

Choice Advocacy Good Practice Guide



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Introduction

Choice Advocacy is an independent advocacy service for adults with learning disabilities in the Bradford Metropolitan area. Our mission is **to see people with learning disabilities make their own decisions and have their rights upheld.**

In order to do this we provide advocacy for individual adults with learning disabilities, we do not advocate for families or carers of people with learning disabilities. We work on the specific issues for which a referral or request has been made, until that work is complete. Our service is both reactive (we respond to requests and referrals for the service), and proactive (ensuring the availability of advocacy is known to both potential partners and staff working with potential partners).

The purpose of advocacy is:

- To help to safeguard the rights of people with learning disabilities (partners) - both rights under policy and law, and rights as citizens.
- To empower partners to make informed decisions and to take greater control over their lives.
- To support partners to get their views heard.
- To represent the views of partners - advocates will represent these views as if they were their own when requested to do so by partners.
- To support partners in seeking resolution to issues which concern them.
- To protect partners who are particularly vulnerable.
- To feedback issues raised by partners to service providers so that services can be constantly improved.

Aims of the Guide

This Guide is intended to provide a model for Good Practice for our advocates to ensure we are providing an advocacy service that is both consistent and of a high quality.

It details the processes that Choice Advocacy uses in receiving referrals, allocating advocates and for the advocacy work itself. It then outlines some of the important principles that guide our work and how they should be put into practice in the relationship between the advocacy partner and their advocate. Guidelines on networking, the support we offer advocates, and appropriate relationships are also given.

A further aim in ensuring quality in our advocacy practice is so that we are prepared for changing legislation and policies which may involve an increasing movement towards Quality Marks and measurement tools. It is likely that there will be continued debate over the role and practice of advocacy, for example whether advocates need to become ‘professionals’. Whilst we are keen to demonstrate that we are working effectively and safely we also recognize that something unique about advocacy might be lost if advocacy services themselves do not define the ways in which they should be measured.

Whatever view is taken over these debates Choice Advocacy will be in the best position possible to contribute to the debates if it is able to show that it provides a high quality service and stays true to the principles of independent advocacy.

Terminology

In this guide:

Advocacy means the work done by an advocate and their partner on a specific issue. In other words the independent case advocacy that Choice provides. I have tried to be consistent in the use of two phrases in this guide. **Advocacy process** (described in detail below) has been used to describe the way in which the work done between the partner and their advocate goes through different stages from the decision to begin advocacy to the ending of the case. This general process will be consistent for all advocates, obviously being adapted where necessary depending on individual needs and desires. **Advocacy relationship** has been used to refer to the way in which a partner and their advocate work together. This will be much more fluid, depending on the personalities involved and the way they interact, although it should *always* follow the principles and practice set out in this guide.

Partner refers to the person with learning disabilities using our service for advocacy support. **Potential partners** refers to anyone with a learning disability, not to undermine self-advocacy or suggest dependency on our organisation but in recognition of the fact that part of our work should be proactive and involve peo-

ple with learning disabilities who do not, and may never choose to, use us for advocacy.

Advocate refers to the person employed by Choice Advocacy, either salaried or on a sessional basis, to provide this support.

Manager refers to the manager of Choice Advocacy or to those fulfilling responsibilities delegated to them by the manager, either as part of their day-to-day work or through their job description.

Service Provider refers to any provider of services to people with learning disabilities, other than independent advocacy providers. This includes the statutory sector (Social Services and the NHS), Charities (such as Mencap), and the Community and Voluntary sector.

What is 'Learning Disability'?

'Learning Disability' is a label that is given to people who learn more slowly than others. People with learning disabilities are not all the same, each person is unique and will have different abilities and different things they need support with.

Some people prefer to say learning difficulties instead of learning disabilities. For example many self-advocacy groups such as People First use the term 'learning difficulty' instead of 'learning disability' to get across the idea that learning support needs change over time: 'With good support we can become more independent and do more for ourselves.'

In the past the term 'Mental Handicap' was used but most people would now find this insulting. 'Learning Disability' is the term used by the government and statutory services.

A learning disability is not an illness or a disease, it is not possible to tell if someone has a learning disability from their appearance. Some learning disabilities are caused by inherited conditions – the most common example being Down's syndrome – and some affect people later in life. But the causes of most learning disabilities are not known. A particular condition may mean particular support is available for someone, for example The Autistic Society for people with autism, but as an advocate do not think in terms of medical labels like 'autism' or 'Down's syndrome', don't look at what doctors say is 'wrong' with people, look at people's support needs.

People with a learning disability find it harder to learn and understand than other people. As a result, some need support with everyday practical skills like getting dressed or cooking, or social skills like holding a conversation. Others with a more severe or profound learning disability may require 24-hour care, particularly those with additional physical disabilities. Many people with a learning disability, however, live independent lives. It's important to understand that people with a learning disability are individuals with their own personalities, likes and dislikes, goals and ambitions. Remember as well that we work with *adults*. There is sometimes a tendency to treat adults who find it harder to learn like children. Advocates should ensure that the language they use, including tone of voice, and approach they take is age appropriate, as well as ensuring that carers or service providers treat people with due respect as adults. A learning disability does not prevent someone from learning and achieving a lot in life, if given the right support.

Statistics

It is hard to work out exactly how many people have learning disabilities in the UK but it is believed to be about 3 in every 100 people.

There are between 230,000 and 350,000 people with severe learning disabilities

There are between 580,000 and 1,750,000 with milder learning disabilities.

Mild learning disabilities are more common among people whose families are very poor or who have other problems.

Learning disability is one of the most common forms of disability in the UK, and it is increasing.

Rights

A person with a learning disability should have the same rights as a person without a learning disability. Over the past few decades, many of these rights have been enshrined in law:

- 1970: the Education Act made the right to education a fundamental right for every child with a learning disability.
- 1990: the Community Care Act supported new housing choices and gave people with a learning disability the right to live in the community.
- 1995: the Disability Discrimination Act was the first step towards fully recognising the civil rights of people with a learning disability. It made equal opportunities a right for people with a disability.
- 1998: the Human Rights Act strengthened the civil rights of all people, including those with a learning disability.
- 2001: the Government's White Paper, "Valuing People", put individual choice at the heart of services for people with a learning disability.

Although a person with a learning disability should have the same rights as other people they are often excluded and discriminated against. Without access to the same opportunities as other people, or the services they need, people with a learning disability can find it very hard to make real choices about their lives.

There are many problems faced by people with a learning disability:

- They do not have equal access to essential services such as health, education and housing.
- They frequently face harassment or are victims of crime.
- They are discriminated against by employers.
- Their abilities and needs are often not understood by the general public, businesses, the media or national and local government.
- There is no legal framework for adults with a disability, who communicate in ways which others do not understand, to make known their choices and decisions about things that affect them.

As a result people with learning disabilities are much more likely than average to be on a low income, in poor housing, and have no job.

The Medical Model and Social Model of Disability

The traditional view of disability is called “The Medical Model of Disability”, because it sees people as medical problems. Disabled people are expected to see their impairment as their problem, something they will have to make the best of, and accept that there are many things they cannot do. Disabled people are divided into medical groups, and doctors, and other professionals, are seen as knowing best and tend to be in control of decisions to allocate resources to assist disabled people.

