



**Working for people  
with mental health  
issues to have a  
stronger voice!**



**‘Much  
More Than  
a Label’**



**MAD PEOPLE'S  
HISTORY & IDENTITY**



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# welcome



Welcome to CAPS' new look Annual Report 2017.

With nine Lothian-wide collective advocacy projects this year, in addition to our core individual and collective advocacy work in East Lothian and Midlothian, we have lots to tell you about.

The experience-led collective advocacy projects have created various resources (films, booklets, training sessions) which our many new volunteers use to educate others and raise awareness, often as early intervention in schools and universities. Our core work in East Lothian and Midlothian is enhanced by the knowledge and creativity of our staff and volunteers, arising from the Lothian-wide topic specific projects. You can read more detail inside.

New initiatives this year include the growth of Arts as Advocacy, where people express their views and experiences in creative, artistic ways. Our involvement in the Stories of Changing Lives work is a good example of this. The growth of volunteers with lived experience in collective advocacy, supported and developed by a Volunteer Co-ordinator, has increased the reach and diversity of our peer work.

These innovative approaches to independent advocacy have been taking place within a changing environment as Health & Social Care Partnerships replace the traditional decision-making structures we've known for the past 25 years. The challenges presented by the introduction of Universal Credit in both of the local authority areas we work in have created additional stresses on the staff team and of course on the people we work with. The benefits processes don't seem designed to accommodate people with mental health issues, with more digital systems and much less chance of any kind of person-centred approach. The necessity for individual advocacy increases as it becomes harder to be heard within the welfare benefit system - harder to have your mental health needs recognised.

CAPS is very lucky to have such a passionate staff team who put the people we work with first. They bring a wide range of skills and knowledge to their roles. Together, the organisation is much stronger than the sum of all the individual people. We've now completed our digital ambitions with electronic case management software for individual advocacy. This, added to the new software upgrades and lightweight portable laptops as well as smartphones for easier mobile communications, has been a necessary investment to ensure efficient, effective operation for the future.

I hope you enjoy reading about what we've been doing – working in many ways, so people with mental health issues can have a stronger voice!

*Jane*

# lothian-wide experience-led projects

## Oor Mad History

The Mad People's History and Identity course celebrated five years of development with an exhibition of some of the PhotoVoice submissions from past students at Queen Margaret University (QMU). Over the past three years, 50 students with their own mental health experience have attended this unique course which looks at mental health from a social and political perspective.

Students spoke about their learning from the course and how this has affected their feelings about their own mental health experiences. This course engenders social connectedness, encourages critical thinking and aims to increase people's sense of agency. This word cloud shows the words the students used.



The success of the course leads to invitations to showcase this work. This year staff and volunteers presented at the Critical Voices conference in Cork and the Asylum conference in Manchester.

Many more volunteers have got involved in the Participatory Action Research work at QMU which is evaluating their experiences of the course.

Another development from the university course is the Mad Matters community course. Students felt there was a need, and a demand, for learning which was more accessible within the community and so they came together to offer a pilot course at the Stafford Centre in early 2016. A taster session was offered at the LGBT Health & Wellbeing Centre and plans are underway for a course in partnership with the Orchard Centre in Midlothian.



This year saw some staff changes as Kirsten Maclean, after 8 years developing the Oor Mad History work, reduced her hours to undertake a Ph.D as well. Lili Fullerton swapped roles to job-share in this project from November 2016 to October 2017.

## Arts As Advocacy

SCOTTISH  
MENTAL HEALTH  
ARTS FESTIVAL

As part of the project restructure, a new post of Arts as Advocacy Worker was created to focus on the work relating to the Scottish Mental Health Arts Festival. Pam van de Brug, who previously led the Conversations for Change project for CAPS, joined us in October 2016.





In October 2017, the Out of Sight Out of Mind (OOSOOM) exhibition centred around Summerhall was bigger than ever. It featured work by around 160 contributors with experience of mental health issues.

A new feature was OOSOOM Uncovered: sessions where people could come and meet some of the artists and hear the background to their work, giving an additional dimension and connection for the audience.



An estimated 1544 visitors attended the Summerhall exhibition which was planned, organised and invigilated by an amazing group of passionate and dedicated volunteers.

We worked with many different partners, all coming together to display artwork in a variety of ways at the Chaplaincy Centre, Central Library, Royal Edinburgh Community Gardens, LEARN office, Augustine United Church, the Stafford Centre, Forest Café, Edinburgh Napier University as well as Summerhall. A huge thankyou goes out to all who commit so much time and energy to this amazing festival.

## Experiences of Psychosis



The main focus of the Psychosis project this year has been the promotion and screening of the Experiences of Psychosis film which was made the previous year.

The group screened the film to members of the East Lothian Choose Life group, to Queen Margaret University staff responsible for pastoral care, and to clinical psychology students at Napier University. Currently the film is being shown to fifth year medical students at Edinburgh University as part of an ongoing programme and the group are also contributing to the department of psychiatry seminar series. These sessions stimulate lots of

questions and facilitate real learning by hearing directly about the range of people's experiences of psychosis and how it has affected their lives.

