

KAG

ADVOCACY

ANNUAL REPORT 2005 ~ 2006

ANNUAL REPORT 2005 ~ 2006



ABOUT US

KAG Advocacy (KAG) exists to help vulnerable people have a say in decisions that affect them, and how they live their lives.

We do this by providing independent advocacy support to individuals and groups at no direct cost to themselves. Advocacy is provided by our specialist employed staff and trained volunteers.

KAG has a number of services available to help. They are:

- Citizen Advocacy for people with mental health problems and learning disabilities
- Specialist Advocacy for people from black and ethnic minority communities

- Direct/Crisis Advocacy, in-patient and group advocacy
- Self Advocacy and mentoring for people with mental health problems
- Appropriate Adult scheme

All our services are governed by our core beliefs - social justice, self determination and commitment to the individual. We listen to our clients, understand their needs, ensure they are aware of their rights and provide relevant information. Finally, we support them in speaking up for themselves (self advocacy) or, where this is not possible, we speak for them (advocacy).

More information can be found at:
www.kag.org.uk





CHAIR'S REPORT

Even a small local charity such as Kingston Advocacy Group is not immune to business jargon and this year we have been “rebranded”. We have been concerned for some time that our formal title does not properly reflect the geographical area in which we operate. Our main office is in Kingston, but we also have offices in Richmond and Epsom and, increasingly, we have clients (and funders) in an even larger area. So, although Kingston Advocacy Group will remain our formal title, for day-to-day purposes we are now known as KAG Advocacy. This recognises that we are widely referred to as ‘KAG’ but also emphasises our main business of advocacy. We hope that you like the new logo on the front of this report.

Elsewhere in the report, our Director, Helen Clarke outlines the challenges posed by changing legislation. How the provisions of the Mental Capacity Act 2005 will be implemented has not yet been finalised. But as well-regarded experts in the field of citizen advocacy, we have ensured that we are ready for the changes which will be happening as well as helping others to be ready. It is a tribute to the high regard in which Helen and KAG Advocacy are held that she has been invited by funders to run a series of seminars to inform their staff of the likely impact of the legislation.

Last year’s report celebrated our volunteers and showed how their wide-ranging experience and skills added value to the work we do. This year we continue that theme by looking at how volunteers, staff and KAG Advocacy more widely can make a difference to the lives of our clients. While statistics and reports of how we spend our funders’ money are vitally important in showing that we are an efficient and well-run organisation, they can be rather dry. The case histories in the following pages breathe life into them and vividly show how we can make a very real difference to the lives of those we help. I am sure that, like me, you will be touched and impressed by the stories told.

Mike Todd

DIRECTOR'S REPORT

The year 2005-2006 was one of consolidation and local development for KAG.

The Mental Health projects based in Kingston, Richmond and Epsom continued to deliver sensitive and effective advocacy support to vulnerable individuals, against a backdrop of constant change in mental health services; the Learning Disabilities project in Kingston extended its service to people with little or no communication skills whilst SHOUT! established a ‘Drop-In Café’ which meets twice weekly at different venues in the borough; the BME project responded to the complex needs of a growing number of individuals and families from diverse communities across the boroughs of Kingston and Richmond; the Mentoring project continued to find work placements for people with mental health problems; and the Appropriate Adult scheme continued to attract and train volunteers for Kingston police station.

During the year KAG Advocacy was approached by a private hospital in Redhill to provide them with an advocacy service. This was set up on a ‘surgery’ basis and is working very well. We also responded to requests for advocacy, on a spot purchase basis, from Surrey, Richmond and Bracknell in Berkshire.

Office accommodation presented a difficulty for two projects. In Mid-Surrey the office provided by the Council proved to be unsuitable as it did not allow for client privacy. Our staff therefore moved to a temporary office in the Ashley Centre, Epsom on a commercial let basis. As this was expensive we continued the search for an affordable and suitable office and we have now moved to West Park, Epsom. In Richmond, the user group, RUF, made the decision to give up their office and move into the KAG Advocacy office, in an attempt to reduce costs. They were forced to take this step as a result of a drop in the grant provided by Grants Direct.

Despite insecurity of funding and changing priorities, our staff continued to provide a dedicated and efficient service ably assisted by a team of committed and loyal volunteers. I would like to take this opportunity to thank all staff and volunteers for their hard work and commitment during the year.