In the Medical Model disabled people are seen as passive receivers of services for which they should be grateful. Indeed disabled people are seen as an extra expense to companies, councils and the government. Equality for disabled people comes with a price tag.

The Social Model of Disability establishes that everyone is equal and demonstrates that it is society which erects barriers that prevent disabled people participating and restrict their opportunities. The Social Model approach to disability sees the problem as society’s barriers, rather than a person’s impairment, and empowers disabled people to challenge society to remove those barriers.

The Social model of Disability doesn’t provide all the answers. Impairments can still affect people and limit what they may be able to do. But the great strength of the Social Model is that it recognises that environmental barriers and the prejudice and discrimination people experience can be just as disabling as actual impairments, if not more so.

Whilst recent legislation and government policies have taken many of the elements of the Social Model on board, as an advocate you will come across many examples of a Medical Model approach.

One further model which advocates should take into account in their work is the Charity Model. This is where disabled people are portrayed as tragic objects of pity, who should gratefully receive any help that others give them. As an advocate see your job not as ‘helping people’ but as being an ally in securing their rights.

Who is it for?

Partners

People using Choice Advocacy can use this guide so that they know what they can expect from the advocacy service we provide and how we will treat them. The guide can be used in the work they do with their advocate to enable them to take as much control of the process as possible.

Advocates

Advocates should see this as a guide to how we think advocacy should operate. It is not a set of prescriptive rules on everything they do but a guide to help them develop their own individual practice with their advocacy partner whilst maintaining the principles of independent advocacy. It can also be used to make the advocate's role clear to other organisations and individuals that the advocate may work with to avoid any misunderstandings.

Managers

Managers can use this guide to ensure best advocacy practice is followed throughout the organisation. It can be used to clarify the roles and responsibilities of people in the organisation. It can also be used with potential funders to demonstrate the organisation's commitment to a quality service.

Management Committee

This guide should provide the Management Committee with a means of ensuring that the organisation is providing a quality service and to clarify roles and responsibilities.

Other workers for Choice Advocacy

As with the Manager and Management Committee other people working for Choice Advocacy can use this guide to clarify roles and responsibilities. It should also be a good way of understanding the values and practice of independent advocacy.

Other Organisations/Potential Funders

The value of the guide for other organisations is that it provides a clear illustration of the work Choice Advocacy does. Where our work brings us into contact with service providers and statutory organisations it can provide the basis for a protocol, demonstrating our commitment to a quality service. When dealing with potential funding organisations it can also be used to demonstrate such a commitment.

The Referral Process

On page 15 there is a flow chart showing the referral process from initial referral to the decision to begin advocacy. This also gives timescales for when key stages should be reached.

Initial Referral

Initial referrals can come from a number of sources. We encourage self-referrals and as more proactive outreach work is done these are expected to increase. However anyone can refer someone to our service: social workers, key workers, concerned friends and relatives are all potential referrers. As our advocates become more active in the places and organizations that people with learning disabilities access they should be prepared to refer potential partners for advocacy, particularly those people who would not be likely to refer themselves or be referred by others. Whether initial contact is made by telephone, e-mail, or in writing a written referral form will be filled out, either by the referrer or by staff at Choice Advocacy taking the referral (in the case of a telephone conversation) which will be taken into the Monday allocation meeting. Where the advocacy issue is of particular urgency allocation of an advocate may take place immediately.

Monday allocation meeting

We meet every Monday morning to look at referrals and allocate advocates to each partner. As our workload increases, this meeting will also involve prioritizing, and placing people on a waiting list if necessary. On pages 16-19 there is the priority assessment form and guidance notes.

People such as Social workers, Key workers, Community Nurses *can* advocate for their clients, in fact it is part of their job. What they cannot provide is *independent* advocacy because of their conflict of interest. In determining priorities we will consider how relevant this conflict of interest is to the particular issue someone is being referred for.

Similarly where the issue is around a complaint about the NHS we may suggest referring on to the Independent Complaints Advocacy Service (ICAS) or the Patient Advice and Liaison Service (PALS). In these cases we would always follow up the referral to ensure that further advocacy is not needed.

Due to misunderstandings about the nature of advocacy we also receive referrals for people who do not need an advocate but a support worker, for help with reading letters for example, or specialist help, for example counseling. We would not allocate an advocate in these cases (we would of course allocate an advocate to support someone to get the support they need).

Initial meeting(s)

The initial meeting that an advocate has with their partner should be used to establish their relationship and ensure that the partner is given some important information. The advocate should ensure that their partner knows:

- That Choice Advocacy is an **independent** organization.
- That advocacy is **free**.
- That anything they discuss together is **confidential**, with the important exception of abuse or potential abuse.
- That they are in **control** of the advocacy relationship and how it develops.

The initial meeting should also be used so that the individual needs of the partner are identified: what communication style do they use; who are the significant people in their life (and does the partner want them to know that they have an advocate); are there any religious or cultural factors to take into account; how important is the partner's gender, sexuality, ethnicity to them.

Obviously some of these are quite complex questions or concepts. The initial meeting may need a number of follow up meetings in order to establish the basis for the advocacy relationship.

