



Nottingham

City Council

Independent Advocacy

Annual Report: October 2020 to September 2021

Area Manager: Gabriel Hall

Service Manager: Alison Smith

Introduction

The Children's Society is commissioned by Nottingham City Council to deliver an independent and confidential Advocacy Service for all Children in their care. The Advocacy Service promotes children's rights and provides advocacy in line with the Local Authority's statutory duty.

The Children's Society's practice is underpinned by the National Standards for the provision of Children's Advocacy Services (2002).

The service aims to empower children and young people ensuring their rights are respected and that their views and wishes are heard in decision-making processes. The service provides independent;

- Information
- Advice
- Advocacy
- Representation
- Support

The Advocacy process is led by children and young people and advocates follow the core principles below;

- *Advocates work for children and young people and no one else.*
- *Advocates value and respect children and young people and challenge discrimination.*
- *Advocates support children in care to understand what is happening to them and to ensure they have a voice in decisions made about them.*
- *Advocates help children and young people to raise issues and concerns about things they are unhappy with. This includes making informal and formal complaints under section 26 of the Children's Act 1989.*

Advocacy for young people is based on the principle that all young people have a right to be involved in the decisions that affect their lives. The distinctive nature of advocacy is that it is led by the views and wishes of young people and always uses a child-centered approach. Advocates act on the permission and instructions of young people even when these are not the advocate's view of the young person's best interests.

Nottingham City Advocacy Service

Advocacy services are available for children and young people up to the age of 18 years or up to 25 years for those with a disability or in higher education. The Children's Society provides a free and confidential phone messaging service (available 24 hours a day and 7 days a week) for children and young people to make contact with the advocacy service.

Residential Visiting Advocacy

The Children's Society is contracted to provide Residential Visiting Advocacy to all children and young people in residential care, at a minimum of once every twelve weeks. This includes all residential homes that are Local Authority maintained, private and secure accommodation throughout the UK.

Issue Based Advocacy

The Children's Society provide issue based advocacy representing children and young people who have specific concerns that they wish to be supported with. This work has no specific time frames however the advocates aim to resolve issues quickly. Once resolved the work is closed and if young people have subsequent issues these are raised as new pieces of work.

The services aims to achieve:

1. Young people feel that their views, wishes and opinions are listened to
2. Young people feel confident to speak out and self-advocate
3. Young people understand their rights and the decisions made about their lives
4. Young people have improved wellbeing
5. Young people have more control over the decisions made in their lives

Non- Instructed Issue Based Referrals

The advocate's role is to ensure that the young person is at the center of all decisions being made about them. If a young person is unable to communicate their views, then the advocate will make it clear that they do not know what a young person wants, and that they are therefore using a non-instructed approach.

The non-instructed advocacy referral primarily involves observation, questioning, information gathering and being clear on what rights the young person has. In practice non-instructed advocacy usually involves a combination of these techniques to ensure the rights

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of the young person are upheld, decisions are made in a child-centered way and, as far as possible, the young person has some input into the decisions affecting their lives. First and foremost it has to be the needs of the young person that dictate the form of advocacy used.

It is important to keep an open mind and consider all forms of communication that a young person may be able to use to instruct, for example symbols/signing & PECS (Picture Exchange Communication System – using cards with pictures to express wishes and feelings). This may involve working with key professionals involved in the young person's life to gain a better understanding about what the young person wants to communicate

Independent Persons

An Independent Person is provided to all eligible children and young people subject to current Secure Accommodation Orders. As an Independent Person, the Advocate is to be an active member of the decision making panel, which decides whether the criteria for keeping a young person in secure accommodation continue to apply, ensuring that children's rights and entitlements are upheld and that decisions are appropriate

Promoting the service & networking

To raise awareness of the Advocacy service The Children's Society has produced promotional flyers which have been distributed across Children in Care services including social work teams, residential units, semi-independent providers, secure accommodation and foster carers networks. To support an understanding of advocacy provision the service manager has attended a range of meetings and networking events including;

- Social Work team meetings
- Foster Carer Support meetings with the National Fostering Agency
- Foster Carer business meetings
- PoWer – Independent Visiting Service
- Young people's Refugee Forum and youth group
- Residential Provider visits

The Children's Society has promoted equal access and inclusion, through providing interpreting services with young people who have English as a second language and through producing material in different languages including Arabic, Pashtu and Farsi.

Performance overview

Chart 1 shows that between October 2020 and the end of September 2021 a total of 641 contacts have been made to the Residential Homes.