*"Seeing the long-term impact, and the impact on the whole of someone's life – not just discrete episodes, or about the crisis times."*

Fingal Dorman joined us as the new project worker in March 2017. Several new people have joined and the group are considering their priorities for the year ahead. NHS Education Scotland sought the views of the Psychosis Group to inform their national training.



We supported the group to examine the content of their e-learning modules and participate in video conferencing meetings with NHS staff across Scotland. Two of the group then volunteered to help teach in a pilot session by contributing their own lived experience.

## Much More Than A Label

This collective advocacy project is open to people with experience of Personality Disorder. A two day course led by people with experience is a unique factor of this project. There is little training on this subject available to people and workers anywhere in Scotland which makes this real life course very important to Lothian, and also very popular! Courses were run in West Lothian, East Lothian and several in Edinburgh.



The group has also held some shorter sessions upon request. This year to:

- AdvoCard staff and volunteers in Edinburgh;
- Edinburgh University Clinical Psychology students;
- Members at the Orchard Centre and the Spring project in Midlothian;
- The Dunbar Anxiety group and the Connect group in East Lothian;
- Edinburgh Napier University Mental Health Nursing Students and the subsequent assessment of student presentations.

CAPS continued to input people's views into the steering group for the NHS Women with Multiple and Complex Needs work. As the work progresses, people will be able to get more involved. We attended the Scottish Personality Disorder Network Conference and contributed views about how it could involve people's views and experiences. We plan to get more involved. The Personality Disorder toolkit created by people's experiences some years ago continues to be available online from CAPS website. This increases the accessibility of this valuable resource.



## Trauma Centre collective advocacy project



Work to redesign the Rivers Centre which provides services for people who have experienced trauma, was set up by NHS Lothian as a Public Social Partnership. CAPS role is to convene a reference group so people's views can be included at a decision-making level.

Initially we held a consultation about the language people thought should be used in a leaflet about the new centre and its services.

People from all areas of Lothian can attend drop-in sessions at the new centre in Fountainbridge. CAPS made sure consideration was given to the accessibility issues which would affect people from East Lothian and Midlothian. The set up and feel of the reception area, disabled access, the role of link workers, integration of young people's services, and research and training are just some of the topics people have had important views about. This helps to ensure that this new service is truly person-centred and influenced by people who know what matters from their own experience.

## Seen But Not Heard – Eating Disorders project

The film made by young people about their experiences of eating disorders, “Spilling the Beans”, is the basis for lots of awareness raising work by the collective advocacy group. Originally filmed in a high school in Midlothian, the demand for screenings and subsequent discussion has been high.



Niamh Allen, the project worker, and several volunteers have attended high schools in Midlothian and East Lothian on lots of occasions and youth groups in Edinburgh. They have input into various sessions for students at Queen Margaret University and feedback from students demonstrates how valuable hearing the lived experience perspective is in changing attitudes and challenging stigma. Many more people have attended a two day training session which Niamh and the group deliver regularly via LEARN.



A more recent development has been a celebratory awareness raising event in conjunction with “beat” the national eating disorder charity. This event reflected on the work done with the Butterfly Bursary funding over the past five years and showcased the creative talents of several members of the project.

*“Thank you very much for engaging so beautifully in something so personal and getting across the important message that every person within the eating disorder has their own story and therefore needs to be heard without any particular formula in mind.”*

## Lothian Voices

This project enables the views of people across Lothian to contribute into the wider planning framework of NHS Lothian’s mental health and wellbeing strategy – A Sense of Belonging. Now an annual event, CAPS holds the People’s Conference. This is an event planned by people, for people. This year AdvoCard worked with us on an event about how Health & Social Care services could better support people who were accessing welfare benefits. It was called **Swings and Roundabouts**. A full report of what people said is available via the CAPS website. These thoughts will contribute to the wider campaigning that CAPS is doing around the difficulties we know about from people we work with in Individual Advocacy as well.

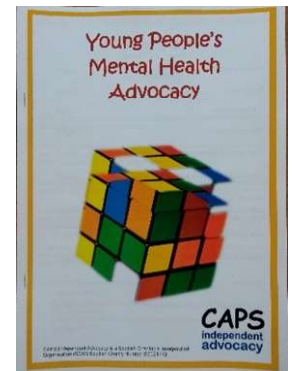


*“I didn’t know how the system worked here. In Poland you see a psychiatrist. Here, any GP can prescribe antidepressants.”*

We were very lucky to host Magda Lenczowska on placement during her final year as a Community Education student. Magda conducted some research into Eastern European people and their understanding of Independent Advocacy and accessing mental health services. Her report has now been produced and distributed by us. See the website.



Another new area for Lothian Voices was gathering views of young people about whether they had enough opportunity to have a voice about mental health issues. We conducted an online survey; spoke to lots of young people at the Piece of Mind event at Summerhall and also to smaller groups via youth work projects in Edinburgh and schools in East Lothian and Midlothian; as well as linking in with the launch of an exciting new mental health fanzine called Marbles.



We're encouraged to talk to teachers, but they don't actually do much to help. Mental health issues are often seen as signs of weakness in school.

