ADVOCACY IN THE CHILDREN’S HEARINGS SYSTEM

national practice model guidance document
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgements</td>
<td>3</td>
</tr>
<tr>
<td>Introduction</td>
<td>5</td>
</tr>
<tr>
<td>Definition of Advocacy</td>
<td>8</td>
</tr>
<tr>
<td>Legal and Policy Context</td>
<td>15</td>
</tr>
<tr>
<td>Principles, Standards, Practice Guidance and Indicators</td>
<td>26</td>
</tr>
<tr>
<td>Principle 1: Advocacy puts the child or young person first</td>
<td>29</td>
</tr>
<tr>
<td>Standards and Outcomes</td>
<td>30</td>
</tr>
<tr>
<td>Practice Guidance</td>
<td>31</td>
</tr>
<tr>
<td>Indicators</td>
<td>32</td>
</tr>
<tr>
<td>Principle 2: Advocacy seeks to understand and explain what is going on</td>
<td>33</td>
</tr>
<tr>
<td>Standards and Outcomes</td>
<td>34</td>
</tr>
<tr>
<td>Practice Guidance</td>
<td>35</td>
</tr>
<tr>
<td>Indicators</td>
<td>36</td>
</tr>
<tr>
<td>Principle 3: Advocacy workers only work for the child or young person</td>
<td>37</td>
</tr>
<tr>
<td>Standards and Outcomes</td>
<td>38</td>
</tr>
<tr>
<td>Practice Guidance</td>
<td>39</td>
</tr>
<tr>
<td>Indicators</td>
<td>40</td>
</tr>
<tr>
<td>Principle 4: Advocacy is for all children and young people who wish to take up the offer of advocacy</td>
<td>41</td>
</tr>
<tr>
<td>Standards and Outcomes</td>
<td>42</td>
</tr>
<tr>
<td>Practice Guidance</td>
<td>43</td>
</tr>
<tr>
<td>Indicators</td>
<td>44</td>
</tr>
<tr>
<td>Advocacy Relationship Timeline</td>
<td>45</td>
</tr>
<tr>
<td>Qualifications, Skills and Training</td>
<td>56</td>
</tr>
<tr>
<td>Quality Assurance</td>
<td>63</td>
</tr>
<tr>
<td>Personal Accounts</td>
<td>81</td>
</tr>
<tr>
<td>Rebecca’s Story</td>
<td>82</td>
</tr>
<tr>
<td>Colin’s Story</td>
<td>85</td>
</tr>
<tr>
<td>Case Study: Skylar, 15 years-old living at home</td>
<td>88</td>
</tr>
<tr>
<td>Case Study: Matt, 9 years-old living in foster care</td>
<td>91</td>
</tr>
<tr>
<td>Case Study: Ellie, 11 years-old living in foster care</td>
<td>93</td>
</tr>
<tr>
<td>Case Study: Mary and Euan, foster placement with two younger siblings</td>
<td>96</td>
</tr>
<tr>
<td>Case Study: Emma, 17 years-old living in residential care</td>
<td>99</td>
</tr>
<tr>
<td>Case Study: Callum, 9 years-old living in residential care</td>
<td>102</td>
</tr>
<tr>
<td>Case Study: Jamie, 14 years-old recently moved from a residential home to secure care</td>
<td>105</td>
</tr>
</tbody>
</table>
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*Scottish Government, Local Authorities, SIAA, Children’s Hearings Scotland, SCRA, CYCJ, CELCIS, Scottish Legal Aid Board, Barnardo’s, AdvoCard, Independent Advocacy Perth & Kinross, South Lanarkshire Council, Social Work Scotland, CAPS Independent Advocacy, Clan Childlaw, Partners in Advocacy

**Maciej Alexander, Susan Armstrong, Tom Boyd, Paula Campbell, Cheryl-Ann Cruickshank, David Faith, Brian Houston, Lucy Hughes, Rebecca Kayne, Callum Lynch, Lorraine Moore
INTRODUCTION
These are the words of just some of the care experienced young people from across Scotland who were asked to provide feedback on their feelings about Advocacy in the Children’s Hearings System. The Scottish Government has stated its ambition “to make Scotland the best place in the world to grow up for all babies, children, mothers, fathers and families.” In order to achieve this challenge, they are working across sectors, services and organisations to implement new policies and improve outcomes, all underpinned by Getting It Right for Every Child (GIRFEC). The Scottish Government and the First Minister have committed to listening to the voices of those who are impacted most deeply by these policies and services: the children and young people themselves.

As part of this work, the Scottish Government has been working with partners to develop a sustainable model of Advocacy in the Children’s Hearings System since its modernisation in 2013. This work includes action research and projects delivered by Barnardo’s, Who Cares? Scotland, Your Voice, Inspiring Scotland and Griesbach & Associates.

This document outlines the National Practice Model for Advocacy for the Children’s Hearings System. The development of the model was commissioned by the Scottish Government in order to develop a sustainable model of advocacy to realise the policy intention of Section 122 of the Children’s Hearings (Scotland) Act 2011.

1 http://www.gov.scot/Topics/People/Young-People/early-years
Specifically, the National Practice Model outlines the role of advocacy workers within the Children’s Hearings System including their independent status and requirement for: strong understanding of childhood experience and commitment to children's rights; solid knowledge base of policy and legislation related to children and young people; working knowledge of procedures related to Children's Hearings; expertise in advocacy practice; and skills in working with children and young people, to ensure consistent excellence of practice and delivery of advocacy within the Children’s Hearings System across Scotland.

As demand for advocacy is on the rise, the model needs to:

- Fulfil the obligations of Section 122.
- Be cost-effective.
- Be responsive to the changing policy landscape.

Long-term, it is expected the model will also provide added value beyond the existing supports such as legal representation, Safeguards, independent reports and other ongoing strategic work through the 'Better Hearings' action plan. It is expected that the new advocacy scheme will be rolled out nationally in late 2019.
DEFINITION OF ADVOCACY
**BACKGROUND**

There are a plethora of definitions and models of advocacy, and while advocacy as a concept is simple because it is about supporting an individual to share their views, perceptions or wishes, defining the tangible parameters of advocacy remains a complex and difficult task.

Many would argue that while advocacy services provided for children and young people differ from those for adults, the underlying principles remain the same. However, both in legislation and in practice, the understanding and currently applied definitions of advocacy vary amongst commissioners, advocacy organisations and those who benefit from it. Inconsistencies and lack of understanding of advocacy, have a wide-ranging impact on policy, legislation and practice and the take up of advocacy in general.

In the Scottish context, there is no single lead policy on advocacy. Instead, advocacy is intertwined with many policy and legislative areas separately, including, but not limited to:

- The United Nations Convention on the Rights of the Child, namely Article 12
- The Mental Health (Care & Treatment) (Scotland) Act 2003
- The Mental Health (Scotland) Act 2015
- Patient Rights (Scotland) Act 2011
- The Education (Scotland) Act 2016
- The Children’s Hearings (Scotland) Act 2011
- The Children and Young People (Scotland) Act 2014

In its broadest sense, advocacy is about empowering children and young people to make sure that their rights are respected and that their views and wishes are fully considered and reflected in decision making about their own lives.

3 Oliver and Dalrymple, 2008
4 Missing Voices, 2012
5 Advocacy Action Research Projects, 2016
6 Scottish Government paper, 12 October 2017
7 Department for Education and Skills, 2004
The Scottish Government’s guidance on Children’s Advocacy states that advocacy is about supporting a child to express their own needs and views and to make informed decisions on matters which influence their lives. Advocacy workers do not make choices for children – instead, they support children and young people to make their own choices.

Advocacy will most often be required where a child is engaging with a service, such as health, education, police, social work etc.⁸

These definitions echo the view that advocacy is about ensuring that children and young people can express their views and that these views are heard and considered by those who are involved in decision making about children and young people’s lives.⁹ The Scottish Independence Advocacy Alliance (SIAA) goes even further by stating that advocacy is about supporting people to help them access information and explore and understand their options, ultimately ensuring they can make an informed decision. It defines advocacy as a process of standing alongside another, speaking on behalf of another and encouraging the person to speak up for themselves. Fundamentally, SIAA argues that advocacy helps to address the imbalance of power in society and to stand up to injustice.¹⁰

The Institute for Research and Innovation in Social Services (IRISS) goes a step further and deconstructs advocacy by distinguishing its inherent features, namely support, independence from services, empowerment, challenging inequality and unfairness and promoting social justice.¹¹ Fundamentally, at the heart of advocacy is the need to address an inherent power imbalance.

Within the context of the Children’s Hearings (Scotland) Act 2011 specifically, advocacy is defined as services of support and representation for the purposes of assisting a child in relation to the child’s involvement in a children’s hearing.

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⁹ Elsley, S, Advocacy makes you feel brave, Scottish Government 2010
¹⁰ SIAA, Working with Children and Young People: Guidelines for Advocates
¹¹ Insight 20, Advocacy: Models and Effectiveness, April 2013
Advocacy can take many forms and SIAA distinguishes four:

- Citizen advocacy, where citizens support a person who needs help in their community.
- Collective advocacy, where a group of individuals experience similar issues, which they campaign to challenge.
- Peer advocacy, where individuals support one another by sharing their own life experiences.
- Professional advocacy, where a paid or unpaid advocacy worker supports an individual to express views and opinions which the person is otherwise unable to express.\(^\text{12}\)

Pithouse, Parry and Crowley (2005), on the other hand, define three different types of advocacy:

- Case or systemic advocacy, where learnings from individual advocacy cases help collective advocacy promoting systemic change.
- Passive and active models of advocacy, which vary from professionals and lay people speaking on behalf of an individual to self-advocating individuals.
- Service models, which are commissioned by service providers who maintain some degree of oversight.

Regardless of its specific form, all types of advocacy are based on a voluntary relationship between two or more individuals and the person in receipt of advocacy is always at the centre of the advocacy process.\(^\text{13}\)

The type of advocacy to be used to deliver the National Practice Model for advocacy in the Children’s Hearings System will be Professional advocacy, provided by professional advocacy workers, supporting children and young people on an individual basis.

\(^{12}\) S. Elsley, 2010, IRISS, 2013
\(^{13}\) Who Cares? Scotland, 2016
INDEPENDENT ADVOCACY

While it is argued that anyone can represent the wishes and views of a child or a young person, some caution should be exercised where there is a potential conflict of interest. Individuals who have a legal duty to act in the best interests of the child or young person, such as Social Workers, Panel Members and Safeguarders, should not also act as the child or young person’s advocacy worker.14

SIAA define independent advocacy as structurally, financially and psychologically separate from service providers and other services.