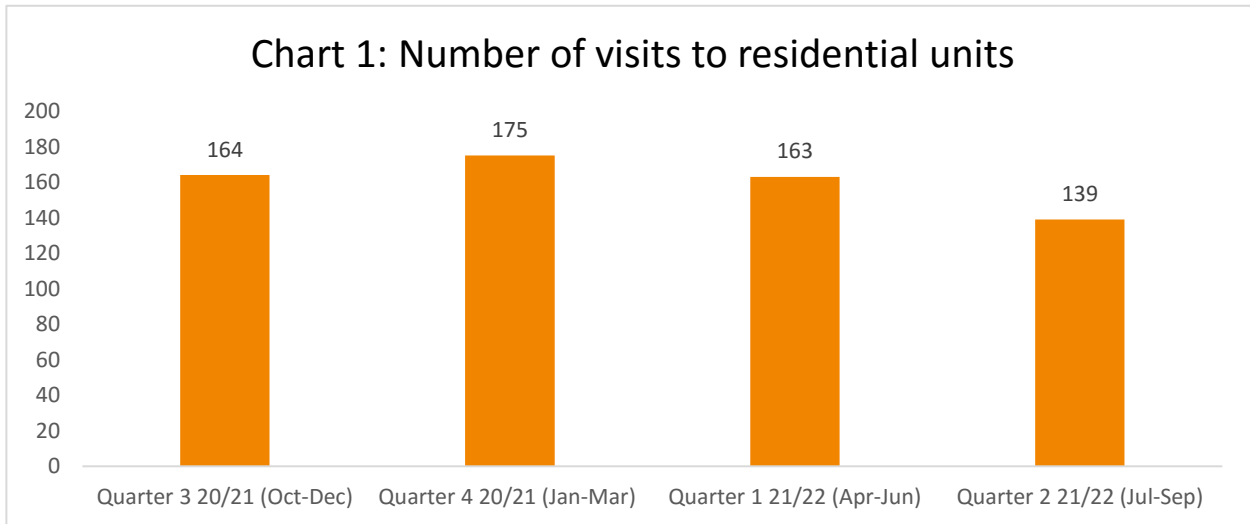
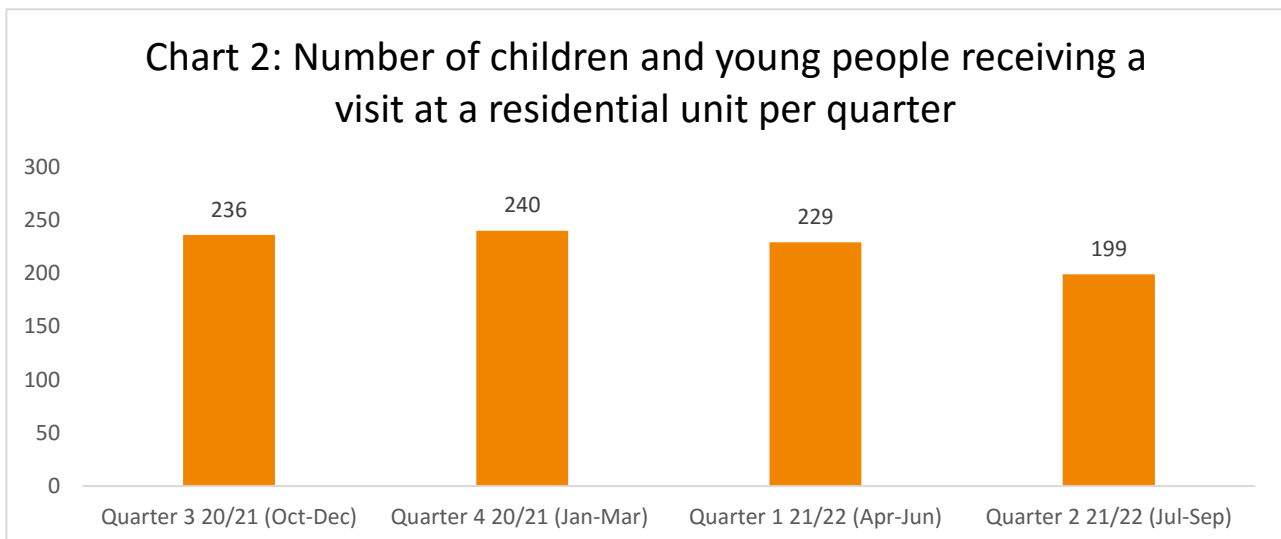


Chart 2 shows the number of young people having contact with their Advocate over each quarter.



During quarter 2 the service has been in transition (moving away from joint commissioning arrangements with the County). Therefore the number of face-to-face visits increased supporting young people to understand the changes that were taking place.

Chart 3 illustrates the percentage of young people receiving a visit every twelve weeks against the benchmark 80%. The table shows that the target was exceeded in each quarter. This reflects the movement toward delivery being primarily provided over phone and digital platforms.