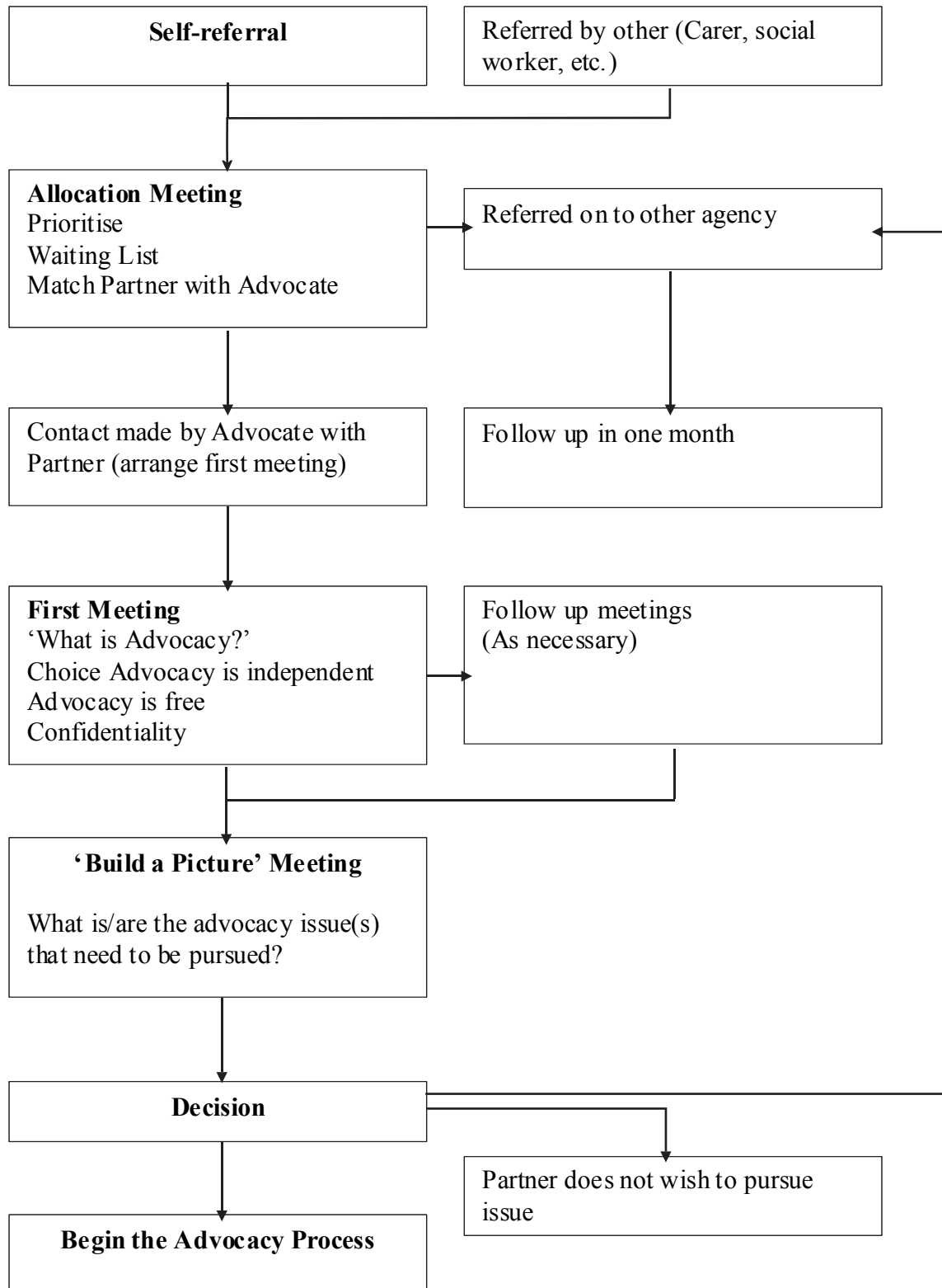
Build a Picture Meeting

In this meeting the partner and their advocate should identify the advocacy issues that need to be addressed. At the Choice Advocacy office we have a number of symbols, pictures, and other means of communication which advocates can use to help their partner 'build a picture' of their life, the problems they face, the wishes they have, and their hopes (and fears) for the future. Specific training can be given to advocates to assist them in the 'Build a Picture' meeting but the idea is to take a large piece of paper, put a picture of the partner in the middle of it and then discuss with them, using whichever means that are appropriate, the issues in their life, representing these on the paper. The result should be a diagram of all the issues facing the partner but with them at the centre of things. This can then be used to make a plan of what issues need to be addressed in the advocacy partnership and how to go about it.

Decision

Following this series of meetings the advocacy partner will make the decision over whether to begin the advocacy process.

Referral Process Flow Chart



Priority Assessment

1.1	Does the person have a learning disability?	Yes/No		
1.2	Do they live in the Bradford District?	Yes/No		
1.3	Are they over 18?	Yes/No		
2.1	Abusive Situation/Adult Protection	5		
2.2	Crisis housing	5		
2.3	Living with Older Carer	5		
2.4	Mental Health	5		
2.5	High Support Needs	5		
3.1	Other Crisis issue	01-May		
3.2	Anyone else to advocate	01-May		
3.2	Advocate left with more work to do	0-5		
4.1	Trust/respect: needs building up over time	0,1,2		
4.2	Information: needs to be made clear and understandable	0,1,2		
4.3	Voice: help to have their say in things	0,1,2		
4.4	Choice: help to make own choices	0,1,2		
4.5	Other: please describe	0,1,2		
4.6			Total	
5.1	Assessment Summary:			
5.2	Name(s) of Assessor:	Date of Assessment:		
5.3	Advocate available:			
5.4	Action taken:	Who is responsible:		

Section 1

Questions 1.1, 1.2, and 1.3 should be straight forward and must be answered yes if we are to partner someone with an advocate. Remember it is whether **we** consider the person to have a learning disability **not** whether they have been assessed as such by the PCT.

Section 2

Again this section should be fairly straight forward. For questions 2.1, 2.1, and 2.3 you should be able to give a yes or no answer and if the answer is yes then automatically allocate 5 points. So where someone has been referred to Adult Protection because of an abusive situation, or the referral is because of an abusive situation which requires referral to the Adult Protection team, allocate 5 points. 'Crisis Housing' refers to a situation where someone **has** to move home immediately or where they are presently homeless or at imminent risk of being homeless. Questions 2.4 and 2.5 may require consultation with the person themselves, the referrer, or colleagues at Choice Advocacy if you are unsure, however the outcome should be a yes or no answer.

Section 3

In this section you should allocate up to 5 points for each question depending on your assessment.

Question 3.1 allows for you to allocate up to 5 points depending on your assessment of the situation with the following as a guide:

- 5: The person is at an imminent risk physically and/or emotionally
- 4: It is likely that without advocacy the person will be at risk in the near future
- 3: The person may not be in danger physically or emotionally but their rights are being disregarded **and** the situation has a deadline in the near future
- 2: The person's wishes are not being listened to and the situation has a deadline
- 1: The person's wishes are not being listened to but there is no deadline to the situation.

For Question 3.2 you should assess whether or not the person has other people involved in their life who can advocate for them and how independent they are with the following as a guide:

- 5: The only other people involved are the problem
- 4: There are concerned others but they have a direct conflict of interest in the situation

3: There are concerned others but they are paid to be involved/have a conflict of interest

2: There are concerned others who will act in the persons best interests and are independent

1: There are concerned others who are independent and will defend the persons rights.

If this is a new referral give 0 points for Question 3.3. This is so that we can give priority to people whose advocacy partnership has broken down for whatever reason. Points should be allocated here depending on the work left to do.

Section 4

The questions in section 4 are about what the person needs from the advocacy relationship. For example if they have a clear idea of what they want but no-one is listening to them you may want to give 0 points for Question 4.4 but 2 points for Question 4.3. Where someone needs some support, for example in understanding information (Question 4.2), but this is not their main need from the advocacy relationship you can give 1 point.

Total

The total points will be out of a maximum of 50.

Section 5

Assessment Summary

In this section you can give an overall summing up of the person's advocacy needs and how urgent you feel they are. You should also note whether the gender of advocate is an issue and any cultural/language needs. If you believe that the total score is misrepresentative of the actual priority that should be given note this here and discuss it with the manger before the allocation meeting on Monday morning.

Notes should be taken in the remaining sections of which advocate would be most appropriate for the person and whether they are available immediately or not. The **Action taken** section should be used to indicate whether the person will be put on a waiting list; allocated an advocate immediately; or referred on to another agency. The worker responsible for following up the action (informing the person of the outcome, when they will be seeing their advocate, monitoring any work done if we refer someone on to another agency) should be noted here.

The Advocacy Process

The advocate will already have been following the principles and practice laid out in this guide in the meetings leading up to the decision to begin the advocacy process. There are some important factors to bear in mind as the relationship between the partner and their advocate develops which should be briefly noted, with reference to more detailed sections of this guide where necessary.

