and advocates understand what is meant by the term “confidentiality” and will only share information in line with applicable council policies and in accordance with the Data Protection Act 1998.</p>
Complaints	<p>Staff will support individuals who wish to make a comment to or a complaint against an advocate or advocacy scheme so that their voices are heard in service improvement.</p>

8. Equality and Diversity

This policy is subject to the Council's procedure for Equality Impact Assessment and has been screened to assess impact on equality on the basis of disability, race, gender, sexual orientation, gender re-assignment, age, religion and belief, pregnancy and maternity, marriage and civil partnership.