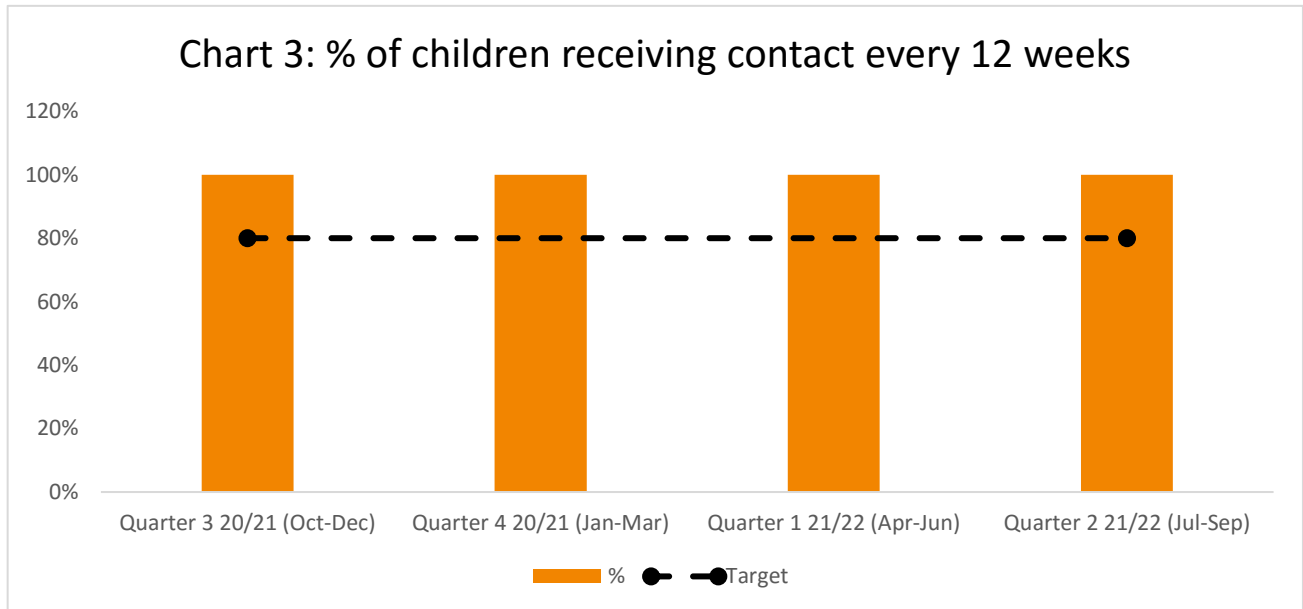
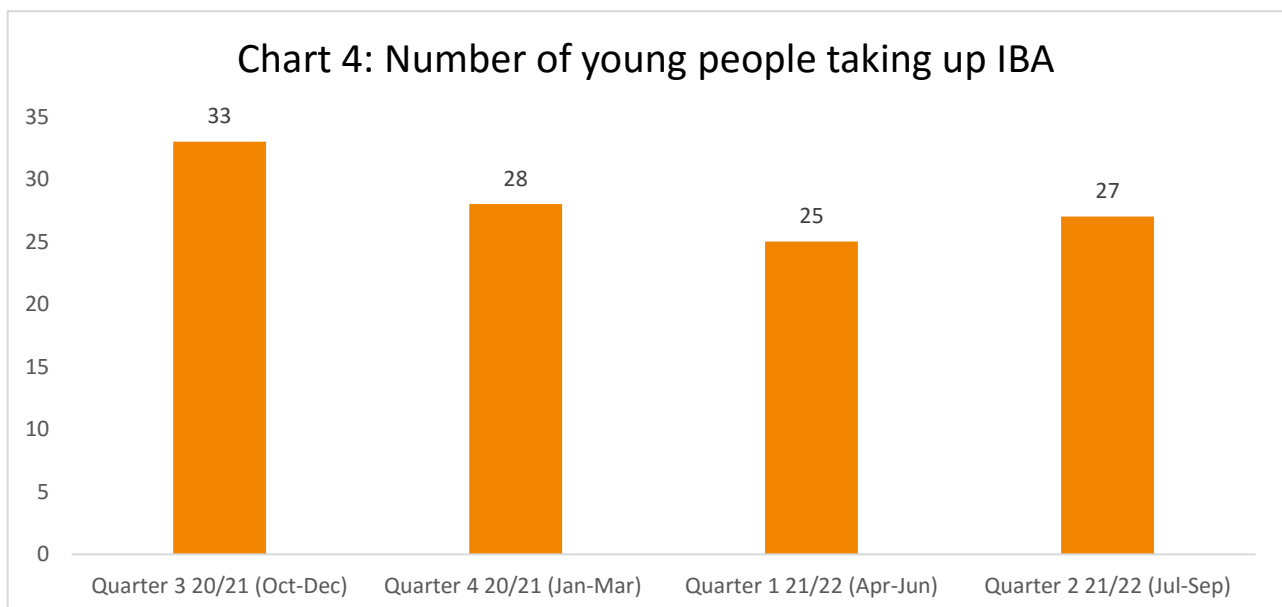