The ultimate goal of advocacy should be to enable partners to grow towards advocating for themselves wherever possible. In effect the advocate is working to make themselves unnecessary. An advocate should always represent the views of their partner openly, honestly and as if they were their own. This relates to the principles of **Empowerment** and **Putting People First**.

It is vital that the advocate understands, and makes their partner aware of, the boundaries of their advocacy relationship. This should be practical, what is the advocates job and what is not, and ethical, maintaining appropriate relationships with their partner and other staff. The section **Appropriate Relationships** should be referred to for guidance.

Effective **Networking** is particularly useful for advocates to find out information for their partner as well as helping them to feel part of the wider advocacy movement.

Wherever possible the advocate and partner should try to resolve problems at the lowest appropriate level in an organization and in the least adversarial way. This is a question of effectiveness (**Working Well**). Where problems or issues *can* be sorted out in this way then it is the quickest and most immediately effective method of doing so. This does *not* mean that it is *always* the most effective way of doing so. **Tenacity** on the advocate's part, in their pursuit of answers to their partner's questions and solutions to their problems, is also vital.

There are two tasks in this process for the advocate.

Firstly, to facilitate their partner as they move through five basic stages of the advocacy process:

1. Regaining the right/capacity to make a Choice.
2. Exploring Options.
3. Making a Choice.
4. Finding a Voice.
5. Getting a Response.

Secondly, the advocate is there to redress the power imbalance. One way of understanding this is to think of it as adding weight, to their partner's clout, at each stage of the process.

Advocacy Partnership Meetings

The partner and their advocate will need to decide on the venue and style of their meetings that enables the partner to take as much control as possible.

Issues around the venue that should be taken into account are:

- **Comfort:** It will be very difficult to discuss issues if you are physically uncomfortable with the venue (toilets, refreshments, etc need to be available, noise levels should be at a minimum). It is virtually impossible if you are emotionally uncomfortable – the meeting cannot be at a place that the partner has an advocacy issue with that needs discussing.
- **Privacy:** Obviously to work to the principle of confidentiality the meeting room has to not only *be* private, but also *felt to be* private by the partner.
- **Accessibility:** Physical accessibility is crucial, you both need to be able to get to the venue. Advocates should also bear in mind ‘cultural’ accessibility, are there non-physical factors which may prevent their partner accessing certain places? Remember the partner is *the* expert on their own life.

The style of meeting also needs to be thought about:

- **One-to-one or with support:** It is always preferable for the partner to meet their advocate on a one-to-one basis. However this is the partner’s decision first and foremost and may also depend on factors identified in the initial meeting such as communication style.
- **Length:** Will the meetings work best if they are short or does the partner prefer a longer meeting?
- **Frequency:** If you are having shorter meetings then you may need to meet more than once a week. Even with longer meetings you need to make sure that you meet as often as necessary for the partner to be in control of the process.

Examples

Other Meetings

Beforehand

Where meetings are called, either by the partner and advocate or service providers involved in the partner’s life, the partner and their advocate will need to work out a strategy for approaching the meetings. They need to make sure that the meetings are held at a time and a place that is convenient for *them*. They should also ensure that they receive a copy of the agenda beforehand so that they can prepare for the issues which will come up and add any items that they feel should be discussed.

At the Meeting

Whilst it is natural for an advocate to want to put forward the best possible argument on their partners behalf they should always bear in mind that part of the ad-

vocacy process is to work towards self-advocacy. Some suggestions (not exhaustive) for a strategy for these meetings would be:

- For the partner to attend the meetings alone, using the advocate to prepare what they want to say and how to present it beforehand.
- For the partner to take the lead in the meetings, with the advocate backing them up when necessary. Perhaps 'cues' could be worked out beforehand for when the partner wishes the advocate to: comment; present evidence of the work they have done; explain something in more detail.
- For the partner or advocate to take the lead on different items on the agenda.
- For the partner and advocate to work out beforehand what the partner wants to say and write it down (in a format the partner is happy with).
- This could then either be read out at the meeting (ideally by the partner) or presented as a written report.
- For the advocate to take the lead in the meetings, with the partner commenting when they are comfortable doing so.
- For the advocate to attend the meetings alone but with a clear idea of what the partner wants and representing their interests as if they were their own.

It can be seen that this represents a scale from self-advocacy at the top to representation of the partner's views at the bottom. This is not to imply that there is anything wrong with the approaches at the lower end of the scale, it is for the partner to decide which strategy they want to use. However the advocate should also be thinking of ways in which they can involve their partner more and more in the advocacy process.

Follow-Up

After the meeting the partner and advocate should meet to discuss how it went and follow up any action they agreed on in the meeting. They should also make sure that they receive copies of the minutes and *check them*: have the things they said been minuted accurately; have all the action points been noted, with the name of the person responsible. Follow up what people said they would do: are they doing it?

Reporting back to partner

As a matter of course advocates should report back to their partner any: information they receive; conversations they have; research they have done; which is related to their case. They should refuse to accept any information from third parties if they are told they cannot share it with their partner and make it clear to all others involved that they will share all information with their partner. It is the partner's decision as to how this is done: whether by a telephone call after every new piece of information or at their regular meetings. Advocates should always

bear in mind that part of the advocacy relationship is for the partner to be as in control as possible.

Partner changing his/her mind

Any change in the advocacy relationship initiated by the partner should be welcomed by the advocate, as it shows that they are taking control of their advocacy. When a lot of work has been put into resolving a problem it is natural to feel frustrated by a change of mind, or believe that the work done has been in vain. Advocates may want to seek support or guidance from other advocates or the Manager in these cases (see **Support**) but should never seek to influence their partner to change their mind back.

Ending the Advocacy Relationship

Ideally the advocacy relationship will come to an end when the partner feels that the issues identified at the start of the process have been resolved to their satisfaction. Sometimes the partner may wish to end the relationship despite the issues being unresolved. As with all other aspects of the advocacy relationship this is the partner's decision. If either the advocate or the partner feels strongly that they cannot work together, or a conflict of interest arises on the advocate's side, then the Manager should be informed immediately and a new advocate allocated as soon as possible. At the end of the advocacy process the advocate should inform their partner that the case is over (in a final meeting and followed up in writing enclosing an Evaluation form) and make sure that they know that they can refer themselves for advocacy at any time in the future. At this final meeting the advocate should encourage any feedback from their partner over how the advocacy relationship and process went and ask them if they would be willing to be interviewed by a member of the Make People Happy group for our evaluation procedures.

Creating a Case File.

1. Creating a Referral Form

- Go into Cases
- Go into Partner Records
- Go into Forms
- Go into referral form
- Create a new form by clicking on ►* at the bottom of the form
- Click in Active/ Closed box
- Fill in the form
- Close the form – this will automatically save the information

2. Filling in case timesheets

- Go into Cases
- Go into Partner Records
- Go into Forms
- Go into case timesheet form
- Create a new form by clicking on ►* at the bottom of the form
- Fill in the form
- Hit tab key to move through the form, when complete hit tab once more and the information will automatically be saved.