Helen Clarke



hope



LOOKING TO THE FUTURE

There are two pieces of legislation on the horizon that will have a definite impact on KAG Advocacy. These are the Mental Capacity Act which received the Royal Assent in April 2005 and the Mental Health Bill which was scrapped early in 2006.

In her introduction to the consultation document Rosie Winterton (Minister of State, Health Services) stated that,

*the Mental Capacity Act 2005
aims to empower people
who lack capacity to make decisions,
put them at the heart of the
decision-making process, and
provide clear safeguards for
them and their families.*

The Act creates a new service – the Independent Mental Capacity Advocate (IMCA). Its purpose is to help vulnerable people who lack capacity who are facing important decisions made by the NHS and Local Authorities (LAs) about serious medical treatment and changes of residence - for example, moving to a hospital or care home.

From April 2007 NHS Bodies and LAs will have a duty to ensure that the IMCA service is up and running. To this end, Government funding will be made available so that LAs and Primary Care Trusts (PCT) can commission the service jointly from a local organisation that will provide an independent IMCA service. The Government has stated that a) independent advocacy organisations commissioned to provide the IMCA service should meet appropriate organisational standards as part of the commissioning/contract agreements and b) advocates providing the IMCA service should receive appropriate training covering the key competencies, skills and knowledge required including the law, diversity issues and communication skills.

*KAG Advocacy must be prepared
to take on this new challenge!*

The provision of advocacy for people detained under Mental Health legislation is now in a precarious position following the announcement that IMHAA (Independent Mental Health Act Advocacy) will not feature in amendments to the 1983 Mental Health Act. The Government has decided to scrap the controversial draft Mental Health Bill, which included proposals for the introduction of IMHAA. It has indicated that it will 'support the development of advocacy services for people detained under the Act through other means'.

KAG Advocacy will be alert to this and continue to take advantage of opportunities that arise for,

*promoting advocacy as an essential
safeguard for vulnerable people.*

MAKING A DIFFERENCE

Our staff and volunteers make a difference in the lives of everyone we help. Often, the difference we make is significant - sometimes we can help someone transform his or her life. Here are the stories of some of those we have helped.

*Stephen's story
helped from the brink of despair*

Because of his poor health and the unexpected death of his wife, Stephen became severely depressed and alcohol dependant. He had to give up his home and he attempted suicide. This led to his admission to a mental health ward.

Bob became his advocate and helped Stephen bring his debt under control. He was then able to get Stephen's company pension reinstated because of his poor health and obtained a grant from Stephen's trade union. Finally,



a tax rebate and cancellation of late penalty charges was arranged. State Benefits were later awarded and Bob was able to support Stephen's application for housing.

From suffering a complete loss of his confidence, Stephen slowly resumed control of his finances and life.

He moved into a small flat and re-established contact with some family members.

Stephen has told Bob that 'I couldn't have done it without you'. Bob says that it was often difficult and frustrating helping Stephen, but "it is fantastic that Stephen has now put most of his problems behind him. I am grateful to KAG for being given the opportunity to help someone make a real difference in their lives."

*Amina's story
happy ever after (we hope!)*

Not all advocacy partnerships make a quick fix. Sometimes things go wrong but an advocate can still make a difference by supporting their partner to make a compromise or to try another route to achieve their dream.

Margaret, supported her partner, Amina, to see her boyfriend, Maheer, in the evening. The couple were very much in love. They were both Muslim and shared similar interests. They both had learning disabilities. Amina lived fairly independently but her placement was not successful and she returned to live with her widowed father. Maheer's residential home discouraged visits from Amina, so the only contact the couple had away from the Day Centre was with Margaret.

Margaret was then told that it would no longer be possible for her to take the couple out alone because of the concerns of Amina's father. But Margaret didn't give up and continued to see Amina on a weekly basis. She insisted that Amina should be offered sex education and this was arranged. She also proposed that a paid member of staff should be made available to support the relationship. This was acceptable



to Amina's father and the arrangement has been approved. Margaret's next goal will be to try and get the couple some opportunities to be alone together. Margaret says,

"Amina has faced many set-backs, but I hope that Amina will now be able to develop her relationship with Maheer".



*Mary's story
overcoming accommodation problems*

Mary is elderly and disabled and had been trying for some years to arrange for the Housing Association to carry out repairs on her bungalow.

She had become very demoralized and her psychiatrist referred her to KAG.