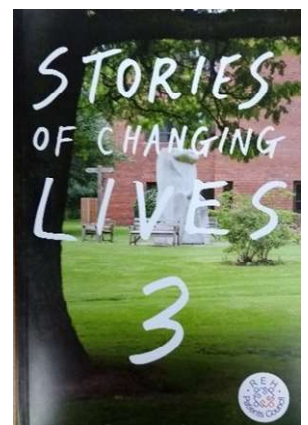
Young people told us that they thought it was important to be able to talk about these topics which affect mental health:

- Depression
- Anxiety
- Self Harm
- Identity
- Sexuality
- Relationships
- Grief and Loss

You can read the full report on the CAPS website.

### Stories of Changing Lives 3

CAPS were pleased to be a partner in this collaborative project, led by the Patients Council. They have previously produced two books documenting the stories of people who have been in the Royal Edinburgh Hospital. This third edition also included photographs, art work and a film all led by other partners. CAPS' role was to gather stories of activism – People Make Change.



We assisted three volunteers to interview key people within NHS Lothian, the Patients Council, and other influential individuals. The interviews were transcribed and collated within the book as a section which reads like one collective conversation.



The full interviews will form part of the Oor Mad History archive. An installation was created within the Out Of Sight Out Of Mind exhibition to showcase this project.

Thanks to Pam van de Brug for project managing this exciting work which was started by Lili Fullerton.



# diversity

**“Avanti CAPS”** - we held a whole team development day back in 2015 for staff and Management Committee, to think about:

- What CAPS was doing well?
- What CAPS could be doing differently?
- How we might do that?

One of the priorities we identified was to increase the **accessibility** of all the projects we offer by actively overcoming any barriers there may be for different groups of people. We opened up this task to everyone in CAPS and a small subgroup has been driving what we refer to as the Diversity project.



## What have we done?

### Awareness raising

We distributed our Individual Advocacy leaflets and posters to GPs and community venues, with an additional mention of assisting people to deal with welfare benefit issues.

Our Conversations for Change project held conversations in places we hadn't had any connections with before: for example outside Edinburgh Central Mosque; on Radio Ramadhan; at Waverley train station; in many different languages and directed at different groups of people.

A student with CAPS connected with people from Eastern European countries and talked to them about mental health services and advocacy, then produced a report. We have been working closely with “Equal Access” in Midlothian and East Lothian, a project which encourages volunteer befrienders from different minority ethnic groups, and with MPEG (Midlothian People's Equality Group).

We went to speak to people: for example NKS (Nari Kallyan Shangho) who provide health and wellbeing services to Asian women; Young Saheliya; Citadel Youth Centre; Lothian Centre for Inclusive Living; the Wellbeing Melas in Edinburgh and Midlothian; and groups for women at risk of offending.

### Changed our practice

We amended our Equalities Monitoring forms to take account of best practice in what to ask and how to ask it.

We have come up with a phrase to add to our publicity which tries to make advocacy understandable to people who are more familiar with other languages:

**“If your mental health makes it difficult for you to say what you need, then advocacy can help you.”**

Many thanks to all the partner organisations who've helped us with this work.

# LEARN

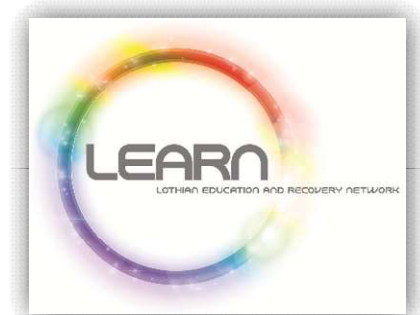
## Lothian Education and Recovery Network

### Education as Advocacy

#### What does LEARN do?

LEARN – Lothian Education and Recovery Network – is the partnership of Lothian Recovery Network, NHS Lothian and CAPS Independent Advocacy.

- we provide free learning opportunities about mental health and wellbeing;
- all our educators have experience of mental health issues;
- our courses are open to anyone living or working within the Lothians.



**Advocacy** is core to what we do – our courses provide spaces for people with lived experience of mental health issues to speak about their experiences in order to educate participants and for participants to be challenged and inspired to create change in their own lives and their own practice. We talk about **education** rather than training because it's a two-way process.

*“As someone who has suffered decades of discrimination and oppression as a direct result of my main psychiatrist diagnosis (BPD), volunteering with LEARN has given me the opportunity to redress the balance and make sure my side of the story is heard. It has helped me meet people who feel the same way as I do.”*  
Volunteer on the Understanding Borderline Personality Disorder course

### COURSES

In the last year, we delivered WRAP five times, Understanding Eating Disorders and Realising Recovery three times each, and Understanding Borderline Personality Disorders twice.

#### Wellness Recovery Action Plan (WRAP)



**Andrew & Fiona** Kernohan are our SRN Quality Accredited WRAP Facilitators. WRAP is a programme of self-exploration that can help you take control of your own mental health and recovery. Our workshops are based on the model developed under copyright in the USA by Mary Ellen Copeland.