3. Creating a query

- Go into Cases
- Go into Partner Records
- Go into Queries
- Click on New at the top of the window
- Select Simple Query Wizard from the list and click OK
- Scroll to the top of the options in the drop down list below the title Table/Queries
- Select Table: Case_timesheets then click on the button labelled >>
- Click on Next
- Click on Next again

- Fill in the box titled ‘What title do you want for your query?’ with the partner’s surname, name and case code
- Click on Finish
- Click on the button marked Design (showing a picture of a protractor, pencil and ruler) located just below File
- A screen will appear with a table as shown (in part) below: fill in the cell highlighted in red with the case code, i.e. 76-DB

Field:	Date	RecordNumber	CaseNo	CaseWorker	ActionType
Table:	Case_timesheets	Case_timesheets	Case_timesheets	Case_timesheets	Case_timesheets
Sort:					
Show:					
Crite- or:					

- Click on the Run, a button showing a large red exclamation mark, situated below Help on the main tool bar.

4. Creating a report

- Go into Cases
- Go into Partner Records
- Go into Reports
- Click on New, at the top of the window
- Scroll through the drop down menu to find the partner you want to create a report for, select and then click OK
- This will bring up a window labelled Report 1; move this window to the right of the screen.
- In the Reports window scroll across to Z/REPORT TEMPLATE and open it.
- Click on the button marked Design (showing a picture of a protractor, pencil and ruler) located just below File
- Highlight the whole of the ‘report header’ in Z/REPORT TEMPLATE, copy and then paste into the ‘report header’ in Report 1
- Do the same procedure for the contents of ‘detail’ and then for ‘footer’
- Put the Partner’s surname, name and code into the header
- Save as - Surname, name, code

5. Creating a Partner folder

- Go into Cases
- Right click anywhere on the Cases window
- Select new and then folder
- Name the folder with the partner's code

6. Creating a Paper File

- Get a suspension file from the cupboard and write or print out a label with the partner's surname, name and code. Get a cardboard file and label the spine with the partner's name and surname

7. Creating a Cover Sheet

- Go into Cases
- Go into Casefile forms
- Open cover sheet and fill in
- Print out a copy to put into the partner's paper file
- Save the sheet into the partner's folder

8. Creating a Contact Sheet

- Go into Cases
- Go into Casefile forms
- Open contact sheet and fill in
- Print out a copy to put into the partner's paper file
- Save the sheet into the partner's folder

Advocacy Principles

In the following section five principles are set out with guidance on how to act on them in the advocacy process. It should be noted that these principles were identified as the most important, from a range of options from different advocacy organizations and literature, by the Make People Happy Group. They are therefore the principles identified by our potential partners as being most important in the way people treat them.

Confidentiality

All discussions between a partner and an advocate should be treated confidentially. Confidentiality should only be broken when an advocate has very good reasons to believe that their advocacy partner is in imminent danger or at significant risk of harm to him/herself or others. There must be clarity about conditions under which confidentiality will be breached and procedures for doing so. Choice Advocacy's Confidentiality policy details such conditions and procedures and is available to all concerned.

Partners Should...

- Know that their relationship with their advocate is confidential.
- Be able to access information about their case.
- Be told about the exceptions to confidentiality.
- Be given accessible information to refer to about confidentiality and the exceptions to it.

Advocates should...

- Ensure that their partner has been given the information about confidentiality.
- Meet their partner in a place where they can discuss issues in privacy.
- Never disclose confidential information about their partner without their permission.
- Understand the exceptions to this principle and be given support if they believe they may have to breach confidentiality.
- Know the Adult Protection procedure.
- Ensure that they do not inadvertently breach confidentiality in meetings or telephone conversations by using identifiable information about an individual.

The Manager should...

- Establish policies for Confidentiality and Data Protection.
- Ensure that partners have been told about our Confidentiality policy.
- Ensure that advocates are trained on the Confidentiality policy and know what to do if they believe confidentiality may have to be breached.
- Maintain a record keeping system, in both physical and electronic form that is accurate and secure.
- Enable partners to access information about their case.

The Management Committee should...

- Ensure that the principle of confidentiality is upheld in policies, in practice, and in publicising Choice Advocacy.
- Consider disciplinary procedures where someone has intentionally disregarded Confidentiality policy.

Empowerment

The first thing advocates need to do is to listen. The advocate should then, either support their partner to speak for themselves, or (if the partner is not able or willing to do this) represent the partner's views as if they were their own. The ultimate goal of advocacy should be to enable partners to grow towards advocating for themselves wherever possible. Advocates must always support the partner to be heard and work towards not being needed.

Partners Should...

- Be encouraged to develop the skills to work towards self-advocacy.
- Feel that they are in control of the advocate's actions.

Advocates should...

- Develop the advocacy partnership so that their partner is involved directly in making decisions about their advocacy, whether these are small (choosing the venue for meetings) or large (moving house).
- Give their partner every opportunity to change their mind, redirect the support, and/or take over at any time.
- Recognize that they may be an influence on their partner and work to avoid such influence.
- Not judge partners. This means that advocates must listen to and hear their partner's report as their truth and therefore valid.
- Never act without their partner's consent or instruction. The only exception being where serious harm is likely.

The Manager should...

- Provide support and training to enable advocates to work to this principle.
- Ensure that the organisation acts in such a way that does not prevent partners changing their agenda.

The Management Committee should...

- Ensure that any targets set for monitoring/evaluation purposes are flexible enough to take into account the changing agenda of partners.
- Be receptive to ideas from partners on how to improve the organisation.
- Promote positive images of people with learning disabilities.

Putting People First

Advocates must put their partner first, they must be independent. This means that they must not work for, or be associated with, any organisation, services or people involved with or affecting the partner's life. This is to make sure an advocate can be free to express the partner's views without compromise. They should always treat their partner with respect and decency.

Partners Should...

- Expect to be treated with respect.
- Be aware of how and when the advocacy partnership will end.

Advocates should...

- Be accountable to their partner, before anyone else.
- Identify with their partner, representing their partner's views as if they were their own when necessary.
- Never promise anything which is beyond their control.
- Not give half-truths to their partner.
- Always share all information that they have with their partner.
- Make it clear to all other parties that their first loyalty is to their partner.
- Inform the Manager of any potential conflicts of interest.

The Manager should...

- Find the most suitable advocate for the partner, and sympathetically consider requests for a change of advocate.
- Monitor partner's views at the end of the advocacy partnership.
- Ensure that partners, and potential partners, are involved in the monitoring and evaluation of advocates work.

The Management Committee should...

- Include people with personal experience of advocacy.
- Ensure that advocates are able to provide independent advocacy by maintaining the independence of the organisation.

Equal and Fair

Advocates should recognise the diversity of partners eligible to use advocacy services, and ensure no-one is prevented from accessing the service because of a difference in language, culture, disability or capacity. Advocacy services must be free and must not discriminate on grounds of poverty or wealth. Choice Advocacy has an Equal Opportunities Policy which is available to all concerned.

Partners Should...

- Know that the service is free.
- Know how seriously we take equal opportunities and accessibility.
- Know that they can request that any access needs are met.

Advocates should...