The Scottish Government has taken the view that independence can be achieved by ensuring that appropriate service design, delivery and management insulation arrangements are in place.

In practice, an independent advocacy worker will not make decisions on behalf of the person or group they are supporting. Instead, they will help the person or group to get the information they need to make an informed decision about their circumstances and will support them to express their choices to others.15 This reflects the Scottish Government’s position that advocacy workers do not make choices for children, but rather support them to make their own choices.16

NON-INSTRUCTED ADVOCACY

Where a child or young person is unable to give instructions due to their age and stage of development, complex communication needs, long term illness or disability, Non-Instructed Advocacy will be provided.

The Mental Health (Care & Treatment) (Scotland) Act 2003 Code of Practice states: “Where a patient has a degree of incapacity, or cannot for any reason clearly say whether or not they would like an independent advocate, an MHO/hospital managers/appropriate person should consider how an independent advocate may be involved… The right of access to

14 SIAA, Working with Children and Young People: Guidelines for Advocates, p: 28
15 https://www.siaa.org.uk/us/independent-advocacy/
16 http://www.gov.scot/topics/people/young-people/families/advocacy
independent advocacy is for each patient and is not limited only to those who are best able to articulate their needs." 17

"Non-instructed advocacy is… taking affirmative action with or on behalf of a person who is unable to give a clear indication of their views or wishes in a specific situation. The non-instructed advocate seeks to uphold the person's rights; ensure fair and equal treatment and access to services; and make certain that decisions are taken with due consideration for their unique preferences and perspectives." 18

Further guidance on non-instructed advocacy is detailed within the SIAA Non-Instructed Advocacy Guidelines, 2009.

18 Ibidem, p: 5
ADVOCACY IN THE CHILDREN’S HEARINGS SYSTEM

For the purpose of the National Practice Model within the Children’s Hearings System, advocacy will be defined as:

“A discrete child-centred service delivered by skilled practitioners, involving a process of advocacy workers being alongside a child or young person to assist them to participate in decision making processes.

Advocacy is based on a relationship between a professional advocacy worker and a child or young person. This relationship is entirely voluntary and the child or young person is in control of how their views are shared. As such, advocacy in this context only represents the views, wishes and concerns of the child or young person.

Advocacy usually involves spending time with the child or young person to understand their life and what matters to them. It involves listening to them and helping them to understand and exercise their rights and options. It also involves explaining the context and purpose of the meetings or proceedings involving them, and then exploring and understanding their situation from their perspective. At the heart of the advocacy relationship is trust - built through transparent, honest, accountable and reliable interactions with a skilled and knowledgeable advocacy worker.

Ultimately, advocacy champions children and young people's rights, views and wishes, helping them navigate through complex systems and ensuring their voice is taken into account.
LEGAL AND POLICY CONTEXT
In practice, this means giving children and young people a voice and involving them in the decisions that affect their well-being.
About Scotland’s Children’s Hearings System

A Children’s Hearing is a legal meeting arranged to consider and make decisions about a child or young person who may be having problems in their life. Scotland’s Children’s Hearings System was introduced by the Social Work (Scotland) Act 1968 and is now governed by the Children’s Hearings (Scotland) Act 2011, following extensive modernisation of the system in 2013.

Existing organisational and operational structures

The Children’s Hearings System is administered through a range of agencies. The Hearings System in Scotland is founded on humanitarian principles, emphasising welfare, protection and positive growth for children and young people. The Hearings System is founded on a commitment to children’s needs and rights which we believe can only exist in the context of a wider commitment to human rights.

The Hearings System relies on a number of highly interdependent roles – the Panel Members, the social workers, the legal representatives, Reporters and Safeguarders and a wide range of other professionals. We know that when these individuals work well together – the decisions they make and the future outcomes for children and young people are the best they can be. Child-centred, timely decisions, comprehensively implemented, supported by professionals, agencies, families and our communities give children and young people the opportunities that they need to overcome the difficulties and adversity that they may have already encountered in their lives.

The Hearings System is there to meet the needs of children and young people as part of a fair, transparent and lawful process. Decisions have to be made by ensuring a balance is struck between the rights of the child/young person and their family. These rights and obligations are sometimes perceived as competing and irreconcilable.

However, all agencies and professionals involved in the Hearings System, in undertaking their responsibilities, will have, at the centre of their approach a demonstrable and overarching concern for the welfare of children and young

19 N.B. sometimes called a “children’s panel”
people as well as a recognition and respect for the legal decision making role of the Hearing. Put simply, the welfare of the child or young person is paramount.

Panel Members and Reporters have a statutory responsibility to observe this paramountcy, other than in exceptional circumstances. They also have an overarching objective to ensure that the environment within which the discussions take place is as fair, supportive and conducive to participation by the child/young person as far as is possible and will manage the proceedings in order to secure this.

At the core of the system’s operation is two Non-Departmental Public Bodies, the Scottish Children’s Reporter Administration (SCRA) and Children’s Hearings Scotland (CHS). SCRA was formed under the Local Government (Scotland) Act 1994 and continued under the 2011 Act. 22 It became fully operational on 1st April 1996. CHS was formed under the 2011 Act and became fully operational in June 2013.

The structure of the hearings system is based around reporters employed by SCRA who refer young people to hearings, specially-selected and trained volunteer panel members who make decisions at hearings and are supported by Children’s Hearings Scotland, and Local Authorities who implement hearings’ decisions.

The grounds or legal reasons for bringing a child or young person to a hearing are set out in section 67(2) of the Children’s Hearings (Scotland) Act 2011. 23

Better Hearings (CHIP)

Since the reforms of the 2011 Act, the Scottish Government, CHS, SCRA and other partner bodies have sought to make continuous improvements to the Children’s Hearings System. Most recently, they have collaborated under the banner of the Children’s Hearings Improvement Partnership (CHIP). 24

The discussion has focused around working towards a concept of ‘Better Hearings’ where there is greater personalisation to reflect and meet the needs and expectations of children and young people coming into contact with the

24 The Next Step Towards Better Hearings, CHIP, 2016
CHIP has developed ‘Standards for Better Hearings’ from areas of consensus – drawing on evidence and experiences from children, young people and practitioners. The standards are written from the perspective of what children and young people should expect from their experience before, during and after their Hearings. The role of advocacy is mentioned throughout the standards, most notably in what to expect before a hearing.

**Current policy and legislative requirements**

**The Protection of the rights of the child**

As the Children’s Hearings System has developed, the fundamental principles on which it is based have been maintained. These principles are:  

- The welfare of the child is the paramount consideration.  
- The state should not interfere in a child’s life any more than is necessary.  
- The views of the child will be considered, with due regard for age and maturity.

However, processes have changed in light of case law and international conventions, including the specific rights for children contained in the United Nations Convention on the Rights of the Child (UNCRC) and the general human rights contained in the European Convention on Human Rights (ECHR).

**Human rights**

Human rights are the basic rights and freedoms to which we are all entitled in order that we can live with dignity, equality and fairness, and can develop and reach our potential. Everyone, including children, has these rights, no matter their circumstances.

Under international law, states and governments are obliged to respect, protect and fulfil human rights. This legal responsibility applies to all levels of government and all kinds of public services including Children’s Hearings,

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Local Authorities and SCRA, who are the duty bearers in this human rights framework.  

**Universal Declaration of Human Rights**

The Universal Declaration of Human Rights was adopted by the UN General Assembly in 1948 to provide common human rights standards for all peoples and nations in a post-war world. It was signed up to by all member countries of the United Nations and provides the foundation for international human rights law. In addition, there are nine core international human rights instruments or treaties, one of which is the UNCRC.

**UN Convention on the Rights of the Child**

The UN Convention on the Rights of the Child (UNCRC)\textsuperscript{29} is the internationally mandated, cross-government children’s rights framework. The UNCRC was ratified by the UK in 1991. Although not fully incorporated into Scots law, the UNCRC underpins much of the relevant legislation.

Part 1 of the Children and Young People (Scotland) Act 2014\textsuperscript{30} places new children’s rights duties on Scottish Ministers and public authorities, and The Children’s Hearings (Scotland) Act 2011, together with secondary legislation and other statutes including the Children (Scotland) Act 1995 and the Age of Legal Capacity (Scotland) Act 1991, aim to be consistent with the UNCRC.

The different articles within the UNCRC are interdependent and the mutually-reinforcing nature of human rights means that civil, political, economic, social and cultural rights all have equal status and are indivisible. However, four of the articles are sometimes thought of as being special. These are the “general principles” of the UNCRC that are not only rights in themselves but also underpin, and help us understand, every other right in the Convention:

- For rights to be applied without discrimination (Article 2)
- For the best interests of the child to be a primary consideration (Article 3)
- The right to life, survival and development (Article 6)
- The right to express a view and to have that view taken into account (Article 12)


\textsuperscript{29} More information can be found at: https://www.unicef.org/crc/

\textsuperscript{30} http://www.legislation.gov.uk/asp/2014/8/part/1/enacted
UN Convention on the Rights of Persons with Disabilities

The Convention on the Rights of Persons with Disabilities (CRPD) was ratified by the UK in 2009 and represents a major development in achieving equality for disabled people. The CRPD sets out what human rights mean in the context of disability. It builds on the Charter of the United Nations, the United Nations Universal Declaration of Rights, International Covenants on Human Rights and a number of other international laws. It specifically covers the right to respect and dignity (Preamble), equality of opportunity and accessibility (Article 3 & 9) and children’s rights (Article 7).

Additionally, the Convention sets a number of requirements to be developed by nation states, such as legislative measures to ensure the rights of persons with disabilities are upheld. It places a duty on nation states to ensure programmes, research, information and training embrace the values of the CRPD.

European Convention on Human Rights

The European Convention on Human Rights (ECHR) was the first regional agreement for the protection of human rights and was ratified by the UK in 1951.

The ECHR has been incorporated into UK domestic law through the Human Rights Act 1998 (HRA). Since the HRA came into force on 2nd October 2000, all public authorities have been required to ensure that their actions are compatible with Convention rights. Under the HRA, alleged breaches of Convention rights can be taken to domestic courts or tribunals (including Children’s Hearings) in the first instance. This provides the opportunity for easier access to courts to enforce rights and for speedier resolution of disputes.