- *“I’ll take away the importance of having a recovery plan and understanding that it’s there to be put into action! The personal bill of rights really stood out to me. Just want to thank Andrew and Fiona for sharing their stories and making the environment a very safe place to be.”*
- *“I will be able to use this every day, not just for work but for every-day for my own self. I would love for my work to set up this training for all the staff as I feel like it would benefit them as sometimes you find with the stress of the job you can*

*sometimes forget about your own mental health as you are so focused on the people you support.”*

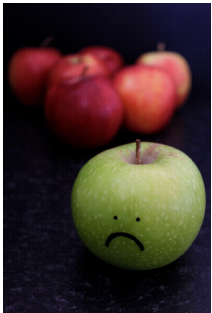
## Realising Recovery

Realising Recovery is delivered by **Tom** Frank with one of **Anne** O'Donnell, **Andrew** or **Fiona**. An opportunity to examine and develop a practical understanding of 'recovery' – whether or not you have your own experience of mental health issues. We are developing a new course to replace Realising Recovery to reflect new developments in understandings of and responses to mental distress.



- *“The conversation and sharing of experience, also gaining new ideas and knowledge. Informative, a pleasure to attend and, I’m sure, useful to my ‘recovery.’”*
- *“Was recommended this course and would do likewise. It is a very valuable learning experience as a health professional.”*

## Understanding Eating Disorders: Seen But Not Heard



**Niamh** Allen, Collective Advocacy Worker for Eating Disorders and **Gills** Muir, a volunteer and member of the Eating Disorders collective advocacy group deliver this course. The content is based on the lived experience of the course facilitators and the films made by the Eating Disorders collective advocacy group – *Seen But Not Heard* and *Spilling the Beans*.

- *“All fab. Hit me very powerfully. A few ‘lightbulbs’ – Thank you!”*
- *“I feel I will be able to openly speak to patients about their eating disorders with more confidence.”*
- *“Being upfront about ASKING the individual about what I can do to help.”*

## Understanding Borderline Personality Disorder: Much More Than a Label

This 2-day course has developed from the work of the Personality Disorder Collective Advocacy group. Key to the course is the Much More Than a Label Toolkit, a resource developed with input from people who live in the NHS Lothian area and have either been diagnosed with or feel they meet the criteria for a personality disorder diagnosis.

It is delivered by volunteers **Sue** Phillips and **Lauren** Stonebanks, with support from LEARN and collective advocacy workers.



- *[I realised] “that I am not alone in my diagnosis and my symptoms.”*
- *“Peers sharing their experiences. Mindfulness tools were a nice touch, group discussion on day 2 very useful for clinicians.”*
- *“I found myself both challenged and troubled by recollections and memories of things that happened, informing this experience, which demanded genuine*

*thought and engagement. This actually intensified a lot of questions about (my) practice and services. No bad thing.”*

## LEARN Open Afternoons

A new development since the last AGM are our Open Afternoons. We wanted to offer people an informal chance to visit our office and training room, meet some of the facilitators and find out about our courses.

From what many people had told us, it seemed that people found coming to a strange place with new people and not being sure what to expect, was a barrier to attending. We have been delighted by the results. We’ve met some lovely people, had some very good conversations, and we have been particularly fortunate that some people who have been on our courses come to the open afternoons to let us know how the course is impacting on their lives and practice.

People new to LEARN appreciate hearing from them what it is actually like to attend one of our courses.

## Recovery Conversations

Recovery Conversations are opportunities for people with lived experience of mental health issues to come together to talk about what recovery means to them.

At the People’s Conference in 2014, many participants talked about the fact that recovery in policy means that the definition is more generalised and the general definition does not fit everyone. They stated that, *“recovery need[ed] to be reinvented and reclaimed by people with lived experience of mental health issues.”*

We held the first Recovery Conversation at “A Sense of Some Place” at Walpole Hall in February 2017. It was an event for people with lived experience of mental health issues. We held a second Recovery Conversation at Taking Stock in May 2017.

Taking Stock is the annual conference that the NHS Lothian Mental Health and Wellbeing team hold. More conversations took place in East Lothian and Edinburgh, with further Recovery Conversations events planned in Midlothian and West Lothian in early 2018.

## Community Education students

We have had two final year Community Education students on placement with us. Magda Lenczowska in 2016/17 and Jemma Eveleigh in 2017/18. We have benefited greatly from both Magda’s and Jemma’s energy, knowledge and experience.

## Accessibility

We are working on increasing the accessibility of our courses. Open Afternoons are one way. We are looking at how we deliver courses to reduce any barriers to people participating.

## Looking forward

We are developing new courses. One will replace Realising Recovery, which will be called **People Make Changes: Mental Health in the Lothians**. The other new course, called **Working With Our Experiences**, is for people with lived experiences of mental distress to explore how to use these experiences in different roles – in supporting others, running groups, creating art, working in advocacy and campaigning for change. We will have more **Recovery Conversations** and are looking to work with others on a number of new opportunities.



# summary financial information 2017

The summary financial information was drawn from our statutory accounts for inclusion in this Annual Report. At time of printing, our statutory accounts were awaiting final approval by the Management Committee. Copies of our statutory accounts are available on request from Glen Faulkner, Office Administrator – please see the ‘contact us’ section on the back page for how to get in touch.