- Acquire knowledge of the cultural, religious, social, and ethnic background of their partner and any additional support needs they have.
- Take all necessary steps (including the use of an interpreter or alternate communication system) to communicate with people who are unable to communicate verbally or in the language of the advocate.
- Ensure that if an interpreter does need to be used that they respect the principle of **Confidentiality**.

The Manager should...

- Ensure that the organisation is proactive in reaching potential partners who may not ask for advocacy themselves.
- Implement the Equal Opportunities Policy and ensure partners, advocates, and other staff are aware of it.
- Ensure that referral criteria give equal access to all potential partners.
- Aim to develop a team of advocates, which includes bilingual advocates and people with particular skills, for example communicating with people with High Support Needs.

The Management Committee should...

- Ensure that the Equal Opportunities Policy is implemented and is consistent not only with current legislation but best practice above and beyond current legislation.
- Ensure all activities undertaken by the organisation, whether formal or informal, are free from unfair discrimination.

Justice

As well as reacting to referrals and the wishes of their partner advocacy should also involve a proactive side. Outreach work should be undertaken to ensure that we are reaching potential partners who are most at risk, because they cannot or would not refer themselves for advocacy or be referred by others. Advocates should recognise the importance of their visible presence to potential partners and be prepared to initiate the referral process for potential partners. Whilst always following their partner's agenda they should not ignore basic human rights and initiate action on this basis.

Partners Should...

- Be supported to understand their rights.
- Be encouraged to stand up for their rights and needs.

Advocates Should...

- Initiate action based on basic human rights, needs, and decency.
- Initiate action based on, but not limited to, standards of service of any organisation their partner uses.
- Recognise that the lack of recognition of their rights by a partner is not a reason for these rights to be ignored.
- Recognise that partners need to be socially included to such an extent that other people would defend their rights if they were treated unfairly.

The Manager Should...

- Ensure that potential partners are made aware of their right to have an advocate.
- Ensure that outreach work is undertaken to reach individuals and groups who are at particular risk of having their rights ignored.

The Management Committee Should...

- Ensure that the organisation is proactive in reaching potential partners.
- Ensure that the organisation is visible to the local community, influencing public opinion on the rights of people with learning disabilities.

Advocacy Practice

A further principle identified by the Make People Happy Group was the need for advocates to work well. This has been broken down into five areas in the next section which advocates should be guided by in their work.

Working Well

It is important that the work we do is done as efficiently as possible for a number of reasons. Most importantly because the partners who come to us for advocacy will be in crisis and need to know that we are respecting them and the urgency of the issues they are dealing with. Many of our partners will not have experienced this from other organisations that they come into contact with. Secondly we are a small organisation with limited resources; therefore the resources we do have need to be used in the most effective way possible.

Partners Should...

- Expect their advocate to work efficiently on their behalf.
- Expect advocates to show their commitment by keeping appointments and doing what they have been asked to do.

Advocates should...

- Represent their partner competently, responsibly, and in a timely manner.
- Have a working knowledge of: Rights in health and social care; Core policy and legislation; Human rights legislation; Disability rights.
- Know how to access information and advice.
- Use the least adversarial manner that is effective.
- Attempt to solve problems at the lowest level of an organisation that is effective.
- Strive to improve own skills, knowledge, practice.
- Attend supervision / seek support as agreed with the Manager.
- Maintain and use systems for referrals, case management and data collection.

The Manager should...

- Provide Advocates with a Code of Practice with structured support.
- Develop and maintain a library of resources and contacts and have links with other advocacy services, locally and nationally.
- Provide regular supervision, support and training for all workers.
- Ensure efficient systems are in place for referrals, 'case management'; follow up, record keeping and collecting data.

The Management Committee should...

- Understand their roles in supporting the manager and contributing to the effectiveness of the service.

Tenacity

A particularly important aspect of effective advocacy work is tenacity. Advocates should be prepared to follow their partner's interests with rigour and assertiveness.

Partners Should...

- Know that their advocate will pursue their agenda tenaciously.

Advocates Should...

- Not allow themselves to be 'fobbed off': get times and dates of *when* someone will be available if you are having trouble contacting them; speak to line managers if you are told 'it is not my responsibility' and get written confirmation of *who* is responsible.
- Make anyone responsible for action give a date for when they will do it and contact them afterwards to make sure they have.
- Use all forms of communication necessary. Remember: e-mails are quick but easy to ignore; verbal conversations (including telephone) are immediate but hard to record as objective evidence for what someone agreed to; a written letter with a signed reply offers maximum accountability but is time-consuming.
- Not allow others to compromise their loyalty to their partner: arguments around 'best interests' and/or 'limited resources' are examples of this.

The Manager Should...

- Ensure that advocates receive supervision at regular intervals so that progress, and any obstacles, can be discussed.
- Provide information on the management structure of statutory organisations so advocates know where responsibilities lie.

The Management Committee Should...

- Monitor progress made by advocates.

Safeguarding

Safeguarding is one of the most important ways in which advocacy principles are put into practice. This involves both the safeguarding of peoples rights and also their physical and emotional safety. It is vital therefore that everyone involved with Choice Advocacy has confidence in our commitment to their well-being. We have a number of Health and Safety policies which advocates should be aware of, in particular the Lone Working policy.

Partners should...

- Know that advocates are checked.
- Understand that they do not have to do anything that makes them feel unsafe.
- Feel that their safety is taken seriously.

Advocates should...

- Be aware of health and safety policies.
- Identify any areas of their work that require a risk assessment and complete these with the manager.
- Recognize the importance of protecting partners from potential abuse.
- Recognize their own limitations and the potential harm that they can do (never promise that something *will* happen that you are not in control of).
- Be aware that they do not have to do anything that makes them feel unsafe.

The Manager should...

- Ensure that potential advocates have to provide references and CRB checks and that these are taken up.
- Provide training for advocates and identify people who are unsuitable.
- Ensure that initial training highlights the importance of safeguarding people against abuse.
- Have clear procedures to deal with people unsuitable to continue as advocates.
- Work with advocates to identify and complete any risk assessments that may be necessary for the work they do.
- Promote the health and safety policies to all workers.

The Management Committee should...

- Ensure that insurance is appropriate and covers all who participate in the service.
- Ensure that working conditions meet the legal requirements for health and safety at work.

Accountability

It is vital that as an organisation Choice Advocacy is accountable to our partners. Regular monitoring by the advocate of how a partner feels about how the advocacy is developing should be built into the partnership as this is one of the ways in which partners can be empowered by the process. One way in which accountability is built into the organization is the user-led 'Make People Happy' Group and advocates should co-operate with this group making information known to it as necessary.

Partners should...

- Be encouraged to make their views of the advocacy process known.
- Be aware of the Complaints procedure.
- Know that they will not be treated badly by the service if they make a complaint.
- Receive suitable support to make a complaint.

Advocates should...

- Check how partners feel about the advocacy process regularly and as a matter of course.
- Know about the 'Make People Happy' Group and its role and responsibilities in the organisation.
- Know about the complaints procedure and what to do if a partner wishes to make a complaint.

The Manager should...

- Review advocates' practice regularly.
- Monitor 'partner satisfaction' regularly.
- Promote a culture of constructive self-appraisal.
- Establish a clear system for handling complaints.
- Make complaints information available to all who use the service.
- Know what to do if a complaint is upheld.