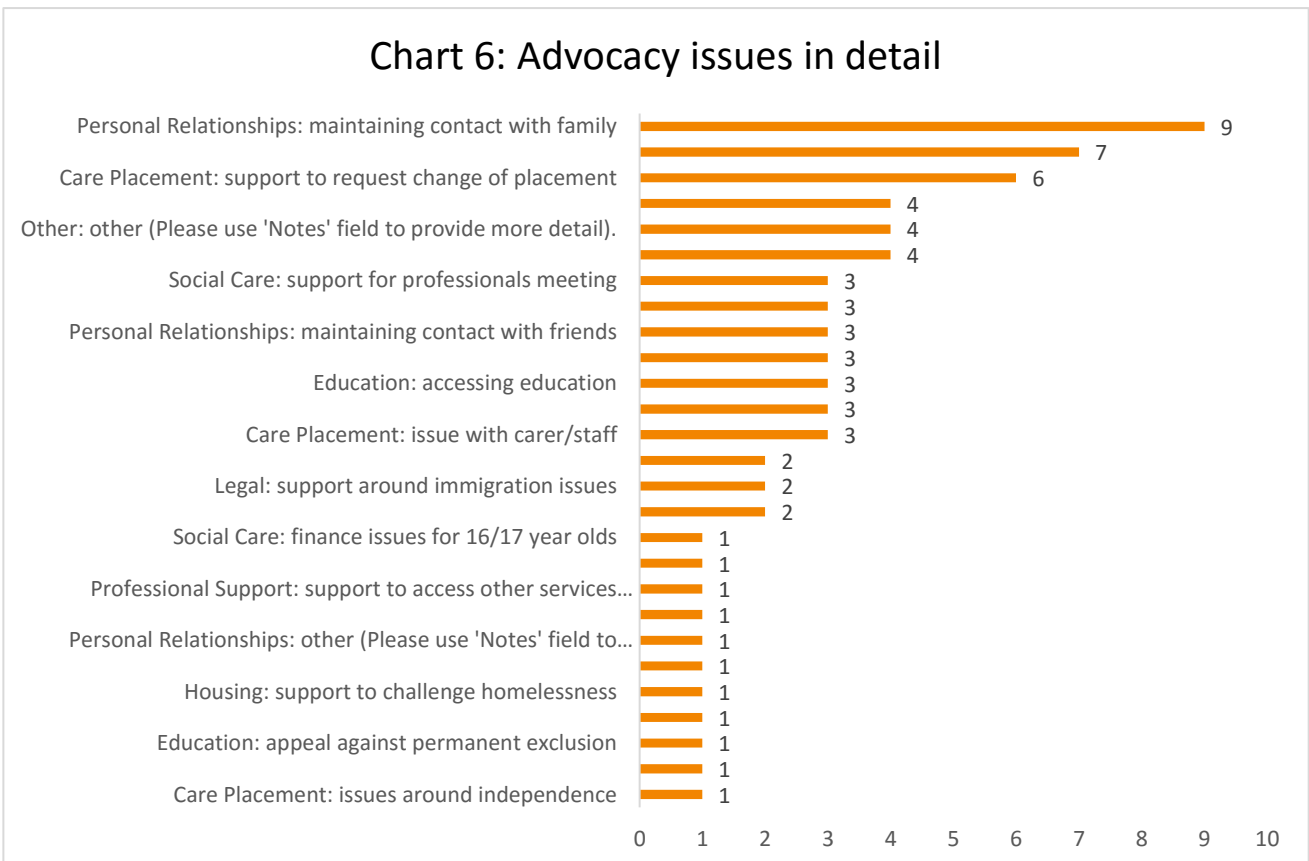
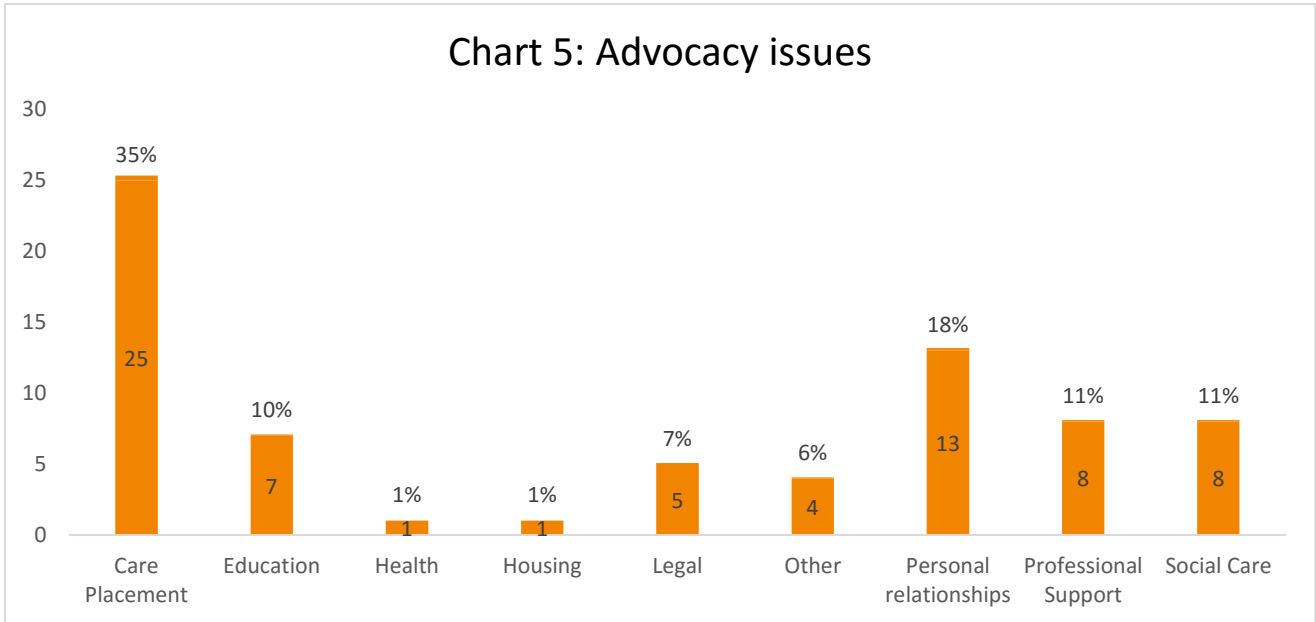