## Statement of Financial Activities for year ended 31<sup>st</sup> March 2017

	<b>Unrestricted 2017 £</b>	<b>Restricted 2017 £</b>	<b>Total 2017 £</b>	<b>Total 2016 £</b>
<b><u>Income from:</u></b>				
<b>Donations &amp; legacies</b>				
Donations	0	1,480	1,480	75
Donated facilities	0	14,000	14,000	14,000
<b>Charitable activities</b>				
Training & consultancy fees	0	200	200	200
Grant income	0	382,353	382,353	424,081
<b>Total incoming resources</b>	<b>0</b>	<b>398,033</b>	<b>398,033</b>	<b>438,356</b>
<b><u>Expenditure on:</u></b>				
<b>Charitable activities*</b>				
Collective Advocacy	2,724	219,743	222,467	261,708
Individual Advocacy	0	192,167	192,167	181,341
<b>Total expenditure</b>	<b>2,724</b>	<b>411,910</b>	<b>414,634</b>	<b>443,049</b>
<b>Net income / (expenditure)</b>	<b>(2,724)</b>	<b>(13,877)</b>	<b>(16,601)</b>	<b>(4,693)</b>
<b>Other recognised gains/(losses)</b>				
Pension scheme remeasurements	(3,018)	(3,982)	(7,000)	(31,000)
<b>Net movement in funds</b>	<b>(5,742)</b>	<b>(17,859)</b>	<b>(23,601)</b>	<b>(35,693)</b>
Funds at 1 April 2016 / 2015	80,003	151,628	231,631	267,324
<b>Funds at 31 March 2017 / 2016</b>	<b>74,261</b>	<b>133,769</b>	<b>208,030</b>	<b>231,631</b>

## \*Analysis of Expenditure on Charitable Activities 2016 - 2017

<b>Advocacy activity</b>	<b>Direct costs £</b>	<b>% of total spend</b>	<b>Support costs £</b>	<b>% of total spend</b>	<b>Total £</b>
Collective	178,324	43	44,143	11	222,467
Individual	154,239	37	37,928	9	192,167
<b>Total</b>	<b>332,563</b>	<b>80</b>	<b>82,071</b>	<b>20</b>	<b>414,634</b>

## Summary Income &amp; Expenditure Statement 2016 - 2017

														Total 2016	Total 2017
	Edinburgh Collective Advocacy <sup>⌘</sup>	Headquarters Cost Centre	East Lothian Individual Advocacy	Midlothian Individual Advocacy	Trauma Services Redesign	LEARN (Lothian Education & Recovery Network)	Seen But Not Heard	Lothian Voices	Experiences of Psychosis Project	Personality Disorder Project	Oor Mad History	East Lothian Collective Advocacy	Midlothian Collective Advocacy	£	£
<b>Income</b>															
Donations & legacies	-	-	1,420	60	-	-	-	14,000	-	-	-	-	-	<b>15,480</b>	14,075
Charitable activities	18,518	12,518	56,543	17,018	18,668	8,518	8,018	54,018	5,518	88,633	94,583	-	-	<b>382,553</b>	424,281
<b>Total income</b>	<b>18,518</b>	<b>12,518</b>	<b>57,963</b>	<b>17,078</b>	<b>18,668</b>	<b>8,518</b>	<b>8,018</b>	<b>68,018</b>	<b>5,518</b>	<b>88,633</b>	<b>94,583</b>	<b>-</b>	<b>-</b>	<b>398,033</b>	<b>438,356</b>
<b>Expenditure</b>															
Property	769	421	2,212	451	451	61	763	643	358	4,342	4,342	-	-	<b>14,813</b>	7,261
Staff	15,244	8,041	38,477	8,721	8,707	1,002	13,134	66,431	7,066	86,192	85,595	-	2,208	<b>340,818</b>	354,380
Administration & operations	585	569	1,349	407	314	329	712	2,188	312	2,629	2,689	369	-	<b>12,452</b>	12,115
Advocacy	342	565	13,324	298	388	1,519	397	15,902	305	379	357	-	-	<b>33,776</b>	58,498
Professional & financial	429	229	928	272	276	133	211	1,123	122	1,713	2,065	-	516	<b>8,017</b>	7,530
Depreciation	63	102	536	172	128	51	265	1,726	33	814	868	-	-	<b>4,758</b>	3,265
<b>Total expenditure</b>	<b>17,432</b>	<b>9,927</b>	<b>56,826</b>	<b>10,321</b>	<b>10,264</b>	<b>3,095</b>	<b>15,482</b>	<b>88,013</b>	<b>8,196</b>	<b>96,069</b>	<b>95,916</b>	<b>369</b>	<b>2,724</b>	<b>414,634</b>	<b>443,049</b>
<b>Net income / (expenditure)</b>	<b>1,086</b>	<b>2,591</b>	<b>1,137</b>	<b>6,757</b>	<b>8,404</b>	<b>5,423</b>	<b>(7,464)</b>	<b>(19,995)</b>	<b>(2,678)</b>	<b>(7,436)</b>	<b>(1,333)</b>	<b>(369)</b>	<b>(2,724)</b>	<b>(16,601)</b>	<b>(4,693)</b>
Pension scheme remeasurements	892	-	-	-	-	-	-	-	-	1,098	1,992	-	3,018	<b>7,000</b>	31,000
<b>Total outgoings</b>	<b>18,324</b>	<b>9,927</b>	<b>56,826</b>	<b>10,321</b>	<b>10,264</b>	<b>3,095</b>	<b>15,482</b>	<b>88,013</b>	<b>8,196</b>	<b>97,167</b>	<b>97,908</b>	<b>369</b>	<b>5,742</b>	<b>421,634</b>	<b>474,049</b>
<b>Surplus / (deficit) for the year</b>	<b>194</b>	<b>2,591</b>	<b>1,137</b>	<b>6,757</b>	<b>8,404</b>	<b>5,423</b>	<b>(7,464)</b>	<b>(19,995)</b>	<b>(2,678)</b>	<b>(8,534)</b>	<b>(3,325)</b>	<b>(369)</b>	<b>(5,742)</b>	<b>(23,601)</b>	<b>(35,693)</b>
Restricted funds 2016 / 2015	62,739	15,369	29,759	18,920	16,272*	3,365	1,656	10,620	232*	(24,338)	15,770	1,264	-	151,628	173,140
<b>Restricted funds 2017 / 2016</b>	<b>62,933</b>	<b>17,960</b>	<b>30,896</b>	<b>25,677</b>	<b>24,676</b>	<b>8,788</b>	<b>(5,808)</b>	<b>(9,375)</b>	<b>(2,446)</b>	<b>(32,872)</b>	<b>12,445</b>	<b>895</b>	<b>-</b>	<b>133,769</b>	<b>151,628</b>