Roger, her volunteer advocate, put in order the mass of paperwork which Mary accumulated and helped her obtain a grant for repairs from the council and other benefits and allowances. He then successfully negotiated Mary's move into temporary accommodation. Mary says "I am so grateful to Roger for helping with all the forms etc". Roger considers that the key to him being able to help was to gain the confidence of Mary in his ability to straighten-out her paperwork. It was also "very helpful to have a KAG co-ordinator who I could turn to for advice".

Mary moved out of her bungalow in May and the property has been brought into good repair; she will move back soon.

Roger continues to be involved and ensures that all necessary contacts with care and welfare agencies take place promptly.

trust



Ludmilla and Boris' story help with dealing with the results of abuse

Ludmilla, Boris and their eight year old son were given asylum in the UK and were housed in Glasgow. However,

*the whole family were subjected
to physical assaults and racial abuse.*

On discharge from hospital they were advised to move away. The family chose to settle locally but ran into difficulties. Their accommodation was sub-standard and they began to accumulate debts. They needed treatment for various physical and mental health issues and Ludmilla became dependant on diazepam. They came to KAG for help.

We contacted the Housing Department which agreed to improve the family's accommodation and later, the family was moved to a permanent house of their choice. We then approached some charitable organizations and Ludmilla and Boris were given £650 to pay their fuel bill and a school trip for their son. With the help of the PALS and PCT we arranged for them to have a new GP with whose help the family slowly started recovering.

Ludmilla is no longer drug-dependent and has completed a computer course. Both she and Boris are now working full time. After the horror of the conditions in their home country and the disgraceful way in which they were treated when they first settled in the UK, with KAG's help,

*the family's quality of life
has improved beyond recognition.*



Mick's story giving and taking in an advocacy partnership

John has been supporting Mick in a citizen advocacy partnership for over a year. When they were first "matched" (they always like to have a laugh over that one with friends!), Mick had very low self-esteem, he found it hard to walk past slot machines and was involved in family disputes. His doctor recommended him for cognitive behavioural therapy and counselling.

With John's help and encouragement, Mick has been trying things to help him to get back to work. John set-up a back-to-work day for Mick which gave him the confidence to book an appointment at the Jobcentre. Mick is now a volunteer at the church youth outreach programme and John is encouraging him to consider working with disadvantaged teenagers, as he communicates well with them and they enjoy his involvement.

Mick says that he finds the attitudes and opinions of others, particularly at his church, hard to live up to and his self-esteem takes a knock. But, "it's great to have John as my advocate (he isn't a church-goer) because I get another way of looking at things.

*This helps me to make up
my mind about things".
Mick says that John has been
very helpful in practical ways too*

and jokes that "John found a furniture charity where I bought a very nice Habitat sofa for very little, whereas John's cost him hundreds!".

John is glad to be able to support Mick. "I feel that I get back as much as I give in the partnership and I hope to support Mick until his confidence is regained and Mick feels able to strike out alone".

*Emma's story
volunteering as an Appropriate Adult*

I decided that I would like to volunteer to work with young people, so I telephoned KAG and discovered that they run an appropriate adult scheme for vulnerable young people who require support and assistance while in custody.

After attending five training sessions in the evenings and "shadowing" an experienced appropriate adult at the local police station on a number of occasions, I was then put on the rota as a fully trained appropriate adult. Each time I am on call and am asked to go to the police station there is usually a confused and vulnerable young person who needs help.

They are always glad to see someone who is willing to give them some time and unconditional support. It may be the first time they have spoken to someone about the problems they face.

As an appropriate adult, my main concerns are the physical and emotional welfare of the detainee and making sure that they understand the police procedures. The role is not a passive one and an active part needs to be taken when supporting the detainee. My volunteering commitment is usually about 4 hours each month. This could be any day of the week between the hours 0900 and 2330 hours but this is arranged for a time and day which is convenient to me.

I don't know if I ever make a difference to a young person's life, but I like to think I do.....sometimes! It's certainly nice when no one else wants to help and the young person feels that they are on their own that your support is appreciated. Especially when they say 'thank you'!

It's good that I can give a little back for the community rather than taking all the time.



*SHOUT!
our self-help group*

Pictured here is one of our members in the throes of providing the most important part of the Drop In – the refreshments. Never underestimate the power of tea and biscuits (and very good ones I might add) to break the ice and to keep people sociable and affable.

Enquiring and asking what people want and when they want it, is part of the climate in which we work.