Chart 4 illustrates the number of young people supported with issue-based advocacy. The continuation of COVID measures and restrictions saw an increase in issue based



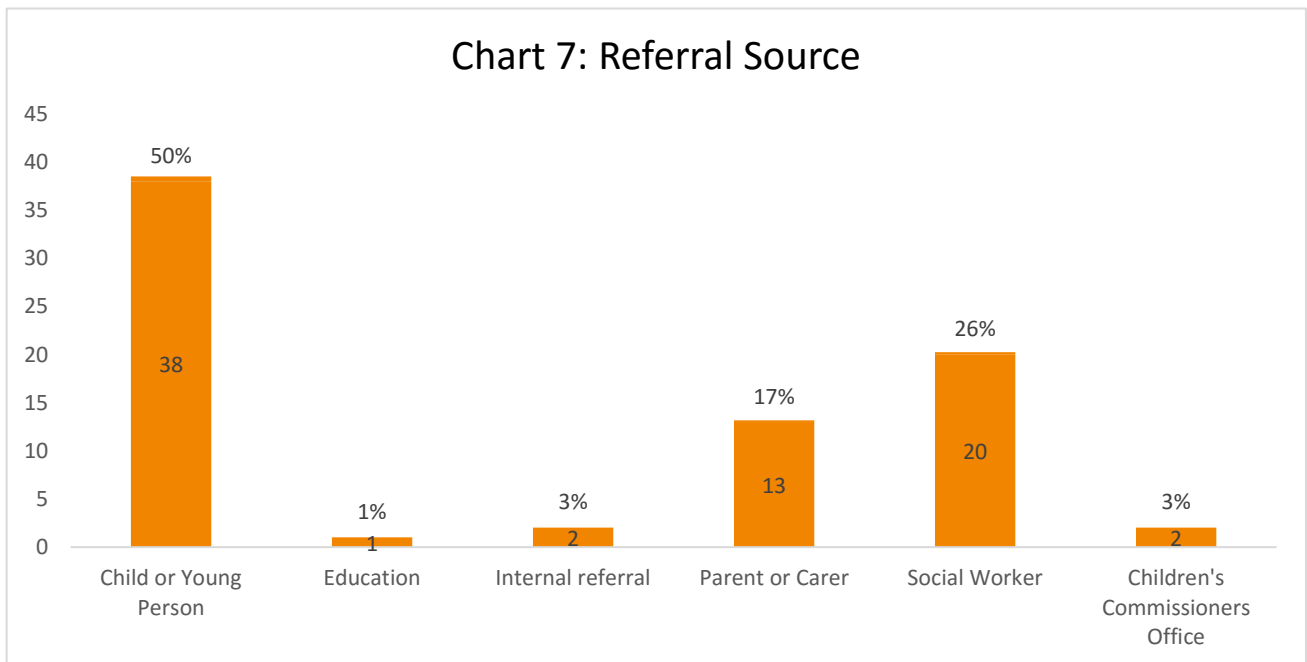
referrals in quarter three – followed by a slight decrease in the subsequent quarters.

Chart 5 shows nine broad areas that young people required advocacy support for, with the majority being in relation to *care placement*, followed by *personal relationships*. A more detailed breakdown of issues can be seen in Chart 6 (p.12) with full descriptions located in the appendix section of this report.