⌘ The Edinburgh Collective Advocacy Project ended 31<sup>st</sup> December 2011, but still has pension scheme liabilities. \* Restated.

CAPS received grant funding from East Lothian Health & Social Care Partnership, Midlothian Health & Social Care Partnership, NHS Lothian, NHS Education Scotland and See Me. We are grateful for all the support they have provided to the organisation.

## summary financial information 2017 *continued*

Advocacy activity	Direct costs £	% of total spend	Support costs £	% of total spend	Total £
Collective	178,324	43	44,143	11	222,467
Individual	154,239	37	37,928	9	192,167
<b>Total</b>	<b>332,563</b>	<b>80</b>	<b>82,071</b>	<b>20</b>	<b>414,634</b>

### Balance Sheet at 31<sup>st</sup> March 2017

	2017 £	2016 £
<b>Fixed assets</b>		
Tangible assets (net book value)	4,963	3,674
<i>Total fixed assets</i>	<i>4,963</i>	<i>3,674</i>
<b>Current assets</b>		
Debtors	225,215	12,678
Prepayments	6,148	3,149
Cash at bank & in hand	156,316	391,888
<i>Total current assets</i>	<i>387,679</i>	<i>407,715</i>
<b>Liabilities</b>		
Creditors (falling due within one year)	6,423	9,841
Accruals	22,055	18,236
Deferred income	9,000	4,320
<i>Net current assets</i>	<i>350,201</i>	<i>375,318</i>
<i>Total assets less current liabilities</i>	<i>355,164</i>	<i>378,992</i>
Creditors (falling due after more than one year)	0	361
Provisions	134	0
<i>Net assets ex. pension liability</i>	<i>355,030</i>	<i>378,631</i>
Pension scheme liability	147,000	147,000
<b>Total net assets</b>	<b>208,030</b>	<b>231,631</b>

### The funds of the charity

#### **Key points:**

- We received donations of **£1,480** (2016: £75) and are very grateful to our donors for their generosity.
- We received grants of **£382,353** (2016: £424,081). Funding from East Lothian & Midlothian Health & Social Care Partnerships remained the same. However, the NHS Lothian funding available for LEARN decreased by 30%, and there were no additional grants available for our Seen But Not Heard eating disorders project. The success of Conversations for Change led to a Scotland-wide extension of the work, funded by a See Me grant of £4,000 (2016: £17,150).
- Direct costs account for **80%** of total expenditure on Collective & Individual Advocacy, showing that we are getting the balance right in terms of spending the majority of funds on frontline work.
- At the end of the year the charity had total funds of **£208,030**, and CAPS remains in a healthy financial position.

# volunteering

## What have CAPS volunteers been doing?

There are 15 people who've volunteered with CAPS this year. They have been involved in creating and delivering LEARN training, including Understanding Borderline Personality Disorder, Independent Advocacy Works for Us, WRAP and Understanding Eating Disorders. Volunteers have delivered workshops in various community locations including schools, youth groups and universities and have also been involved in assessing mental health nursing students.

Another role is promoting CAPS/LEARN and volunteering at local volunteer fairs and community events. This has included Volunteer Midlothian, the Orchard Centre, Taking Stock, Pink Ladies as well as LEARN open days. Some new people have got involved with CAPS projects because of these visits.

The Volunteer Co-ordinator meets all potential volunteers for an informal chat to discuss their interests and skills and what CAPS/LEARN may be able to offer. People who volunteer with CAPS/LEARN have opportunities to talk about work related issues through regular individual and group mentoring sessions with the Volunteer Co-ordinator. She also works with volunteers to identify training opportunities. When people are volunteering they also have regular contact and support with individual project development workers.