Key articles of the ECHR which may be relevant to the hearings system are:

- Article 6: right to a fair trial
- Article 8: right to respect for private and family life

33 http://www.chscotland.gov.uk/the-childrens-hearings-system/development-of-the-childrens-hearings-system/
• Article 3: prohibition of torture
• Article 5: right to liberty and security
• Article 7: no punishment without law
• Article 14: prohibition of discrimination
• The First Protocol Article 2: right to education

Advocacy

In 2010, the Scottish Government commissioned a scoping study into advocacy support for children and young people. The report ‘Advocacy makes you feel brave’ 34 found advocacy to be a core service in ensuring that children and young people’s rights are upheld. However, the report found that it was difficult to identify whether existing provision met the needs of children and young people: access very much depended on where children lived rather than on need; there was inconsistency in provision across age groups; and there were significant gaps, including for those attending Children’s Hearings.

The report also highlighted that there was a general commitment to independence in the provision, commissioning and funding of advocacy. However, independence was regarded as a complex issue. It was seen to be important that a service was independent to preserve advocacy workers’ objectivity. Independent Advocacy – Guide to Commissioners 35 uses the definition of independence set out in the Mental Health (Care and Treatment) (Scotland) Act 2003. This states that in order to be independent, advocacy cannot be provided by the local Health Board or Local Authority, a member of their staff, or any other person involved in providing care, treatment or other services to the person requiring advocacy.

Advocacy within the Children’s Hearings System

Advocacy, within the context of the Children’s Hearings (Scotland) Act 2011, (‘the 2011 Act’) is defined as “services of support and representation for the purposes of assisting a child in relation to the child’s involvement in a children’s hearing,” Section 122 of the Children’s Hearings (Scotland) Act 2011 sets out a

34 ‘Advocacy makes you feel brave’: Advocacy support for children and young people in Scotland, Eisley, S. 2010
requirement for the chairing member of a children’s hearing to inform the child or young person of the availability of advocacy. The Scottish Government has delayed bringing this part of the act into force in order to better understand current advocacy provision and the need for it in the lives of care experienced young people.

Who Cares? Scotland, the largest national provider of advocacy for children and young people in Scotland, offer advocacy across most of Scotland’s Local Authorities, delivering within 30 of the 32 Local Authorities. In 2015-2016, Who Cares? Scotland workers attend just 539 Children’s Hearings, out of a total of roughly 36,000 hearings that took place. This equates to only 1.5% uptake. It seems to be the case that the vast majority of children and young people encountering the Children’s Hearings system have no knowledge of, or access to, independent advocacy.

**Wider policy context**

**Independent Care Review**

In October 2016, the Scottish Government launched a review of care in Scotland.³⁷ The Review is independent of Government and holistic in its approach, looking at legislation, policy, practice, experience, culture and ethos. The First Minister has stated that the Review will be "driven by those who have experience of care." The voices of care experienced children, families and care leavers, young and old, are at the heart of this Review. It is their experience that will guide and shape the Review, helping to bring clarity and focus to what matters most within a complex and challenging task.

The Independent Care Review is set into 4 stages: Orientation, Discovery, Journey and Destination. The ‘Discovery stage’ will define the vision and purpose of the Care Review, before moving on to further exploration of the system in the Journey and Destination stages.

³⁷ For more information, please see: https://www.carereview.scot/
Getting It Right for Every Child

Getting It Right for Every Child (GIRFEC)\textsuperscript{38} is Scotland’s approach to improving outcomes and wellbeing for all children and young people. It builds on, and is reflected in, a wide range of policies and strategies. It involves working across organisational boundaries and putting children and their families at the heart of decision making. A key element of GIRFEC was the introduction of eight wellbeing indicators to help make sure everyone – children, young people, parents, and the services that support them – has a common understanding of what wellbeing means. The eight wellbeing indicators are commonly referred to by their initial letters – ‘SHANARRI’ – which stands for:

- Safe
- Healthy
- Achieving
- Nurtured
- Active
- Respected
- Responsible
- Included

The implementation of GIRFEC offers a significant amount of learning in relation to making practice child-centred and listening to children’s voices.

GIRFEC’s National Practice Model (NPM)\textsuperscript{39} is an evidence based approach to practice used in recording, assessment, planning and review for children who need help either in a single or a multi-agency context. It has been developed from theory and research and provides the foundation for every practitioner in all sectors.

\textsuperscript{38} A Guide to GIRFEC, Scottish Government, 2012
\textsuperscript{39} www.gov.scot/Publications/2010/07/19145422/6
Common Core

The Common Core describes the skills, knowledge, understanding, and values that everyone should have if they work with children, young people and their families.

The skills, knowledge and understanding are described as “essential characteristics” and are set out in two contexts: relationships with children, young people and families and relationships between workers. They are also explicitly cross-referenced to the guiding principles of the UNCRC and the values are drawn from the ‘Getting It Right For Every Child’ approach aimed at improving the wellbeing of all children. They are considered from the perspective of children, young people and their families, and are the minimum expectations they will have of anyone who works with them.  

40 Common Core of Skills, Knowledge & Understanding and Values for the “Children’s Workforce” In Scotland: Final Common Core & Discussion Questions, Scottish Government, 2012
PRINCIPLES, STANDARDS, OUTCOMES, PRACTICE GUIDANCE AND INDICATORS
This section of the National Practice Model specifies the core values and beliefs of advocacy in the Children’s Hearings System and supports them with detailed, practical guidelines for advocacy workers and advocacy organisations. The Principles and Standards put into clear, concise language, the underlying beliefs and behaviours children should be able to expect from advocacy. Each Principle and its underlying Standards are accompanied by a set of Practice Guidelines and a set of Indicators.

**PRINCIPLES**

The principles are broad statements which outline the basis on which advocacy is offered, and the foundations of what advocacy should achieve. Each core principle outlines the key tenets of practicing advocacy, which is child-centred and focuses on creating the best possible advocacy experience for children and young people who are involved with the CHS, or have a need for advocacy in meetings or proceedings that may be connected with hearings.

**STANDARDS**

The standards support the principles with statements that explain how the core values of advocacy should be translated, and applied in practice. They provide a more detailed description of what the principles mean in relation to advocacy in the Children’s Hearings System. Advocacy workers and advocacy organisations must work to these standards.
OUTCOMES

Outcomes are the desired effects for the child or young person receiving advocacy achieved when the relevant standard(s) is met.

PRACTICE GUIDANCE

These statements provide practical actions and guidance for advocacy workers so they can understand how to fulfil the standards and principles of advocacy in their everyday work. Each set of statements shows how the core beliefs can be translated into the practice of advocacy in the Children’s Hearings System.

INDICATORS

Indicators suggest ways of collecting evidence to show whether the principles and standards are being met. They are measurable and can demonstrate, through tangible evidence, how advocacy is being practiced and experienced. The views of the children and young people receiving advocacy will be central in assessing whether the advocacy they receive is of a high quality, thereby meeting the principles and standards laid out in the National Practice Model.
principle 1

ADVOCACY PUTS THE CHILD OR YOUNG PERSON FIRST
standard 1.1

Advocacy workers will listen to children and young people to understand what matters to them, help them explore their options and have their voice heard

outcome

The child or young person feels listened to. The child or young person is able to express to their advocacy worker what matters to them. The child or young person has explored their options and had their voice heard.

standard 1.2

Advocacy workers will only work for and on behalf of the child or young person, meaning the child or young person is in charge of how and with whom their views are shared.

outcome

The child or young person knows that their advocacy worker works only for them. The advocacy worker will only share what the young person wishes to be shared.
PRACTICE GUIDANCE

• Advocacy workers will ensure that the child or young person receiving advocacy understands that they are in control of the relationship.

• Advocacy workers will take time to directly introduce the service they are offering to the child or young person, what it means and what it offers the child or young person in the context of their own involvement in systems, meetings or proceedings.

• Advocacy workers will explain their role to the child or young person and that they have control over what the advocacy worker expresses on their behalf or supports them to express.

• Advocacy workers will clearly explain to the child or young person that they have a choice about whether they want to use the advocacy service and can change their mind at any point during the advocacy relationship.

• When receiving advocacy referrals from professionals or others, the advocacy worker will clearly explain to the referrer that it is the child or young person’s choice whether they take up the offer of advocacy.

• Advocacy workers will have easily accessible materials to explain the purpose of their role to children, young people, carers and other professionals.

• Advocacy workers will make sure they come to an agreement with the child or young person as to how they wish to receive advocacy support.

• Advocacy workers will take the time required (within the constraints of time-limited proceedings) to build the advocacy relationship and work with the child or young person to explore their concerns, wishes, views and questions, and agree with them how they want to express what matters to them.

• Advocacy workers will make sure throughout the advocacy relationship that the view and voice of the child or young person is respected, especially by adults.

• Advocacy workers will be sensitive to the child or young person’s wishes as they develop over time during the advocacy relationship.

• Advocacy workers will seek to ensure that advocacy is fully understood by the child or young person and others at all times during the advocacy relationship.
INDICATORS

- Proportion of children and young people who feel listened to by their advocacy worker.

- Proportion of children and young people who feel listened to by others involved in their care as a result of receiving advocacy.

- Proportion of children or young people who have expressed how they want to communicate their views.

- Record of consent given by the child or young person—either a written record of verbal consent, written consent or another format recognised by the advocacy provider.

- Supporting information materials effectively explaining to the child or young person the approach and role of advocacy workers.

- Level of satisfaction with the advocacy support received.

- Proportion of children and young people who report that they understand the reasons for the decisions made by the Children’s Hearing.
principle 2

ADVOCACY SEEKS TO UNDERSTAND AND EXPLAIN WHAT IS GOING ON
standard 2.1

Advocacy workers will have detailed knowledge of children's rights and entitlements

outcome

The child or young person feels they are better informed about their rights and entitlements.

standard 2.2

Advocacy workers will understand the law and procedures that apply to the Children’s Hearings System and to other care and justice procedures as they apply to young people. They will be able to help children and young people understand what is happening and explore their options.

outcome

The child or young person has a better understanding of the Children’s Hearings System as it relates to their life. They better understand their options and rights within the Children’s Hearings System.

standard 2.3

Advocacy workers will speak to relevant professionals and carers on behalf of the child or young person with their permission, to help them get answers to any questions or concerns they have.

outcome

The child or young person feels supported in seeking answers to the questions that matter to them.
PRACTICE GUIDANCE

- Advocacy workers will help the child or young person understand the Hearings process.

- Advocacy workers will have an understanding of human rights, including the UN Convention on the Rights of the Child, and how these rights apply to children and young people in the Children’s Hearings System.

- Advocacy workers will have excellent up-to-date knowledge and awareness of the Children’s Hearings System and the relevant legislation, guidance and processes.