Referrals for Issue Based Advocacy

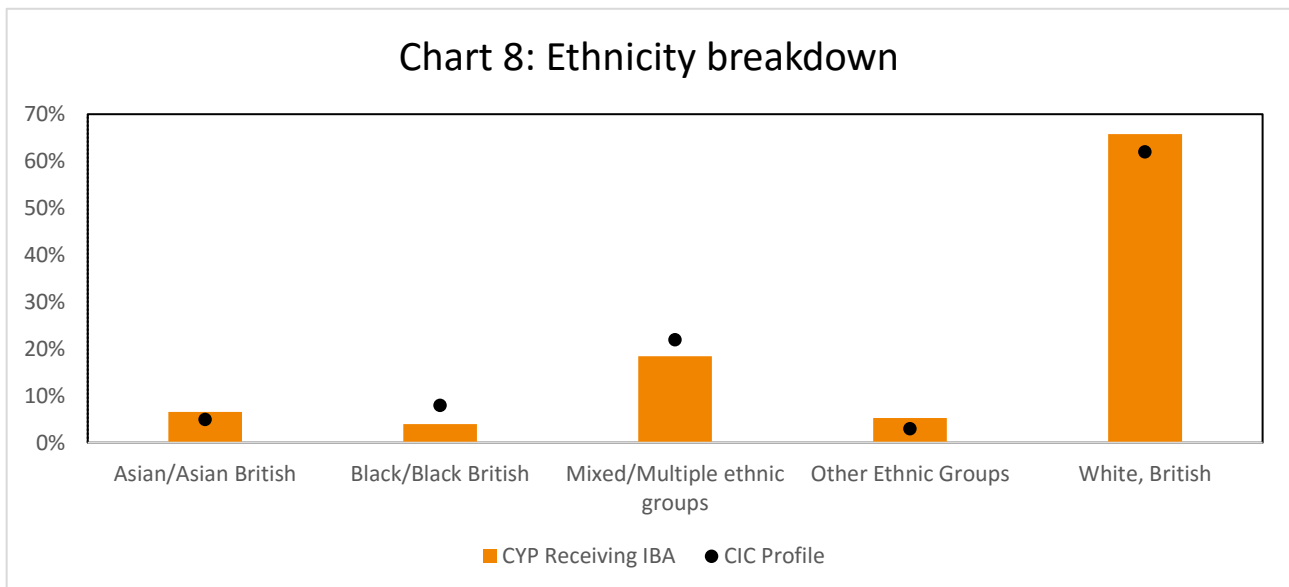
The Advocacy service receives referrals from a range of sources including young people, parents/carers, social workers and other professionals. The largest proportion of referrals at 50% have come directly from young people (last year the figure was 52%), 26% have come via social workers with 17% being made by parents or carers. Referrals from education shows the lowest rate, at 1%.



Demographic data - Ethnicity

Chart 8 shows children and young people accessing Issue Based Advocacy by ethnicity compared to the Children in Care population.

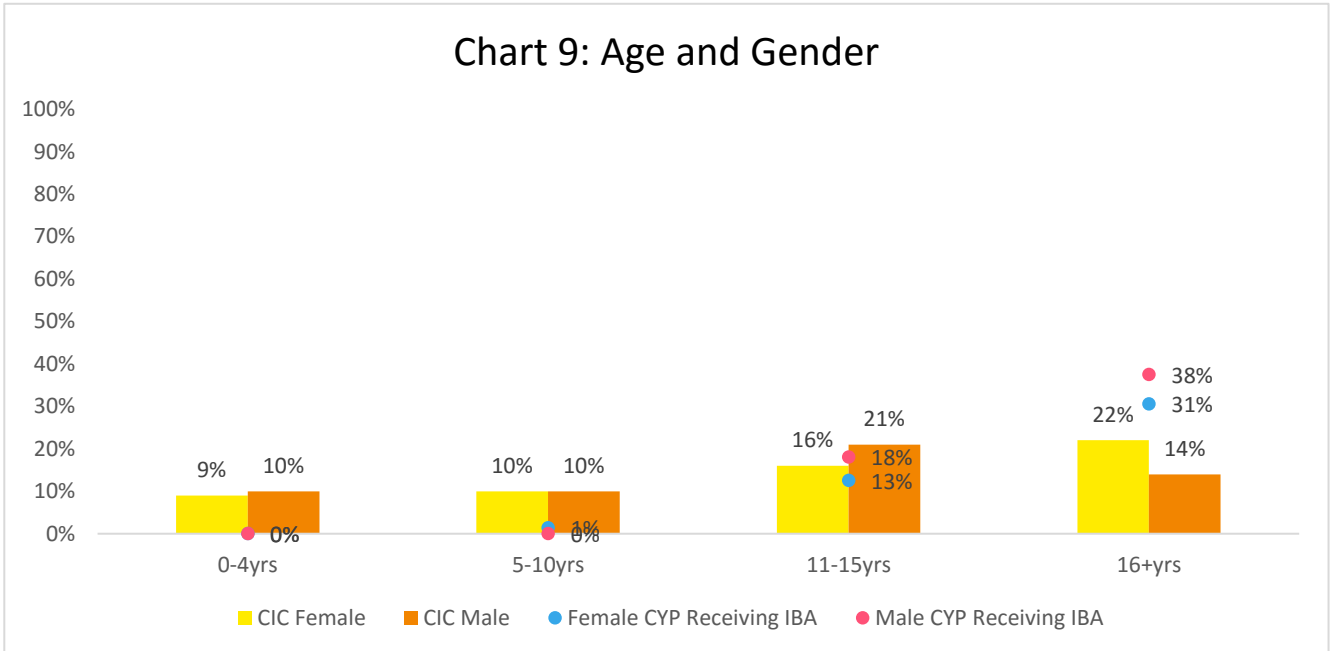
The largest group taking up advocacy at 66% were White British compared to the Children in Care (CiC) population of 62%. Black and Black British young people show 4% accessing provision – against 8% CiC population. While 18% of Mixed and Multiple Ethnic groups received advocacy support compared with a CiC population of 22%.