When people requested bingo we provided it and now the members organise it for themselves, calling the numbers with accuracy and ingenious allegories. Members support each other ensuring even the least able find every number called. Self esteem and confidence are fostered.

People are encouraged to raise advocacy issues. Sometimes these might be very personal, for example, about housing, relationships or benefits, and we deal with these on a one to one basis. But when issues are of general interest, for example transport or leisure, we might take these matters up with the learning disability parliament.

We all like the SHOUT Café. We feel secure and relaxed there. It's proving to be a really good venue to explore and promote the interests of people with learning disabilities.





TREASURER'S REPORT

The summarised accounts for 2005/2006 are opposite. The full audited Financial Statements are available from KAG Advocacy.

The Statement of Financial Activities shows that we were able to operate within our income for the year. Income was about 10% higher than 2004/5 as grants and other income from charitable activities both increased. Expenditure was carefully managed and was contained to a similar total to last year. Consequently, we achieved a small surplus of just over £23,000, compared to the previous year, when a small deficit was reported.

This surplus is added to funds brought forward of £61,000 to leave us with funds of £84,000. This amount represents 3 month's operating expenditure and so is well within the guidelines. Most of these reserves, some £62,000, relate to specific projects and so are "restricted" to activities that meet the funders' criteria. The "unrestricted" surplus is therefore only £22,000.

Details of the main funders of KAG can be found elsewhere in this report. It is important to recognise that we rely on five funding streams from local authorities and NHS trusts for more than 76% of our income. These bodies are continuously reviewing how they allocate funds to provide the types of services KAG offers.

Our main cost (86% of total expenditure) is the salaries and related expense of our staff. The financial statements do not include any amount to recognise the considerable amount of time given by the many volunteers who support KAG's activities.

STATEMENT OF FINANCIAL ACTIVITIES

YEAR 2005 / 2006 ACCOUNTS

STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 ST MARCH 2006				
Descriptions	Restricted Funds £	Unrestricted Funds £	2006 Total	2005 Total
Incoming resources				
Incoming resources from generated funds				
Voluntary income	279,441	18,106	297,547	275,479
Activities for generating funds	-	-	-	-
Investment income	-	2,377	2,377	2,990
Incoming resources from charitable activities	2,784	30,198	32,982	25,133
Other incoming resources	(39,500)	39,500	-	-
Total incoming resources	242,725	90,181	332,906	303,602
Resources expended				
Costs of generating voluntary income	-	7,338	7,338	6,413
Charitable activities	234,845	66,045	300,890	302,541
Governance costs	1,284	248	1,532	1,663
Total resources expended	236,129	73,631	309,760	310,617
Net incoming/outgoing resources	6,596	16,550	23,146	(7,015)
Net movement in funds	6,596	16,550	23,146	(7,015)
Total funds brought forward	15,716	45,223	60,939	67,954
Total funds carried forward	22,312	61,773	84,085	60,939