- Advocacy workers will understand the broad range of children and young people’s rights and the opportunities within the CHS for the child or young person to seek to exercise these rights.

- Before a hearing, advocacy workers will prepare the child or young person to help them understand the range of potential decisions which may be made.

- Advocacy workers will help ensure that the child or young person understands the reason for any particular hearing, and the recommendations being put forward. They will help the child or young person to express their views in relation to this information.

- Advocacy workers will help the child or young person access the right information if they are unclear about any aspect of the hearing (e.g. grounds for referral, recommendations, child’s plan).

- After the hearing, advocacy workers will spend time with the child or the young person, providing support, reinforcing their understanding of what has happened and what has been decided and exploring next steps for ongoing advocacy support if applicable.

- After decisions have been made in the CHS, advocacy workers will help the child or young person understand what they mean, any change in circumstances and what the child or young person’s rights and options are now.

- Advocacy workers will have a good understanding of the role of legal representation for a child or young person within the CHS and in appeals processes and will be able to communicate this to the child or young person they are working with.

- Advocacy workers will support the child or young person to access appropriate legal advice or representation, as required.
INDICATORS

- Proportion of children or young people who have a better understanding of the Children’s Hearings System.

- Proportion of children and young people reporting improved understanding of their rights and entitlements.

- Evidence of advocacy worker’s commitment to continuous professional development.

- Diverse range of methods of communicating young people’s rights and entitlements.
principle 3

ADVOCACY WORKERS ONLY WORK FOR THE CHILD OR YOUNG PERSON
standard 3.1

Advocacy workers will only work on behalf of children and young people. They will only share information with other people with permission from the child or young person, unless someone is at risk of harm.

outcome

The child or young person trusts that the advocacy worker only works for them and understands confidentiality of the advocacy relationship.

standard 3.2

Advocacy workers will not give their own or anyone else’s views or opinions while advocating for the child or young person, they will only represent the child or young person's wishes.

outcome

The child or young person feels supported in expressing their views. The child or young person knows the advocacy worker is only there to support them.

standard 3.3

Advocacy workers will not be influenced by anyone or anything else while they are supporting the child or young person.

outcome

The child or young person knows that their advocacy worker is not influenced by the wishes of others and focuses solely on their views.
PRACTICE GUIDANCE

- Advocacy workers will be aware of their own opinions and prejudices. Advocacy workers should not let their personal opinions, choices and values interfere in any way with the child or young person’s choices.

- Advocacy workers will always value and respect the views of the child or young person and will always be empathetic, non-judgemental and understanding in their interactions.

- Advocacy workers will be sensitive, supportive and caring throughout, communicating a sense of being alongside the young person.

- Advocacy workers should explain that children and young people have control over what information is shared with others through the advocacy relationship. Advocacy workers will clearly explain to the child or young person the circumstances in which they would have to share information, if there were risks to themselves or others.

- Advocacy workers will be imaginative, robust and resourceful in ensuring that the child’s voice is heard throughout the meeting or process.

- Advocacy workers will ensure that the child or young person is aware of the different ways in which their views can be presented to the hearing and support the child or young person in the options that they choose, even if the young person is excused from the hearing.

- Advocacy workers will ensure that the issues identified, and views expressed by the child or young person in preparation for or during the hearing are highlighted, examined and reiterated as necessary to ensure that the child’s voice is heard.

- Advocacy workers will speak up for the child or young person if they want them to, will support them to speak themselves, and will cultivate the sense of being alongside the child or young person to help ensure that their views are at the heart of the Hearing.

- Advocacy workers will only share information that the child or young person has agreed to share in a Children’s Hearing.

- Advocacy workers will remain alert to what is happening at the hearing, to how the child or young person is experiencing the hearing and to options for the child or young person at different points throughout the hearing, intervening as appropriate to ensure the rights of the child and young person are upheld and that they are always at the centre.

- Advocacy workers will have a clear understanding of the distinctness of their role within the Children’s Hearings System and the responsibilities of other professionals.
INDICATORS

• Level of satisfaction with advocacy support provided.

• Advocacy workers demonstrate understanding of the General Data Protection Regulations.

• Proportion of children and young people who feel supported to express their views during their Hearing.

• Record of advocacy issues.

• Number of incidents of advocacy support being provided at hearings where the child or young person is excused from their hearing.

• Proportion of hearings where the young person’s views are fully or partially expressed.
principle 4

ADVOCACY IS FOR ALL CHILDREN AND YOUNG PEOPLE WHO WISH TO TAKE UP THE OFFER OF ADVOCACY
standard 4.1

Advocacy workers will liaise with carers and other professionals already working with children and young people to ensure that they are sensitive to the individual child or young person's needs.

outcome

The child or young person's individual needs have shaped the way they receive advocacy and they have been appropriately supported by their carers and professionals in the advocacy process.

standard 4.2

Advocacy workers will work with children and young people of all backgrounds and respect the identity, culture, needs and preferences of all children and young people and treat them fairly and equally.

outcome

Children and young people of all backgrounds have access to advocacy.

The child or young person feels that they have been treated equally and with respect throughout their advocacy relationship.
PRACTICE GUIDANCE

• Advocacy workers will tailor communications with children or young people based on their individual needs and requirements.

• Advocacy workers will have a range of different creative resources available to explore with the child – using an age, stage and ability appropriate approach.

• Advocacy workers will make sure that the child or young person can be supported to directly express their views and opinions, in a way that suits them.

• Advocacy workers will be flexible and adaptive to changing contexts when planning how best to provide advocacy support to a child or young person.

• Advocacy workers will understand the differences between instructed and non-instructed advocacy.

• Advocacy workers will develop networks with other professionals, partners and practitioners to foster understanding of advocacy services, being proactive with raising awareness of what it offers children and young people to improve access.

• Advocacy workers will be imaginative and ambitious in their communication with other key professionals about what they can offer children and young people, raising awareness, understanding and the impact of the service.
INDICATORS

- Range of communication tools aimed at children and young people from all backgrounds.

- Proportion of children and young people who feel respected and treated fairly by their advocacy worker.

- Diversity of backgrounds, age and ability of children and young people accessing advocacy.

- Proportion of advocacy workers who have received training on non-instructed advocacy.
ADVOCACY
RELATIONSHIP
TIMELINE
In the previous section, Practice Guidance and Indicators were grouped according to the four key Principles of advocacy which underpin the entire model. This creates a clear, direct link between the actions and behaviours of the advocacy workers and the core beliefs they are to uphold throughout their work. However, the day to day reality is that advocacy workers are not going to stop to identify a specific principle and standard every time they speak to a young person, share information about rights or attend a hearing, nor should they be expected to do so. Therefore, it is equally imperative that the Practice Guidelines are also framed in such a way that they can be easily accessed and identified at particular stages throughout the advocacy process.

The ‘Proposed Standards for Better Hearings’\(^{41}\) identify what children and young people should expect Before, During and After a hearing. This section details five stages of practice for advocacy workers in the CHS: Throughout, Introductory, Before, During and After. The additional two stages, Throughout and Introductory, offer greater clarity and identifies the Introductory meeting as a unique circumstance which requires special consideration.

\(^{41}\) The Next Step Towards Better Hearings, CHIP, 2016
**STAGE 1: Throughout the advocacy process**
Practice Guidance that must be continuously practiced throughout the advocacy relationship.

**STAGE 2: Introductory meeting with a child or young person**
Practice Guidance for the introductory meeting with a child or young person, including children and young people who have yet to attend their first Children’s Hearing.

**STAGE 3: Before a Children’s Hearing**
Practice Guidance that will be used before each Children’s Hearing that a child or young person may have during the advocacy relationship.

**STAGE 4: During a Children’s Hearing**
Practice Guidance to be used during a Children’s Hearing.

**STAGE 5: After a Children’s Hearing**
Practice Guidance to be used after a Children’s Hearing has taken place.
STAGE 1: Throughout the advocacy process

PRACTICE GUIDANCE

- Advocacy workers will be sensitive, supportive and caring throughout, communicating a sense of being alongside the young person.

- Advocacy workers must always value and respect the views of the child or young person, always expressing an empathetic viewpoint.

- Advocacy workers will tailor communications with children or young people based on their individual needs and requirements.

- Advocacy workers must have a range of different creative resources available to explore with the child – using an age, stage and ability appropriate approach.

- Advocacy workers will make sure throughout the advocacy relationship that the view and voice of the child or young person is respected.

- Advocacy workers will remain aware of their own opinions and prejudices. Advocacy workers should not let their personal opinions, choices and values interfere with the children or young person’s choices.

- When receiving advocacy referrals from professionals, the advocacy worker must clearly explain to the professionals around the child or young person, that it is the child or young person’s choice whether they take up the offer of advocacy.

- Advocacy workers must be robust in their communication with other key professionals about their roles and responsibilities to raise awareness of the service.

- Advocacy workers must create networks with other professionals to foster understanding of advocacy services, being proactive with raising awareness of what it offers children and young people to improve access.

- Advocacy workers must have excellent up-to-date knowledge and awareness of the Children’s Hearings System and its different processes and legislation.
**STAGE 1: Throughout the advocacy process**

- Advocacy workers must understand the broad range of children and young people's rights and the opportunities within the CHS for the child or young person to seek to exercise these rights. (For example, measures within a Compulsory Supervision Order).

- Advocacy workers will be flexible and adaptive to changing contexts when planning how best to provide advocacy services to a child or young person.

- Advocacy workers will be sensitive to the child or young person's wishes, as they develop over time during the advocacy relationship.

- Advocacy workers will return to explaining and introducing their role both to the child or young person and others, supporting them as required, to ensure understanding.

- Advocacy workers will understand the required approach to non-instructed advocacy.
STAGE 2: Introductory meeting with a child or young person

Summary

- Introduction, making the service offered feel real, personal and understandable.
- Start relationship building.
- Confirm and support the child’s understanding of the process (alongside central roles for Lead Professional (LP) and SCRA).
- Confirm and support the child’s understanding of their rights relating to their participation in the process (alongside central roles for LP and SCRA).
- Explain Independent Advocacy and confirm whether the child wishes to have that support.
- Ensure that the child is aware that they can ask for that support at any stage.