Demographic data - Gender and Age

When comparing the age and gender of Children in Care with those receiving Issue Based Advocacy, we can see that the 16 + group at 36% (combined females 22% and males 14%) has the highest access rate.

Males aged 11–15 years (18%) and females aged between 11-15 (13%) were the second and third largest groups to access advocacy. Whilst young people aged 5– 0 years make up 20% of the CIC profile with only 1% receiving advocacy support.

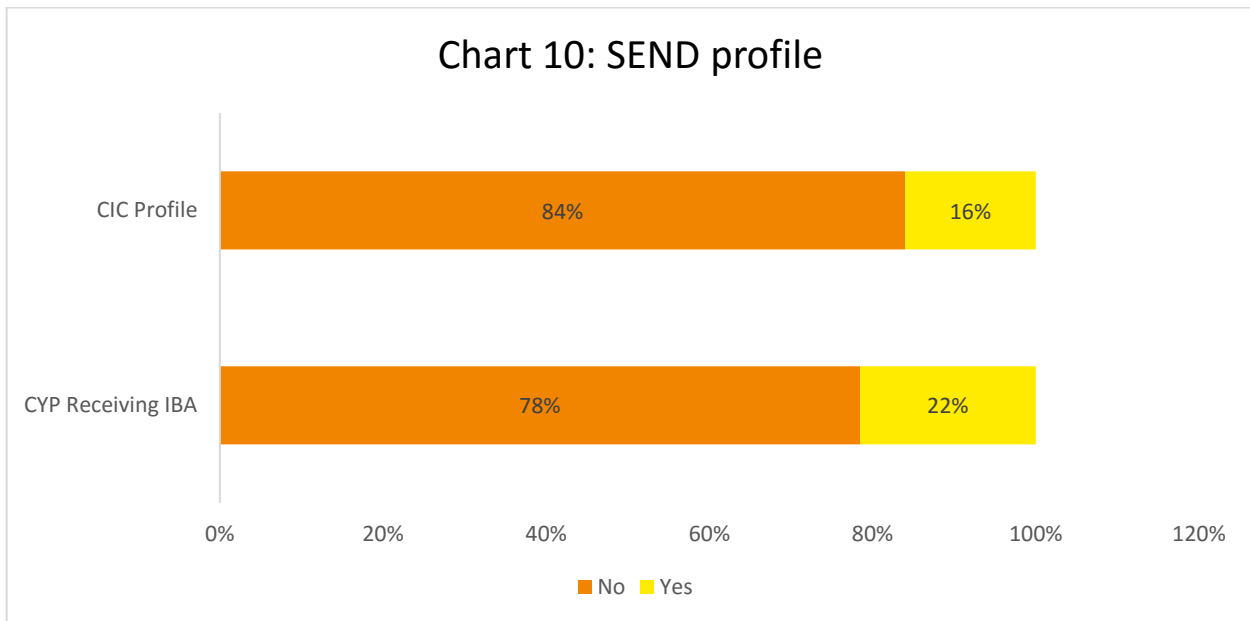


Special Needs and Disability

The Children's Society provide a dedicated advocate whose focus is to work with Children in Care who have special needs and disability. The Advocate outside of COVID restrictions undertakes regular visits to The Big House, Minster View, and Caudwell House plus a number of private residential settings who provide care for children with special needs and disability.

When appropriate the service will provide non-instructed advocacy to support children who lack capacity to make decisions. In these cases the advocate spends time getting to know the child, observing them in their environment in order to develop an understanding of how they communicate. Through this process (and through talking to parents/cares) the advocate builds up a picture of the young person's wishes and feelings.