The Management Committee should...

- Ensure there is a complaints procedure which is followed if a partner wishes to make a complaint.
- Ensure that policies and practices are in place to aid monitoring, evaluation and planning.
- Be accountable to all who have an investment (financial or otherwise) in the service.
- Be representative of the local community.

Networking

Networking is a very effective way of breaking down the isolation advocates may experience. We encourage our staff to take opportunities to network at local and national levels. As a secondary part of Choice Advocacy's practice we attend the Partnership Board and relevant sub-groups (Housing, Person-Centred Planning) and the Advocacy Forum to influence strategic planning. It should always be made clear that in this role we are not *representing* people with learning disabilities and avoid being contacted as such and *instead* of direct approaches to individuals with a learning disability or self-advocacy groups such as People First.

Partners should...

- Be made aware of opportunities to network themselves, through self-advocacy networks or 'user-involvement' groups.

Advocates should...

- Exchange information and share experience (whilst not compromising Confidentiality) with other advocates and advocacy organizations.
- Take opportunities to attend conferences, social events, and meetings relevant to their work.
- Feedback information from these opportunities to the Manager and other advocates.
- Build up a personal network of contacts (with an appropriately professional relationship) and share this with other advocates.

The Manager should...

- Make advocates aware of opportunities to network.
- Encourage the development of provision, and changes to service practice, which meets the needs of a broad range of people with learning disabilities.
- Facilitate greater development (including sharing good practice) of advocacy provision.
- Inform and educate service providers and funders of particular issues and complexities of providing advocacy.

The Management Committee should...

- Be available, at reasonable times, to advocates building up their personal contacts.
- Share relevant information that they may have from their own networking with Choice Advocacy.

Support

Advocates, particularly sessional advocates not based in the office, may work in a relatively isolated position. This can be reinforced by their need to maintain independence from other people involved in the situation, such as key workers, other service provider staff, and carers.

The work can also be stressful, as advocates are frequently called in when communication between partners and staff is poor, partners are angry about the care they are receiving, and/or something has gone wrong. Negative responses to complaints may also result in the need for support.

Therefore advocates must be given appropriate support and supervision. It is the responsibility of the manager to ensure that supervision is provided and it is the advocate's responsibility to attend.

We need support systems in place so that the advocates we work with feel valued as part of our organisation and the wider advocacy movement. This should prevent any feelings of isolation on the part of the individual advocate working away from the office and aid the organization's future development. The following support systems should ensure good communication throughout the organisation enabling advocates to:

- Talk through any issues or problems they may encounter.
- Identify any development or training they may require.
- Know they are working appropriately.
- Lessen stress.
- Obtain reassurance and guidance (for example on priorities).
- Gain a second view on situations they encounter.

Internal Support

- Our advocates will have access to both workers and members of our management committee who together have considerable experience in many of the areas that are likely to come up as part of their advocacy work. In addition a contact list of those with specialist knowledge on particular issues will be provided to advocates. Full use of the resources at the office (books, videos, policies, self-training material, staff knowledge, IT) will be available to advocates. Where necessary a member of staff will be available 'on-call'.
- Advocates will receive a mixture of focused and less formal supervision including one-to-one supervision and group supervision. 'Open-door' time will be provided, so that advocates can seek support without feeling they are taking time away from 'more important activities'.
- We will treat all our advocates as individuals, taking into account their circumstances and competing responsibilities. Less experienced advocates

may be mentored with a more experienced advocate. We will not set advocates up to fail, or allow initial enthusiasm to lead to 'burn out', by giving them too high a workload. We will be loyal to our advocates, not allowing them to be scapegoated or sidelined by service providers.

External Support

Where necessary we will provide 'bought-in' training for our staff on areas identified in supervision. We encourage advocates to attend networking events (conferences etc) and facilitate contact with advocates from other projects so that they feel part of the wider advocacy movement.

Supervision

Supervision is a formal process which is required for:

- Constructive staff support
- Review of work
- Staff development
- Good management
- Maintenance/development of service quality and consistency

Individual management and personal supervision

Advocates will usually have individual, personal supervision with the manager every 4-6 weeks. This may be face-to-face or over the telephone depending on individual preferences or circumstances.

Group or peer supervision

It is also recommended that advocates have regular group or peer supervision. This would cover issues such as a review of workload and sharing information about progress on specific cases. This would ensure advocates were implementing policies in a consistent way, learning from each other's experience and developing a 'team approach' to delivering advocacy.

Also, familiarity with each other's work would enable advocates to stand in for colleagues in their absence.

External supervision

External supervision should be arranged for advocates when needed.

Staff development and appraisal

Choice Advocacy is committed to the development of their staff. Training needs should be identified during supervision and efforts should be made to meet these needs. Staff appraisal, leading to tailored development plans, should be carried out on an annual basis.

Financial Support

Sessional advocates will be paid an hourly rate for the hours they work on an advocacy case.

Travel Expenses

Advocates who use their personal transport (this includes pushbikes) for journeys within the Bradford Metropolitan District are reimbursed at the mileage rate laid down by the Management Committee (this is currently 35p a mile/20p a mile for pushbikes).

Journeys outside the Bradford Metropolitan District will not normally be reimbursed unless the journey is to attend a conference or course. In these cases the amount the journey would have cost on public transport will be reimbursed: for example the fare which would have been charged by British Rail or First Direct. These journeys must be agreed in advance by the Manager.

Advocates using public transport in the course of their work are expected to choose the most economical method of transport which is reasonable. Expenses incurred through the use of buses and trains are reimbursed at the cost of the fares: tickets should be retained and attached to the expenses claim form.

Taxi fares are not normally reimbursed. Any member of staff needing to use a taxi must agree this in advance with the Manager.

Other Expenses

Courses and conferences will be paid for by Choice Advocacy where attendance is a necessary part of the job. This must be agreed beforehand with the Manager. For staff based in the office stationary, postage, telephone and refreshments come out of the office budget and will not be reimbursed. For sessional advocates the cost of telephone calls, postage, and stationary connected to the case will be reimbursed. A monthly expenses claim form should be filled in, signed by the manager, and given to the administrator. The partner and their advocate may arrange to meet in places where it is necessary to have a small amount of money for refreshments. In these cases the advocate should agree on an amount with the Manager beforehand which will be reimbursed.

Payment Authorization

All expenses must be authorized for payment by the manager, although the administrator is responsible for checking for accuracy in terms of figures. All transactions whether using cheques or petty cash will be operated by the administrator. All expense claims should be passed to the administrator as soon as possible.

Appropriate Relationships

Relationships with service providers

Advocates must establish good working relations with the service providers in their partner's life if they are to support their partner effectively. However there is a difficult balance to be maintained between advocates becoming known and trusted by staff, and trusted to be independent by their partner. A certain amount of tension in their relationship with staff may be necessary so that they can safeguard their partner's rights and maintain their own independence. The role of an advocate differs from that of other service providers in some very important ways which need to be understood:

- Advocates do not work in the best interest of partners but work to their direction. Advocates listen, help partners to explore options and support them to obtain information so that their decisions can be better informed. Ultimately, however, it is the partner who decides what they want their advocates to do and what action should be taken.
- Advocates work to this instruction even if they disagree with what is being done, unless it is illegal. Unlike professionals, advocates do not use their judgement to assess what might be 'best' for their partner. They would seek evidence of what the partner *might* choose to do from all relevant sources.
- Advocates only need to know about a partner's medical condition (medication, etc) if it would affect the advocacy relationship. They may need to know of any risk the partner presents to themselves or others.
- Advocates should maintain an 'outsider's view' as it can be easy, when working in institutionalized settings, to lose their critical edge.