Practice Guidance

- Advocacy workers must clearly explain to the child or young person that they have a choice about whether they want to use the advocacy service and can change their mind at any point of the advocacy relationship.
- Advocacy workers must ensure that the child or young person receiving advocacy understands that they are in control of the relationship.
- Advocacy workers will take time to directly introduce the service they are offering to the child or young person, what it means and what it offers the child or young person.
- Advocacy workers must respect young person’s decision should they decide not to engage in advocacy.
- Advocacy workers will state that the offer of advocacy is always available even if young people change their mind.
STAGE 2: Introductory meeting with a child or young person

- Advocacy workers will have easily accessible materials to explain the purpose of their role to children, young people, carers and other professionals.
- Advocacy workers will also communicate with carers and professionals around the child or young person to make sure they understand the role of advocacy, explaining that it is up to the child or young person to choose to use advocacy.
- Advocacy workers will use sufficient time to build the advocacy relationship and work with the child or young person to agree how they want to express their views.
- Advocacy workers will make sure they come to an agreement with the child or young person how best they want to make use of the service.
- Advocacy workers should explain that any information shared will be up to the child or young person.
- Advocacy workers will clearly explain to the child or young person the circumstances in which they would have to share information, if there were risks to themselves or others.
STAGE 3: Before a Children’s Hearing

Summary

- Explore the child’s views, wishes and concerns.
- Explore how the child wishes to communicate those views.
- Support the child in doing so, using broad range of options available.
- Links with Reporter and LP to support child’s preferred ways of participating.
- Links with Reporter and LP to support pre-Hearing visit to the hearing venue if child would like to do so.
- If the child has received their Child’s Plan, explore whether it accurately captures their views on the assessment, on the plan and on the recommendations made for the Children’s Hearing.
- Confirm and support the child’s understanding of their rights in relation to the Grounds of Referral, and what their views are on them.
- Links with legal representation for the child if relevant.
- Support the child’s understanding of the range of their rights, as they relate to different aspects of their life and their views, wishes and concerns.

Practice Guidance

- Before a hearing, advocacy workers will prepare the child or young person to help them understand the range of potential decisions which may be made.
- Advocacy workers will reinforce what other professionals have told the child or young person about their situation and upcoming hearing.
- If the child or young person is unclear about any aspect of the upcoming hearing, the advocacy worker would help the child or young person access the right information – or ensure that other professionals provide it (I.e.
STAGE 3: Before a Children’s Hearing

- Advocacy workers will ensure that the child or young person understands the grounds for their hearing and the recommendations being put forward. They will help the child or young person to express their views in relation to this information.

- Advocacy workers will support the child or young person to access appropriate legal representation, as necessary.

- Advocacy workers must explain their role in the Children’s Hearing to the child or young person and that they have control over what the advocacy worker expresses on their behalf.

- Advocacy workers will help the child or young person understand the hearing process and explain (if relevant) that they may be excused from appearing at the hearing.
STAGE 4: During a Children’s Hearing

Summary

- Independent advocacy support immediately prior to and during the hearing.
- Support for the child to participate in the hearing in whatever way best suits them, including asking to speak to the hearing on their own with support from their advocacy worker.
- Communicate their views, wishes and concerns in whatever way best suits them.
- Ensure that any material prepared by the child prior to the hearing is considered at the hearing.

Practice Guidance

- Advocacy workers will have a clear understanding of the distinctness of their role within the Children’s Hearings process and the responsibilities of other professionals.
- Advocacy workers will make sure that the child or young person can be supported to directly express their views and opinions, in a way that suits them.
- During the hearing, advocacy workers will be there for the child or young person if needed by them. The advocacy worker will speak up for the child or young person if they want them to and will listen to what is happening at the hearing.
- During the hearing, the issues identified, and views expressed by the child or young person before the hearing must be introduced, examined and reiterated when necessary.
- Advocacy workers should only share information that the child or young person has agreed to sharing in a Children’s Hearing.
STAGE 5: After a Children’s Hearing

Summary

• Confirm and support the child’s understanding of what has taken place and what has been decided (alongside central roles for LP and SCRA).

• Confirm and support the child’s understanding of their procedural rights, including in relation to any Court proof application, appeal and early review (alongside central roles for LP and SCRA).

• Link with legal representation for the child as appropriate.

• Confirm and support the child’s understanding of ongoing processes such as Child’s Plan/Team Around the Child reviews (alongside central role for LP).

• Explain and support the child’s understanding of and access to independent advocacy support in those processes (with the same advocacy worker providing that relationship-based service if possible).

Practice Guidance

• After the hearings, the advocacy worker will make sure the young person is okay, will reinforce their understanding of what happened and explore next steps for ongoing advocacy.

• After outcomes and decisions have been made in the CHS the advocacy worker will make sure the child or young person understands what this means and any change in circumstances, alongside other professionals.

• Advocacy workers must have a good understanding of legal representation for a child or young person within the CHS and in appeals processes and must be able to communicate this to the child or young person they are working with.

• Advocacy workers will support the child or young person to access appropriate legal representation, as necessary.
QUALIFICATIONS, SKILLS AND TRAINING
Qualifications, skills and training are key elements in ensuring advocacy is meaningful, empowering and ultimately successful.

In the Scottish context, there are currently two formal qualifications which explore advocacy: SQA qualification for Panel Members and Reach Advocacy.

SQA qualification for Panel Members\(^2\), comprising a number of existing SQA modules from this award and others, could be brought together to create a new qualification along the lines of "Advocacy in the Children’s Hearings System." In the short term it seems there is enough existing content and modules to create a meaningful qualification which could be improved over time to reflect the learnings from the implementation of the NPM.

Reach Advocacy (Coatbridge)\(^3\) provides advocacy around recovery, addiction and mental health. The provider is an accredited training centre with funding from Big Lottery and has already developed a SAAS-approved qualification in advocacy at SCQF Level 7. As Reach Advocacy is actively looking for partners this could be an option for the advocacy provider to consider.

The two formal qualifications could be considered separately or in tandem to provide a comprehensive formal training package for advocacy workers working in the Children’s Hearings System. While the SQA package provides a good understanding of the Children’s Hearings System, the Reach Advocacy model could be further adapted and developed to provide a more tailored formal advocacy qualification.

Additionally, the content of a new qualification could be further enhanced by incorporating learnings from Level 3 Certificate in Advocacy in Northern Ireland. While the qualification is rooted in a different social care and legal setting, it provides transferrable skills and knowledge in independent advocacy management and independent advocacy with children and young people.

\(^2\) https://www.sqa.org.uk/sqa/68429.html
\(^3\) https://www.reachadvocacy.net/
In addition to formal qualifications, advocacy providers should consider embedding the Common Core in provision of advocacy in the CHS as “from the perspective of children, young people and their families, the Common Core describes what is fundamentally important to them, no matter what service they are using or their own circumstances or backgrounds. From the perspective of workers the Common Core describes the fundamentals that every worker should demonstrate and contains the basics needed to build positive relationships and promote children’s rights”.

The final Common Core focuses on the two following areas which are supported by the guiding principles of the UNCRC:

1. Skills, knowledge and understanding and values.
2. Essential Characteristics of those who work with children, young people and families in Scotland (relationships with children young people and their families; relationships between workers).

The Common Core would be threaded through advocacy training with suggested areas for core training for the advocacy provider to deliver on a rolling basis. The advocacy provider would align training opportunities to the advocacy worker’s personal development plan and commitment to individual learning.

44 http://www.gov.scot/Publications/2012/06/5565
The below topics should be considered by the advocacy provider to provide a comprehensive training package linked directly to personal development.

**Understanding Children's Hearings**
- Understanding the process of Children's Hearings.
- The role of the independent advocacy worker in Children's Hearings.
- Secure Orders – understanding this process.

**Independent Advocacy**
- Understanding what advocacy is.
- Considering the roles, processes, ethics and principles of advocacy.
- Exploring the cornerstones of advocacy: child-led, independence, confidentiality and equality of access.
- GIRFEC and advocacy – ensuring the child remains at the centre.
- The rights of children, young people and vulnerable adults.
- Practical challenges and dilemmas.

**Unaccompanied Asylum Seeking Children (UASC)**
- Understanding the role of the advocacy worker/the appropriate adult in the age assessment process.
- Ensuring the child is at the center.
- Focusing on relevant legislation, legal aspects and protocols including age assessments and disputes and Home Office decisions.
- Exploring the journey of the child before arriving in the UK and the impact of trauma.
- Considering the different terminologies used to refer to UASC.

**Safeguarding Children, Young People and Vulnerable Adults**
- Exploration of relevant legislation.
- Discussions around why inter-agency working is so important, including
exploration of the different roles and responsibilities of different services.

• Consideration about when it is appropriate to share information and with whom.

• Knowing what to do if you have a serious safeguarding concern about a child, young person or vulnerable adult.

• GIRFEC and its role in safeguarding children and young people.

The Role of the Independent Person in the Secure Accommodation

• Understanding the nature and purpose of the secure accommodation.

• Looking at the legislation, guidance and best practice around secure accommodation.

• Exploring processes and procedures.

• Considering the roles carried out by other professional’s panel members.

• Thinking about children’s rights in relation to secure accommodation hearings.

Data Protection and Information Security

• Understanding why it’s so important to protect data and keep information secure.

• Looking at relevant legislation such as the Data Protection Act.

• Considering how data protection and information security affect you in your working.

Equality, Diversity and Inclusion

• Developing an understanding of the legal framework around EDI in the workplace.

• Creating and promoting a culture where differences are valued and any threats, challenged.

• Considering what unconscious bias is and why this is relevant in the workplace.

• Understanding your own role with regard to challenging inappropriate
behaviours and the impact you can have on changing the culture within your workplace.

Other Training Options to consider:

- The principals of Advocacy
- The role of the Advocacy worker
- Communication of the Advocacy worker
- Understand equality, diversity and inclusion
- Understand the importance of confidentiality and professional boundaries
- Understand Advocacy Standards
- Your Rights explained
- Understanding the Human Rights Act
- Understanding the Equality Act
- Understand different types of Advocacy
- How to work in Crisis
- How to support themselves and learn coping skills

Compliance training

Compliance training includes sessions that learners working with children and young people are expected to undertake as part of their working role, for example safeguarding, data protection and information security and equality, diversity and inclusion.

Practice based training

Practice based training includes sessions that learners can access to further their learning within the practice arena and from a practical perspective. Sessions will help the learners by informing their practice; such sessions may include the child protection process or residential visiting advocacy sessions.
Awareness training

Awareness training sessions focus on particular pieces of legislation, primarily new and updated legislation. Awareness training sessions can be tailored to develop the learning and understanding of a workforce with specific focus on legislation that’s important for care experienced young people attending Children’s Hearings in Scotland.
QUALITY ASSURANCE MODEL

The Quality Assurance Model for the National Practice Model and the Service Delivery Model sets out the overarching approach to ensuring advocacy within the Children’s Hearings System is of high quality.