## Team Development



A 'LEARN Volunteer Team Day' took place in March 2017 to allow volunteers an opportunity to get to know each other and we had fun working on team building activities. Volunteers reported that they enjoyed the day and would like more days like this in the future.



Volunteers and staff requested facilitation training and ideas to make LEARN courses more interactive. A training was arranged for the team in May 2017 (staff and volunteers) in Creative Imaginative Learning. People seemed to have fun. The day provided focussed learning and it helped us generate new ideas and team/group discussion.

## Celebrating Success

To celebrate Volunteer Week we got our pinkies out for afternoon tea. It was a great way for CAPS to say thank you to all volunteers. We enjoyed getting together for a chat and the scones were great!

A team of three volunteers (Lauren, Sue and Gills) who co-deliver LEARN experience-led training were chosen to receive an Inspiring Volunteer Achievement Award from Volunteer Edinburgh in June 2017. It was great to see the team formally recognised for their effort and achievements.



Congratulations are also due to Theresa, who has been chosen to receive an Inspiring Volunteer Individual Achievement Award 2017 from Strive in East Lothian and will be attending an awards ceremony in late November. CAPS would like to thank all the people who volunteer with us and give their time, energy and experience to contribute to our wide range of collective advocacy tasks and projects.



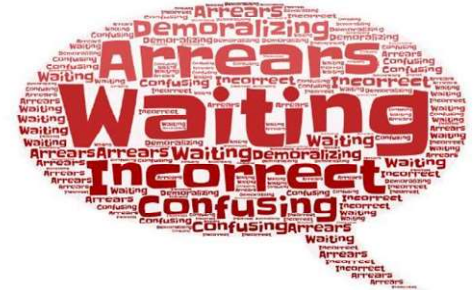
CAPS Management Committee are all volunteers too who carry out a vital function in the governance of the organisation. If you would like to find out more about how you might become involved with us, please contact Victoria Jackson - see the 'contact us' section on the back page for how to get in touch.

# east lothian collective advocacy

## Consulting people in East Lothian

This year CAPS spent time talking to people about their experiences of the new benefits system, Universal Credit, that was rolled out in East Lothian in April 2016. We spoke to people in a range of ways and a report of these findings was produced and distributed throughout East Lothian. These findings were also fed into larger consultations.

CAPS have continued to visit existing and new groups in East Lothian to find out what's important to them and have brought focus groups together to feed into the development of the local housing strategy and the future of the Scottish Health Council. We visited the newly formed Haddington Peer Group and several members of this group were interested in being part of a project to create an oral history of Herdmanflat hospital by people with lived experience of the hospital before its closure. CAPS will be continuing to work with people on how to move this exciting idea forward in the coming year.



## Bringing people's views to decision makers

As well as producing reports and feeding into consultations, CAPS has continued to attend steering groups on supporting people with mental health issues into volunteering, education and employment along with attending the newly formed East Lothian Mental Health Strategic Group to represent people's voices in East Lothian.

## Involving people from East Lothian in wider projects



We have been supporting individuals in East Lothian to work with our Volunteer

Co-ordinator to explore opportunities within CAPS.

We have also been encouraging people from East Lothian to contribute to projects that have a Lothian-wide focus to ensure that East Lothian voices are heard in conversations that affect them. People from East Lothian have been involved in our steering groups feeding into the development of the new Rivers Centre for trauma along with the Lothian voices project organising the People's Conference and presenting at NHS Lothian's annual conference – Taking Stock.

CAPS carried out a Lothian-wide consultation of young people aged 16-24 about their opinion on the importance of

independent mental health advocacy for this age group. 30% of the responses to this survey were from East Lothian.



# midlothian collective advocacy

## Consulting people in Midlothian



This year CAPS has brought together a group of people in Midlothian to create the 'Midlothian Voices' group. The group have identified their goals as: working on issues that are important to them; feeding into local and national strategy by attending relevant meetings; and raising awareness of mental health issues in Midlothian.

So far group members have been along to events on Human Rights, the future of the Scottish Health Council and have attended the last two Midlothian Mental Health Strategic Planning Group meetings. The group's plans for the future include a piece of

work on stories of lived experience of Welfare Reform and planning a collaborative event in the new year to raise awareness of mental health.

CAPS has been visiting groups within smaller localities in Midlothian to look at what's important in their local areas. We have attended the Woodburn Community planning meetings and have contacted groups in Gorebridge, to explore how collective advocacy can be useful to people in having a voice on the issues that are specific to them.

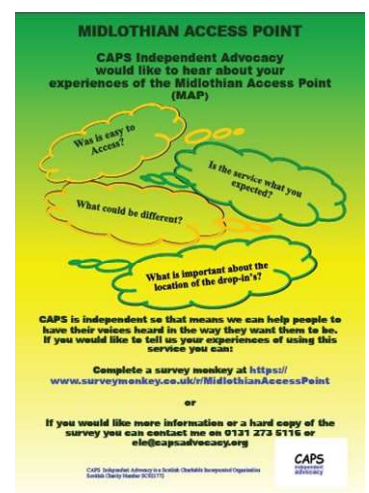
Ongoing development of an evaluation of the Access Point Service has been taking place and CAPS has been working with the new Health in Mind worker to reach as many people accessing this service as possible. We have continued to visit local groups in the Orchard Centre and the Pink Ladies Friday Hub to hear what is important to them.