Conflicts of interest

Conflicts of interest occur when an advocate has any sort of relationship which would compromise their first loyalty to their advocacy partner. For example: friendships with people providing services that their partner accesses. These can affect the advocacy relationship even if on the surface the partner does not bring up issues that make the advocate feel that they have a conflict of interest. For example: knowing that their advocate has a good friend who works in a day centre the partner may be reluctant to bring up an issue about the centre. Any potential conflict of interest should be discussed with the Manager at the original interview. It would be virtually impossible for someone to have experience of working with people with learning disabilities in the Bradford area without having built up a network of professional relationships, and some of these may well be friendships as well. Declaring a conflict of interest therefore would not be the

end of an advocates work with Choice Advocacy. It is simply necessary for us to know about potential conflicts so that we can allocate the right advocate to our advocacy partner. This would include relationships with staff at Choice Advocacy and the Management Committee.

If a conflict of interest comes up during the advocacy process it should immediately be declared to the Manager, who will discuss the issue with the advocate to decide whether it would compromise loyalty to their partner and whether a new advocate should be allocated.

Boundaries

Advocates should be clear in their own minds, and make it clear to their partner, what the boundaries of the advocacy relationship are. Advocates should be aware of what their competencies are and what they are not. In particular advocacy is not:

- Advice giving.
- Befriending or social support.
- Counselling.
- Mediation.
- A form of legal representation (replacement for lawyers).
- A substitute for making existing services more accessible, acceptable and effective.
- A complaints service
- Social work

Where the need for these forms of help arise in the advocacy partnership the advocate should help their partner to access them but not attempt to provide them themselves. The relationship between advocate and partner should be friendly but professional. Neither should abuse the position of trust they hold. Advocates should not feel they have to do anything beyond the scope of their job as an advocate. If difficulties occur the advocate should seek support and guidance from the Manager.

Choice Advocacy provides advocacy services. Whilst we may sometimes act in the general interests of our partners and potential partners (at a strategic level, for example, on the Partnership Board and its sub-groups) this is a secondary part of our practice and should not affect the main role of providing advocacy. When advocates *are* acting in this secondary role it should always be made clear that they are not *representing* a group and avoid being contacted as such and *instead* of direct approaches to a group.

Gift policy

Advocates should take note of, and enforce, our Gifts policy which is summarized below. This is to: protect the partner and the advocate from any question of

financial wrong doing; Value the partners wish to offer thanks in a very ordinary way; Ensure that the principle of free advocacy (which does not discriminate against people on the grounds of wealth) is adhered to.

- Whenever possible politely decline the offer of gifts or services of any description from partners of Choice advocacy.
- This does *not* include Thank-you cards and Christmas/Eid or other celebratory cards.
- If however it is clear that the refusal will cause distress or offence *and the gift is of limited financial value*, accept the gift but advise the partner that it will be recorded at the office. Do not accept money.
- Remember to record it! Also advise your manager. Any issues can then be discussed at the next Team meeting or supervision session.
- If you are offered anything which you feel is inappropriate or costly, then you must either refuse politely or explain clearly that *before* you can accept the gift you will have to ask the Service Manager or the Management Committee.
- Pass this information on to the Manager immediately on return to the office.

Advocate's Code of Conduct

The following Code of Conduct should be used by Advocates to guide them in their advocacy partnership. The principles and practice in this code are explained more fully in the sections of the Best Practice Guide above and relevant policies.

Principles

- Advocates should work towards not being needed. Their partner should be encouraged to take as much control over the partnership as possible. Advocates should recognise that they may be an influence on their partner and work to avoid such influence. Whenever they speak for their partner they should represent their partner's interests as if they were their own.
- In the partnership advocates should always maintain their loyalty to their partner above all else, they should avoid conflicts of interest and if any such conflicts arise declare them immediately so that they maintain their independence. Advocates should make it clear to all concerned that they will never keep information from their partner.
- Advocates are expected to keep the things they discuss with their partner confidential. If an advocate *has* to tell someone else something that their partner has told them in private, a disclosure of abuse for example, then they should always tell their partner that they have to do this. [See **Confidentiality Policy**, **Data Protection Policy**, and **No Secrets Policy**]
- Advocates should always treat people fairly and equally. They should take all necessary measures to ensure that their partner is not treated unfairly because of language, culture, capacity, or disability. [See **Equal Opportunities Policy**]
- The partnership does not have to be limited to issues which the partner brings up. Advocates should also initiate action on their partner's human rights, especially where these are not recognised by their partner. This

should include involving their partner in their local community so that they develop relationships with other people who will defend their rights.

Practice

- Advocates should work as efficiently as possible, to avoid wasting scarce resources but more importantly to show their partner how seriously they take their case. Advocates should seek to resolve problems effectively, in most cases this will mean seeking to resolve problems at the lowest level of an organisation.
- Advocates should also work tenaciously for their partner. They should not allow themselves to be ‘fobbed off’ by others and be aware of strategies to avoid this. Their partner’s interests should be pursued assertively.
- Advocates should always be prepared to safeguard their partner’s rights and emotional and physical safety. They should recognise the potential harm that they themselves could do to their partner and therefore *never* promise anything that they have no control over. Equally advocates should not feel that they have to do anything which makes them feel unsafe and when working on their own should ensure that they have arranged to make contact with a colleague to ensure their safety. [See **Adult Protection Policy** and **Lone Working Policy**]
- Advocates should be accountable first and foremost to their partner. They should also be aware of the user-led ‘Make People Happy’ Group and work with them to help monitor and evaluate Choice Advocacy’s work.
- As part of their work for Choice Advocacy Advocates should also take advantage of any opportunities to network with other advocacy organisations, attend conferences, and get involved in improving services for people with

learning disabilities at a strategic level. They should share any relevant information they get with other advocates and Choice Advocacy.

Appropriate Relationships

- Advocates should balance the need to work effectively for their partner by being known and trusted by service providers with the more important need to maintain their independence. A certain amount of tension in relationships with service providers may be necessary.
- Any relationship that could compromise an Advocate's first loyalty to their partner should be declared to the manager as a potential conflict of interest.
- Advocates should be clear in their own minds, and make it clear to their partner that they are there to provide advocacy *not* counselling, befriending, or substitutes for support or social work. Advocates should ensure that the relationship with their partner is conducted on a friendly but professional basis.
- Advocates should not accept gifts, other than Thank-You cards, from their partners. Any offers of gifts should be politely refused. [See **Gifts Policy**]

Advocates should note that the **Disciplinary Procedure** will be put into practice where this Code of Conduct is deliberately and/or persistently ignored.