Quality assurance is a process of systematic, planned, regular and reflective assessment of a service or a process. As such, it is fundamental in supporting learning and continuous improvement as it helps improve outcomes, identify areas of strengths and areas for development within practice, policy and strategy.

The Quality Assurance Model is rooted in the National Practice Model, developed in partnership young people with experience of the CHS and key stakeholders from across Scotland.

The Quality Assurance Model aims to:

- Establish the quality of outputs for advocacy within the CHS for:
  - Children and young people
  - Commissioners
  - Advocacy organisations

- Assess to what degree advocacy is:
  - accessible to all who need it
  - child-centred
  - effective within the CHS

- Provide learning mechanisms to improve advocacy in the CHS.

- Ensure advocacy in the CHS is of consistent quality across Scotland.

- Monitor performance of advocacy provision at local level within the CHS.
The Quality Assurance approach incorporates three functions: Defining, Measuring and Improving Quality.

**Defining**
Defining quality includes setting expectations or standards of quality practice engrained in the principles - that is, broad statements of advocacy within the CHS.

**Measuring**
Measuring quality consists of quantifying the level of performance or compliance against agreed standards or expectations. This process requires determining performance indicators which should be specific, reliable, consistent, proportionate and valid, and directly related to the standards. Indicators measure how well the outcome or process has been achieved.

**Improving**
Improving quality includes an ongoing assessment of collected data in order to identify gaps in the quality of work delivered.
PDSA

This process should be based on the Plan-Do-Study-Act (PDSA) quality improvement method which focuses on change, translating ideas into actions and ultimately improving the quality of service provided.

The PDSA concept is central to many quality improvement approaches, including lean, sigma and quality management. PDSA, and the Quality Assurance approach in particular, gleans information from a variety of sources and stakeholders, predominantly directly from children and young people who have experienced advocacy within the CHS.

The Quality Assurance Model covers organisational, policy, practice and advocacy process and outcome activities and is

- Evidence-based and rooted in the views and experiences of children and young people who do or could access advocacy.
- Child- and young person-centred.
- Fair and proportionate to ensure the advocacy relationship is not undermined by onerous feedback processes.
- Imaginative and participative.
- Ethical.
The quality assurance model will establish the quality of advocacy within the CHS through:

- Review of organisational policies and procedures.
- Review of relevant reports, documents and plans.
- Assessment of practice and its evidence.
- Direct involvement of key stakeholders, namely children and young people.
- Review of organisational and inter-organisation structures.

Key messages of effective quality assurance when delivering advocacy within the CHS are:

- Advocacy organisations should clearly define their role so that children and young people understand what their involvement entails.
- Advocacy organisations should adopt a person-centred approach.
- Advocacy organisations should be independent of commissioners and external and internal influencers.
- Advocacy should be co-produced with children and young people.
- Advocacy organisations should ensure they reach and meet diverse needs.
- Advocacy workers should be knowledgeable and experienced in human rights.
- Outcomes of advocacy should be recorded and monitored.

This Quality Assurance Model consists of:

- Examples of evidence supporting the National Practice Model
- Self-assessment tool
EXAMPLES OF EVIDENCE SUPPORTING THE NATIONAL PRACTICE MODEL

Principle 1: Advocacy puts the child or young person first.

Standard 1.1 Advocacy workers will listen to children and young people to understand what matters to them, help them explore their options and have their voice heard.

Standard 1.2 Advocacy workers will only work for and on behalf of the child or young person, meaning the child or young person is in charge of how and with whom their views are shared.

Outcome 1.1 The child or young person feels listened to. The child or young person is able to express to their advocacy worker what matters to them. The child or young person has explored their options and had their voice heard.

Outcome 1.2 The child or young person knows that their advocacy worker works only for them. The advocacy worker will only share what the young person wishes to be shared.

Examples of Evidence:

• Advocacy issues
• Analysis of complaints
• Complaints system
• Consent policy in place
• Documented policies explaining how organisation deliver advocacy (peer, systemic, etc)
• Ethical guidelines
• Evidence of consent being informed and meaningful
• Evidence of CYP being able to self-advocacy worker
• Evidence of how feedback from CYP is used to improve advocacy
• Evidence of ongoing evaluation of advocacy
• Feedback from CYP about advocacy workers
• Induction policies
• Information about advocacy available in various formats
• Involvement of young people in decision-making
• Non-discriminatory and cultural awareness training undertaken
• Peer and individual practice observations
• Policies on confidentiality and personal information
• Policies related to non-instructed advocacy
• Policies up-to-date and in line with legislation
EXAMPLES OF EVIDENCE SUPPORTING THE NATIONAL PRACTICE MODEL

Principle 2: Advocacy seeks to understand and explain what is going on.

Standard 2.1 Advocacy workers will have detailed knowledge of children's rights and entitlements.

Standard 2.2 Advocacy workers will understand the law and procedures that apply to the Children’s Hearings System and to other care and justice procedures as they apply to young people. They will be able to help children and young people understand what is happening and explore their options.

Standard 2.3 Advocacy workers will speak to relevant professionals and carers on behalf of the child or young person with their permission, to help them get answers to any questions or concerns they have.

Outcome 2.1 The child or young person feels they are better informed about their rights and entitlements.

Outcome 2.2 The child or young person has a better understanding of the Children’s Hearings System as it relates to their life. They better understand their options and rights within the Children’s Hearings System.

Outcome 2.3 The child or young person feels supported in seeking answers to the questions that matter to them.

Examples of Evidence:

- Action plans based on feedback from CYP
- Analysis of complaints
- Code of practice
- Consent policy in place
- Consistency of staff in advocacy
- CYP satisfaction with the advocacy support provided
- Data protection policy
- Documented policies explaining how organisation deliver advocacy (peer,
• Ethical guidelines
• Evidence of consent being informed and meaningful
• Evidence of diversity of CYP
• Evidence of further professional development of advocacy workers
• Evidence of how feedback from CYP is used to improve advocacy
• Evidence of multiagency work
• Evidence of outcomes for CYP
• Evidence of advocacy workers knowledge about human rights
• Induction policies
• Individual and group supervision
• Involvement of young people in decision-making
• Non-discriminatory and cultural awareness training undertaken
• Peer and individual observations
• Policies on information sharing
• Policies on confidentiality and personal information
• Policies related to non-instructed advocacy
• Policies up-to-date and in line with legislation
EXAMPLES OF EVIDENCE SUPPORTING THE NATIONAL PRACTICE MODEL

Principle 3: Advocacy workers only work for the child or young person.

Standard 3.1 Advocacy workers will only work on behalf of children and young people. They will only share information with other people with permission from the child or young person, unless someone is at risk of harm.

Standard 3.2 Advocacy workers will not give their own or anyone else’s views or opinions while advocating for the child or young person, they will only represent the child or young person’s wishes.

Standard 3.3 Advocacy workers will not be influenced by anyone or anything else while they are supporting the child or young person.

Outcome 3.1 The child or young person trusts that the advocacy worker only works for them and understands confidentiality of the advocacy relationship.

Outcome 3.2 The child or young person feels supported in expressing their views. The child or young person knows the advocacy worker is only there to support them.

Outcome 3.3 The child or young person knows that their advocacy worker is not influenced by the wishes of others and focuses solely on their views.

Examples of evidence:

- Analysis of advocacy issues faced by CYP
- Analysis of referrals
- Appraisal system in place
- First person testimony – Case study
- Barriers faced and ways of addressing them
- Board meeting minutes
- Child Protection policy
- Code of practice
- Complaints system
• Consent policy in place
• Diverse communication resources
• Documented policies explaining how organisation deliver advocacy (peer, systemic, etc)
• Ethical guidelines
• Evidence of consent being informed and meaningful
• Evidence of CYP being able to self-advocacy worker
• Evidence of CYP understanding complaints policy
• Evidence of how feedback from CYP is used to improve advocacy
• Evidence of multiagency work
• Evidence of ongoing evaluation of advocacy
• Evidence of outcomes for CYP
• Evidence of representative take-up of advocacy within the CHS
• Evidence of staff knowledge about human rights
• Evidence of systemic change based on CYP advocacy issues
• External accreditation
• Feedback from CYP on how they supported they feel in decision-making processes
• Induction policies
• Individual and group supervision
• Information about advocacy available in various formats
• Involvement of young people in decision-making
• Membership of SIAA
• Memorandum of Association
• Non-discriminatory and cultural awareness training undertaken
• Observations
• Policies on information sharing
• Policies on confidentiality and personal information
• Policies related to non-instructed advocacy
• Policies up-to-date and in line with legislation
• Recruitment policies
• Staff reporting understanding of relevant policies
• Secure advocacy database/recording system in place
• Spot checks
• Strategic and operational plan
EXAMPLES OF EVIDENCE SUPPORTING THE NATIONAL PRACTICE MODEL

Principle 4: Advocacy is for all children and young people who wish to take up the offer of Advocacy.

Standard 4.1 Advocacy workers will liaise with carers and other professionals already working with children and young people to ensure that they are sensitive to the individual child or young person’s needs.

Standard 4.2 Advocacy workers will work with children and young people of all backgrounds and respect the identify, culture and preferences of all children and young people and treat them fairly and equally.

Outcome 4.1 The child or young person’s individual needs have shaped the way they receive advocacy and they have been appropriately supported by their carers and professionals in the advocacy process.

Outcome 4.2 Children and young people of all backgrounds have access to advocacy. The child or young person feels that they have been treated equally and with respect throughout their advocacy relationship.

Examples of evidence:

- Action plans based on feedback from CYP
- Analysis of complaints
- Barriers faced and ways of addressing them
- Code of practice
- Consistency of staff in advocacy
- CYP satisfaction with the way advocacy was explained to them
- Ethical guidelines
- Evidence of diversity of CYP
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• Policies up-to-date and in line with legislation
# SELF-ASSESSMENT TOOL

Self-assessment tool is expected to be completed by advocacy organisations and returned to the management organisation within one month of the end of financial year.

The advocacy organisation should score itself against each outcome based on the indicators.

For each area scored 0 or 1, the advocacy organisation needs to prepare a SMART plan to address areas for improvement.

Assessment scored 0 should be prioritised.

Assessment scored 2 should be brought to the attention of the management organisation to share good practice across Scotland.