STATISTICS

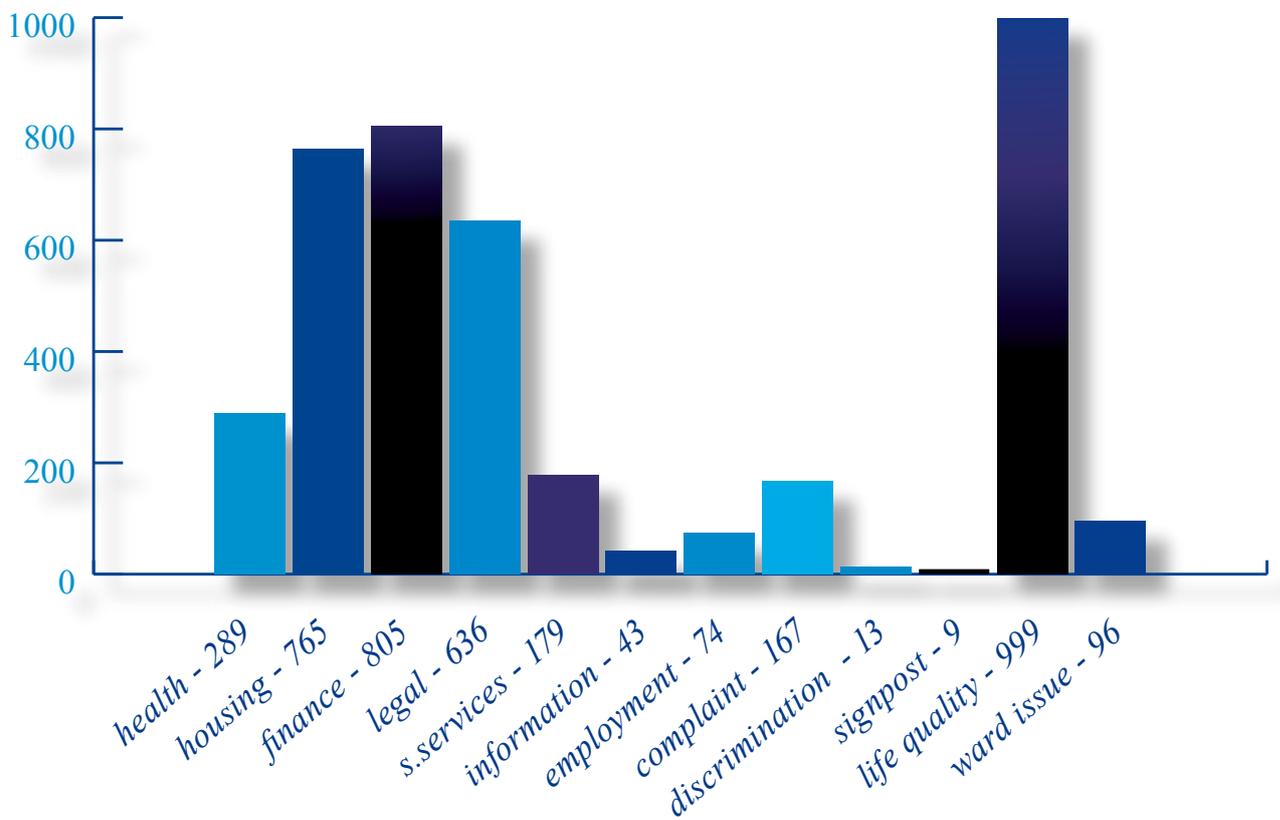
The bar chart shows the type of issues which we dealt with on behalf of our clients in 2005-2006. These include not only practical matters such as debt, housing and health, but more general support and representation which can have a very real impact on the quality of life of those we assist.

KAG Advocacy have a number of projects that rely on the hard work of volunteers to provide the service. Volunteers have added value to what we do in the following ways:

- volunteer appropriate adults acted on behalf of vulnerable detainees on 152 occasions totalling 456 hours of volunteering at the police station.

- the citizen advocacy project for those with learning disabilities had 19 partnerships last year resulting in nearly 1000 hours of volunteering.
- the citizen advocacy project for those with mental health problems 31 partnerships resulting in over 1550 hours of volunteering.
- the management committee and other administration volunteers provided 440 hours of volunteering.

Volunteers have, therefore, given us nearly 3,500 hours of their time - the equivalent of approximately 4, full time members of staff.





KAG Advocacy would like to thank those who supported us in 2005-2006

Association of London Government
Royal Borough Kingston upon Thames
Surrey County Council
East Elmbridge and Mid Surrey PCT
South West London & St George's Mental Health Trust
Richmond Parish Lands Charity
Hampton Fuel Allotment Trust
Barnes Workhouse Trust
Richmond CVS/PCT/London Borough of Richmond upon Thames
The Alfred Trust
British Institute of Learning Disabilities
Kingston Voluntary Action
The Wates Foundation
Catalyst
Thames Community Foundation
City Parochial Foundation

and several individuals who have kindly made donations.

Trustees

Mike Todd *Chair*
Chris Ingram *Secretary*
Derek Ormond *Treasurer*
Jean Smith
Kathy Gardner-Brown
Philip Hitchen
Claire Greenford
Chandresh Thakrar
Marion Fentiman
Nicholas Ainley
Fred Friedman



KAG ADVOCACY

Siddeley House

50 Canbury Park Road
Kingston Upon Thames
KT2 6LX

Tel: 020 8549 1028

email: rights@kag.org.uk

website: www.kag.org.uk

Mid-Surrey Office:

Room G89 Ramsay House
West Park
Horton Lane
Epsom
Surrey
KT19 8PB

Tel: 0188 3383838 ext 5849

Richmond Office:

ETNA
13 Rosslyn Road
Twickenham
TW1 2AR

Tel: 020 8744 9251

email: richmond@kag.org.uk

To promote, protect and uphold the rights of vulnerable people - To promote, protect and uphold the rights of vulnerable people .