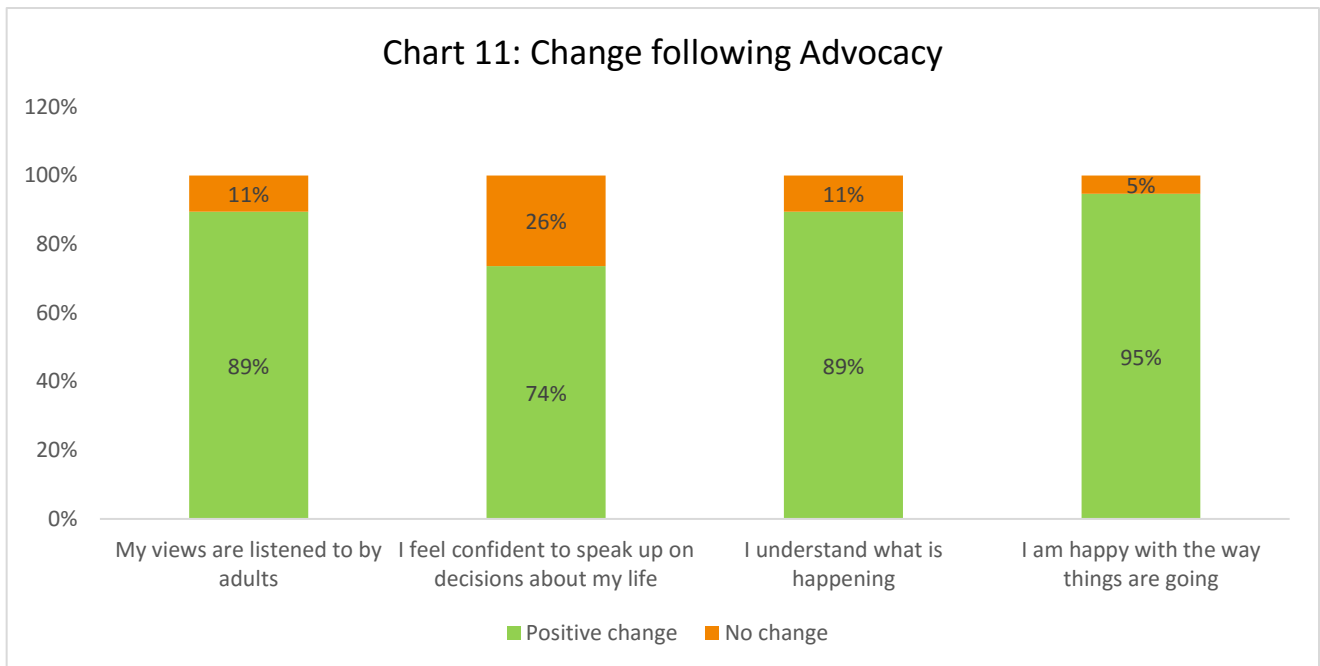
Chart 10 show that 16% of Children in Care have a recognised disability or special need. With the Advocacy service working with 22% of these children. This shows a 4% increase from 2019-20 (18%).



Children and Young People's Feedback (Issue Based Advocacy)

The service has developed an outcomes tool which is designed to track children and young people's views in relation to the resolution of issues they have raised. It needs be noted that Advocates have difficulty in obtaining feedback from young people once advocacy work has concluded. Anecdotal feedback (from advocates, professionals and young people) suggests that this is largely because young people consider that the advocacy process has finished, and therefore they feel they do not need to engage further with advocacy staff.

Chart 11 shows that 95% of respondents were happier following advocacy intervention, representing a 9% increase from last year. Additionally, 89% indicated they understood what was happening (with their care) and why. While 74% 'felt confident to say what they wanted' and 89% 'felt listened to by adults making decisions' which is a 9% increase on last year.



Conclusion

Independent advocacy and support for children and young people has been consistent and regular over the past year despite the Covid restrictions. Advocacy provision has by-and-large been provided through phone and digital platform. With advocates continuing, where required to undertake face-to-face visits when responding to children and young people's needs.

The change in delivery has enabled the service to extend its reach to residential units. And this flexible approach to delivery has been well received by young people. Evidenced through the service user feedback above.

Children and young people continue to raise issues directly (50% all referrals) with advocates, demonstrating the value of ongoing advocacy contact with residential homes. There have been a number of compliments and thanks to the advocacy service made from residential units, praising the standard of advocacy provision and the quality of relationships held with young people.

The service continues to work collaboratively with young people and professionals, ensuring children's rights and entitlements are upheld within decision making processes.

Appendix 1: Detailed breakdown of Advocacy Issues

Advocacy Issue	Count
Care placement - Support young person to express views to social care (whilst living in temporary placement) during move to another placement.	4
Care Placement: issue with carer/staff	3
Care Placement: issues around independence	1
Care Placement: other (Please use 'Notes' field to provide more detail)	3
Care Placement: support to access placement-based activities	1
Care Placement: support to challenge change of placement	7
Care Placement: support to request change of placement	6
Education: accessing education	3
Education: appeal against permanent exclusion	1
Education: other (Please use 'Notes' field to provide more detail)	3
Health: other (Please use 'Notes' field to provide more detail)	1
Housing: support to challenge homelessness	1
Legal other (Please use 'Notes' field to provide more detail)	2
Legal: support around immigration issues	2
Legal: support to challenge care order	1
Other: other (Please use 'Notes' field to provide more detail).	4
Personal Relationships: maintaining contact with family	9
Personal Relationships: maintaining contact with friends	3
Personal Relationships: other (Please use 'Notes' field to provide more detail)	1
Professional Support: issue related to social worker (Please use 'Notes' field to provide more detail)	4
Professional Support: lack of information for CYP	2
Professional Support: other (Please use 'Notes' field to provide more detail)	1
Professional Support: support to access other services (including signposting)	1
Social Care – request clothing allowance to be paid	1
Social Care: finance issues for 16/17 year olds	1
Social Care: support for other, formal meeting	3
Social Care: support for professionals meeting	3
Grand Total	72