## Principle 1: Advocacy puts the child or young person first.

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Advocacy workers will listen to children and young people to understand what matters to them, help them explore their options and have their voice heard. | | | |
| Standard 1. 2  
Advocacy workers will only work for and on behalf of the child or young person, meaning the child or young person is in charge of how and with whom their views are shared. | | | |
**SELF-ASSESSMENT TOOL**

**Principle 2: Advocacy seeks to understand and explain what is going on.**

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# SELF-ASSESSMENT TOOL

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PERSONAL ACCOUNTS
REBECCA’S STORY
My advocacy worker came in to the residential home and spent time with me eating dinner and chatting away. I was scared to have an initial relationship because I thought she would be like everyone else in my life. However, I seen how close other young people in my residential home became with her and this made me feel like I wanted that relationship. Through the relationships she had with other young people it made me confident in building a relationship with her and she went at my pace.

I had a consistent relationship with my advocacy worker because she totally understood that there were so many professionals and adults in my life to get views, opinions etc. She was astute to that and said, “I want to spend time whether it be for dinner or come into meetings or chill.” There was no force or any obligation on both parts. That strengthened our relationship. The better the relationship prior to needing the support, the more fruitful the support I received was. If I didn’t have a relationship and it was forced, I wouldn’t have felt comfortable disclosing information. I would’ve been guarded.

Once we had a good relationship she came to my hearings. I was in secure residential. Whilst in secure, my advocacy worker would help me. I didn’t fully understand what was going on around me and I felt confused by the processes that were happening in secure. I didn’t understand my rights so this kind of forced me to stay quiet. My advocacy worker helped me understand my rights. She would sit down with me and explain these. My advocacy worker supported me to have the ability to see for myself what was right, and what shouldn’t be happening in my life. I felt it was unjust at the time. I was lost in a process of professionals who were making decisions about me. She let me know about the UNCRC and this informed me to make the decisions that I took forward legally.

She helped me by going through reports with me before hearings so I could identify what I didn’t agree with and what I felt was incorrect. She then

**My advocate helped me understand my rights**

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She helped me by going through reports with me before hearings so I could identify what I didn’t agree with and what I felt was incorrect. She then
supported me to write my own letter and risk assessments to take to the Children’s Hearing. Without her I wouldn’t know how to do one. One time I wanted to get out and she helped me manage and build my own care plan to take to the panel to let me out of secure. Because my advocacy worker knew that within the room it could be stressful and overwhelming, she sat next to me and made me feel safe and comfortable. She told me it was up to me to make the decision. She then helped me to get a solicitor and draft complaints. This gave me confidence and empowered me. I let them make decisions but for the first time I gave input and my voice was heard. She helped fight this tough situation with me by supporting. This empowered me to speak up for others. Advocacy was explained to me that ‘they were there only for me.’ It can be really scary and frustrating as a child in a room full of adults and your opinions don’t get taken seriously. They were there to echo my voice and give it strength. It’s what matters to me and not what’s in my best interest. If I said I wanted to move to Spain the advocacy worker would say this. She was there speaking on behalf of me and only me. She never gave her opinion, she just helped me communicate mine and that’s what made me feel

"This empowered me to speak up for others"

empowered and trust her more. She couldn’t make any changes to my life whereas everyone else seemed to be able to, like social work and people I had never even met. My advocacy worker was very supportive. We could talk things through to find out what I wanted to say as opposed to the first thing that came to my head. She could see there was a lot going on. She would sit a pen and paper next to me so I could write down things I didn’t agree with and points I wanted to say. This allowed me to say what I wanted. It was anxious and distressing but she helped me have my voice heard. Most of all, I knew I would always get options, not opinions.
COLIN’S STORY
I was under a supervision order whilst I was staying in a residential unit for 8 years. During this time, I found that it was very confusing, busy and I didn’t understand what was going on around me. I had seen the advocacy worker would come out and sit with others and spend time with them. She then started always coming to visit me and make time for me. She made sure that we had an established relationship that was done on a 1-1 basis and this was nice. This created trust as initially I didn’t like approaching people. My advocacy worker waited and let me approach her and this started a very trusting relationship as opposed to a forceful one.

At my hearings, my advocacy worker would sit away if I wanted to speak and she respected this. During my panels the panel would ask me to leave the room while decision was being made, I hated this, but my advocacy worker was in the room and I knew she would be fighting for me and saying what I wanted her to say. It’s good that someone is in there letting them hear my voice whilst I was put out the room. My advocacy worker helped me fight for contact with my mum, who unfortunately she passed away. My advocacy worker knew what I wanted and she would challenge the panel.

“My advocacy worker knew I had needs and she helped me by letting me work with others. She helped empower me in my hearings through this.”

My life in care was very confusing and I didn’t understand what was happening so my advocacy worker tried to help me understand. She got me involved in groups where I could interact with other young people in the same situation as myself. My advocacy worker knew I had needs and she helped me by letting me work with others. She helped empower me in my hearings through this.

I hated workers and forms, so I wanted someone to engage in an unworkerish
way and make it natural. This is something that was missing in the hearing system. She would think on her feet of new ways to talk to me.

I was on so many things from child protection, supervision order and others. I also stayed in foster care and kinship care. The relationship ended with my advocacy worker when I left residential and went into supported care. I wish I had an advocacy worker throughout my transition to adulthood, it would’ve helped so much. We need more awareness and understanding as to what an advocacy worker can do for you.

I thought she was an advocacy worker for the house but I learned that she was an advocacy worker for me. She told me that advocacy was a choice and I could get rid of her if I wanted. This made me feel like I had an opportunity to say I don’t want this whereas with social work I don’t have a choice. This was a new thing but I was happy about it.

I had to tell social work if I wanted my advocacy worker there and they would contact her. I had no way of contacting them. Before the meeting social work would ask who I wanted at the meeting and they would appear.
CASE STUDY:
SKYLAR,
15 YEARS-OLD
LIVING AT HOME
Reason for Hearing: Skylar is not attending school regularly without a reasonable excuse.

Reason for Advocacy support: Disagreement about plans to place Skylar away from home to support her to attend school.

This is Skylar’s first Children’s Hearing so the advocacy worker explains the process of a hearing, the role of the panel members and Skylar’s rights. The advocacy worker highlights Skylar’s right to talk to panel members on her own, with support (subject to conditions). The advocacy worker explains the possible outcomes of the hearing and helps Skylar explore these. The advocacy worker explains their own role at the hearing - that they can support her to talk or they can talk on her behalf.

Skylar is able to share her views with her advocacy worker and explains that she would consider a move to a children’s home. Skylar would like to stay in the home during the week and with her Mum at the weekend. Skylar emphasises that time alone with her Dad is also important.

It helped to have someone seeing me on a regular basis and keeping me right about my meetings and having time to sit down and think about what I was going to say

The advocacy worker explains that the panel must consider Skylar’s views and take them into account when a decision is being made. The advocacy worker explains that Skylar can ask for conditions to be attached to the decision, and that if the conditions are agreed, they must be followed through.

The advocacy worker meets with Skylar for a second time and reviews their last discussion. Skylar’s views have not changed and she says that she would like to talk to the panel members on her own, with her advocacy worker’s support. The advocacy worker reminds Skylar that panel members are legally required to share an “overview” of their discussion with the others who have been asked to leave the room, on their return.

The Hearing: Skylar is nervous at the beginning of the hearing. It is not until she has time on her own with the panel members that she begins to relax and, with support
from the advocacy worker, she shares her views. The decision is made to put Skylar on a compulsory supervision order, with the conditions of contact Skylar had asked for.

Skylar is happy with the outcome and feels that her views have been listened to and taken seriously.

**Skylar’s Voice:**

When you first walk into the hearing it’s terrifying with three official people that are about to make a big decision in your life and they are just sat there looking at you. It feels like everyone is going to talk about you and make decisions for you while you just sit there and listen, without getting to add anything. It always seems like social work and school are all trying to make everything sound so much worse than it needs be, just to get the result that they want or think is best for you.

If I hadn’t got to speak to the panel members on my own then I wouldn’t have spoken with everyone there, I just couldn’t do it. I can speak to a few people but can’t speak to them collectively as a group, it just feels too awkward. It was scary speaking to the children’s panel on my own but if I hadn’t put my point across I feel as though the decision may have been very different and having my advocacy worker there made it much easier.

It was nice to have my advocacy worker there to support me before and during the hearing, and glad she has a sense of humour as it made the whole situation a little less tense. I was a little bit more chilled out with her there, otherwise I would have been much more panicky and I don’t think I would have had the confidence to ask to speak to the panel on my own. I would have struggled to say what I wanted because when I’m nervous I quite often forget the important things. It helped to have someone seeing me on a regular basis and keeping me right about my meetings and having time to sit down and think about what I was going to say. She helped me a lot and made notes of the important things I wanted to mention and helped to prompt me during the hearing so I didn’t miss anything.

I was very happy with the result of the hearing as I believed that I was going to be sent away from my family and have to live somewhere horrible. I owe a lot to my advocacy worker as I strongly believe that if I hadn’t had her there then things would have turned out very differently for me and I would not be where I am now.
CASE STUDY: MATT, 9 YEARS-OLD LIVING IN FOSTER CARE
**Reason for Hearing:** Grounds Hearing: Lack of Parental Care.

**Reason for Advocacy support:** The relationship between the social worker and Matt has broken down.

A referral is received the day before the hearing. The only opportunity to meet Matt is directly prior to the hearing. The advocacy worker explains to Matt that it is his decision to proceed. The advocacy worker explains that they are not in a decision making role and their main focus is to support Matt to understand the process and help him articulate his views. Matt says he understands and wants advocacy support. This is Matt’s first hearing. He has previously been excused. Matt has his papers with him and he believes many of the statements to be untrue. Matt is clear that he wants to attend this hearing. After initial discussion with the advocacy worker about his situation, Matt has a better understanding of the purpose of a hearing, his rights and what may happen. Matt would like the advocacy worker to sit beside him in the hearing and they agree to take a break if needed. There are 15 adults in the hearing.

While the grounds are being put Matt gets angry and upset and disputes the grounds. After some time, Matt and the advocacy worker take a break. Through support with his advocacy worker, Matt becomes calmer. The advocacy worker again explains what may happen next, the possibility of the Sherriff being involved and that there may be another hearing in three weeks if an interim order is imposed.

The hearing refers the Grounds to Court and an interim order is made. Matt is very clear that he would like to be involved in the decisions around his life and wants continued advocacy.

The advocacy worker supports Matt for two further hearings over a six week period and court proceedings begin. During this time his foster placement breaks down. The advocacy worker continues to meet with Matt regularly and as the relationship develops, Matt tells the advocacy worker that seeing his family is important to him and wants help to have this view heard. The advocacy worker’s independence from a decision making role and a caring role is key. Through raising his views directly with his social worker and articulating these views at hearings, decisions begin to reflect Matt’s views and he gets increased support to re-engage with his family.
CASE STUDY:
ELLIE,
11 YEARS-OLD
LIVING IN FOSTER CARE
Reason for Hearing/Advocacy support: Ellie is unhappy in her foster placement and wants to return to her father’s care.

Recommendation: Ellie remain in her current placement – no plans to increase contact.

Ellie is 11 and has lived in her foster placement for two years. She is unhappy and wishes to live with her father. Her advocacy worker has provided advocacy for the past year.

Ellie and the advocacy worker meet ten days prior to the hearing. The advocacy worker explains their role at the hearing, the process and what may happen. Ellie writes a letter for the Panel explaining why she wants to return home. At the hearing, the decision is for Ellie to remain in her foster placement.

Ellie is very upset with that decision. The advocacy worker spends some time with her after the hearing and agrees to a follow up visit as soon as possible. At this meeting Ellie’s view remains consistent - she is upset,

“Ellie’s views about staying with her father have not changed, however she states that although she did not get the outcomes she wanted, she understands the reasons why and that her views have been taken seriously and into account.”

and unhappy at the decision made. Ellie’s feels it was the wrong decision and that her father can look after her.

Ellie’s rights and options are explained to her. Ellie chooses to appeal the decision of the hearing. The advocacy worker explains the role of the solicitor and arranges an appointment for her. The solicitor deems Ellie to have capacity to instruct and lodges an appeal on her behalf.

In the weeks that follow, the advocacy worker supports Ellie at her solicitor’s appointments, and helps explain the Court process. The advocacy worker explains the range of potential outcomes and they agree a plan of sharing her view with the Sheriff.
At the Appeal Hearing, the Sheriff is asked to consider whether it is appropriate for Ellie to be present during the proceedings. The Sheriff asks Ellie directly and she responds clearly that she wishes to be present.

The Sheriff grants the appeal on the basis that the Children’s Hearing had not given sufficient consideration to Ellie’s views. He asks that another Children’s Hearing take place.

Ellie reports that she feels heard and taken seriously, she feels a sense of achievement and empowerment. Again, the advocacy worker explains that this does not mean that she will return to her father’s care and that another Hearing must consider this. Ellie states that she feels listened to.

At the next hearing, the advocacy worker supports Ellie to express her views. The Hearing decides that Ellie needs to continue living in foster care, but that contact with her father must be increased.

Ellie’s views about staying with her father have not changed, however she states that although she did not get the outcomes she wanted, she understands the reasons why and that her views have been taken seriously and into account.
CASE STUDY:
MARY AND EUAN,
FOSTER PLACEMENT WITH TWO YOUNGER SIBLINGS
**Reason for Advocacy support:** The children have had numerous placement moves and many changes to social workers, carers and other professionals. Through this process the children’s voices and views have been lost. The foster carers referred the two older children.

A decision had been taken that, due to extensive historical abuse and the potential for further trauma, the children be excused from their hearings. The children asked to attend their hearing, the foster carers shared this view and their request was refused. The carers believe that no one is listening to them.

**Reason for Hearing:** Children feel that their views are not being considered.

The advocacy worker meets the children at the foster placement and, over several visits, builds up a relationship and gathers their views independently of the carers. Mary and Euan share their disagreement about the decision to attend their hearings, their views are consistent throughout the meetings with the advocacy worker and they insist that they want to attend. The advocacy worker explains the process, what they should expect and agrees how they want to express their views. The advocacy worker explains their rights within the hearing. A pre-hearing visit to the Hearing Centre is arranged. Mary and Euan tell the advocacy worker that they are ready, and an early Hearing is called on their behalf. The social worker does not agree with this decision and is not impressed, but the advocacy worker explains Mary and Euan’s views and wishes.

The advocacy worker continues to see Euan and Mary to prepare them for the hearing. The advocacy worker contacts the reporter on the children’s behalf, explaining the circumstances and arranges separate waiting rooms and separate exit plans – the children do not wish to see their parents and or

Mary and Euan feel hugely empowered and listened to. They are able to understand the decisions.
be in the same room as them. This is agreed prior to the hearing. On the day, Mary and Euan are anxious but determined. With support from the advocacy worker, both Mary and Euan are able to share their views.

The children are able to exit the hearing room into a special linked room, without risking an encounter with their parents. The advocacy worker spends time playing with the children until they re-join the hearing to be advised of the decisions.

Mary and Euan feel hugely empowered and listened to. They are able to understand the decisions. On their behalf, the advocacy worker asks for continuity for the next hearing from the Panel, with a ‘known face’ providing re-assurance for both.

Neither Mary nor Euan report feel traumatised by attending their hearing. They feel included and empowered. Despite the concerns raised by others, the process has been managed in a safe and supportive way, which has enabled the young people to fully participate in their own hearing.
CASE STUDY: EMMA, 17 YEARS-OLD LIVES IN RESIDENTIAL CARE
**Reason for Hearing:** Consideration of Secure Care.

**Reason for Advocacy support:** Self referral for advocacy support.

Emma has experienced care from an early age, spending the last few years in residential care. She has extensive experience of the Hearings System and has previously used advocacy support. Emma is introduced to a new advocacy worker as she moves into a new residential home.

The advocacy worker meets Emma three times over a six-week period. Emma is facing a series of major challenges and is finding it difficult to settle into her new home. There are concerns about her risk-taking behaviour, and secure care is being actively considered.

Emma has a thorough understanding of the Children’s Hearings System. Her knowledge, age and experience allows the advocacy worker to have a very open conversation with her about the options available. Emma’s views about what she wants in her care plan are put in writing and shared with her Social Worker and the Children’s Reporter prior to the hearing.

Emma’s views come into conflict with that of her social worker and carers and as such she reaches out for advocacy support – the advocacy worker remains independent from the decision makers and carers in Emma’s life.

The advocacy worker supports Emma to meet with her solicitor. Emma’s social worker shares with her the recommendation that her current home is not a realistic option for the future. As a result, Emma no longer wants to go to her hearing. Whilst respecting Emma’s wishes, the advocacy worker explains to Emma her right to talk to the panel on her own. Emma agrees to this and decides to go to the hearing.

*Emma has been able to obtain the outcome she believes is right for her by being open and honest with the hearing, supported in this by her advocate.*
Emma is supported by the advocacy worker and solicitor to talk to the panel members on their own. Emma is able to share her views and the panel reflect on the written piece previously submitted.

After the others re-join the hearing, a full and open discussion follows. The advocacy worker’s relationship with Emma gives the advocacy worker confidence that they have a good knowledge of her views and of the role she would like the advocacy worker to play in her hearing. The advocacy worker reiterates, reinforces and expands on what Emma has to say at relevant points. There is a clear feeling that Emma is the most important person within the hearing, that her voice and insight into her Plan is central. It is also clear that Emma is asking the Panel to make a strong decision to support her needs.

The hearing takes three and a half hours and the decision made is to remain in her current home. The hearing identifies a number of areas for additional support for Emma.

Emma has been able to obtain the outcome she believes is right for her by being open and honest with the hearing, supported in this by her advocacy worker. The understanding and trust that she has had in the advocacy worker’s role and its independence to those in the decision-making role was key to enabling her to have her voice heard.
CASE STUDY: CALLUM, 9 YEARS-OLD LIVES IN RESIDENTIAL CARE
Reason for Hearing: More contact with family.

Reason for Advocacy Support: Child is requesting more contact with family.

Callum is 9 and he has autism. He has been living in a residential home for over two years.

The advocacy worker knows Callum and has supported him at previous hearings and other formal meetings. The advocacy worker uses play as a medium for communicating with Callum and gathering his views.

Callum likes to repeat the games they play and often insists that certain games are played over and over. One game involves Callum creating an imaginary character. He has given it a name and many attributes. Over time, the character has increasingly come to provide a safe space for Callum to talk about things that matter to him in the third person.

Over several meetings Callum begins to express a view around family contact and when preparing for a specific hearing, Callum, via the medium of play, expresses again his wish to see his family more. During one session Callum states vehemently “I need to see my family more,” banging his hand on the table in the rhythm of the spoken words. The advocacy worker shows Callum that this had been written down on their pad. Callum takes the advocacy worker’s pen and underlines the word “more” and adds a row of exclamation marks. The advocacy worker suggests that they take a picture of this and share it with the panel. Callum decides this is a good idea.

Callum is able to articulate his views through his imaginary character, and the remain consistent throughout the preparation work for the hearing. By presenting Callum’s views, gathered through play and presented in a variety...
of ways, the panel members were able to use this information to inform their
decision to grant Callum more contact with his parents. Contact is now
unsupervised. Callum has been supported by his advocacy worker to talk
about how much he wants to do the things that children do with their dads,
such as getting out and doing fun stuff rather than meeting in a family centre,
watched over by professionals.

Callum is flourishing on the back of these changes. He is more settled and
happier. He also now understands how he can be listened to and empowered
within the Children's Hearings System and has begun to raise with his
advocacy worker some other changes that would be of real importance to
him.
CASE STUDY:
JAMIE,
14 YEARS-OLD
RECENTLY MOVED FROM A RESIDENTIAL HOME TO SECURE CARE
Reason for Hearing/Advocacy support: Continuation of secure order.

Jamie lives in a residential home, but the Head of Service within the Local Authority authorised a transfer to a secure unit based on concerns for his behavior. Three weeks previously, the advocacy worker attended a hearing on Jamie's behalf. Jamie has never attended his hearings. He struggles with his mental health and finds the prospect of hearings extremely challenging, causing acute anxiety. At that prior hearing, it had been agreed that Jamie should remain in his current placement at the residential home. Jamie agreed with this decision.

A short time after that hearing there was upheaval in the residential home and this impacted on Jamie who became anxious. His anxiety was reflected in challenging behavior. The transfer to secure accommodation ensued.

The advocacy worker offers to support Jamie and although he is anxious he decides to go to the hearing for the first time. The advocacy worker explains the importance of the decisions to be made and they work together to prepare for the hearing. The recommendation from Social Work is to keep Jamie in secure care for a further three weeks.

The advocacy worker is alongside Jamie throughout the hearing and, with support, he is able to share his views. The advocacy worker re-enforces aspects of what Jamie says, and reminds him of things he had prepared for the hearing. The Social Worker continues to recommend that Jamie remain in secure accommodation.

After a lengthy hearing the decision is made for Jamie to return to his residential home. Jamie is surprised but delighted that his views have been taken seriously and recognises that without the support of the advocacy worker he would not have attended the hearing and the outcome might have been very different.
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