## Bringing people's views to decision makers

Along with regularly attending the Midlothian Mental Health Strategic Planning Group, CAPS continues to attend the steering group for the Midlothian Access Point as well as representing people's views at the third sector reference group informing the Integrated Joint Board.

## Involving people from Midlothian in wider projects

As with East Lothian, CAPS encourages and facilitates people from Midlothian to contribute to projects that have a Lothian-wide focus to ensure that people's voices from the county are heard in conversations that affect them. Two members from 'Midlothian Voices' took part in a consultation with the Scottish Minister for Mental Health at this year's NHS Annual Conference.



# individual advocacy

## What we do

We provide Individual Advocacy to people from East Lothian and Midlothian who use mental health services, to help resolve a wide range of issues affecting their lives. During this year three full-time and three part-time members of staff and one part-time volunteer worked with individuals in the community and in the Royal Edinburgh Hospital, where Midlothian and East Lothian acute in-patient beds are based.

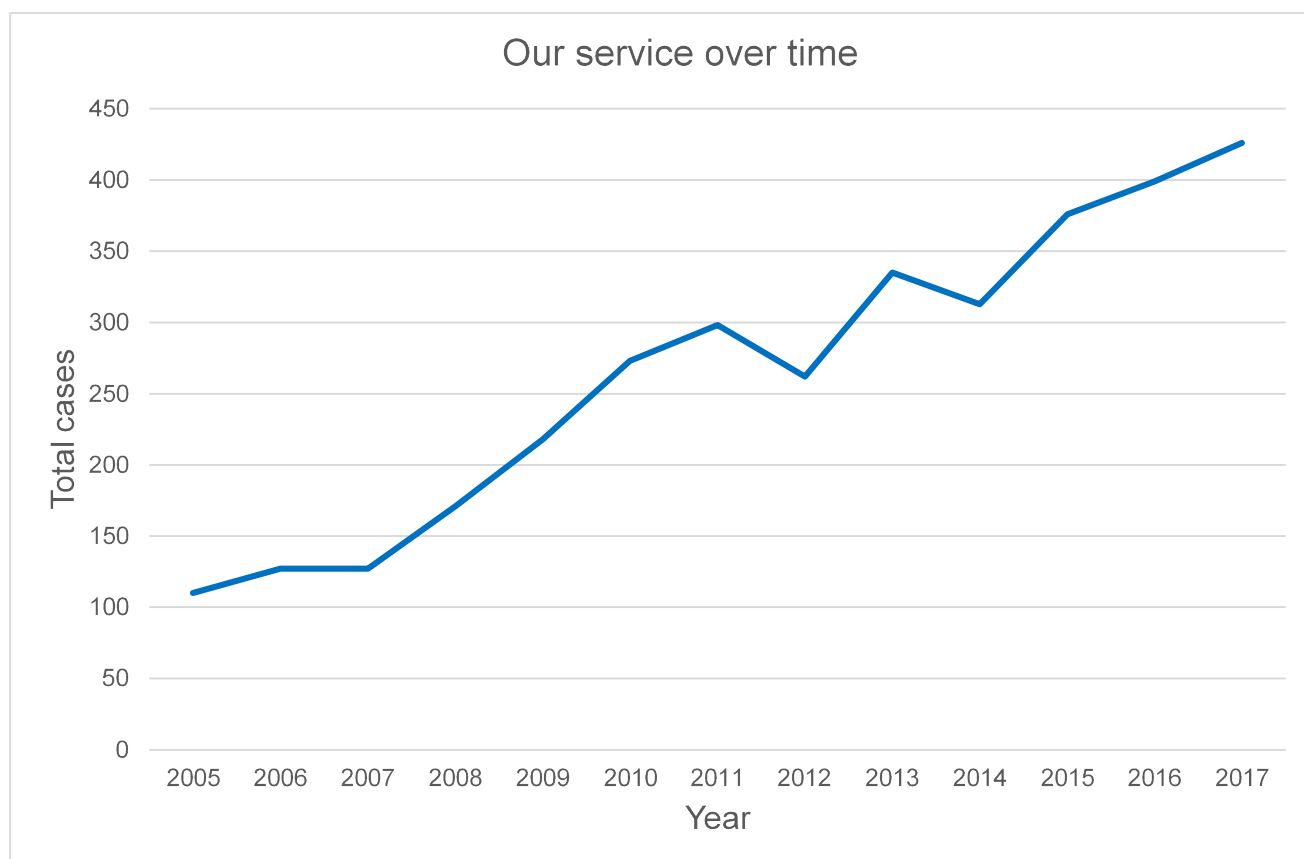
## Our service this year

**380** people were supported to make their own choices in

**426** instances of advocacy (226 in East Lothian, 200 in Midlothian)

**7%** overall increase in cases compared to last year.

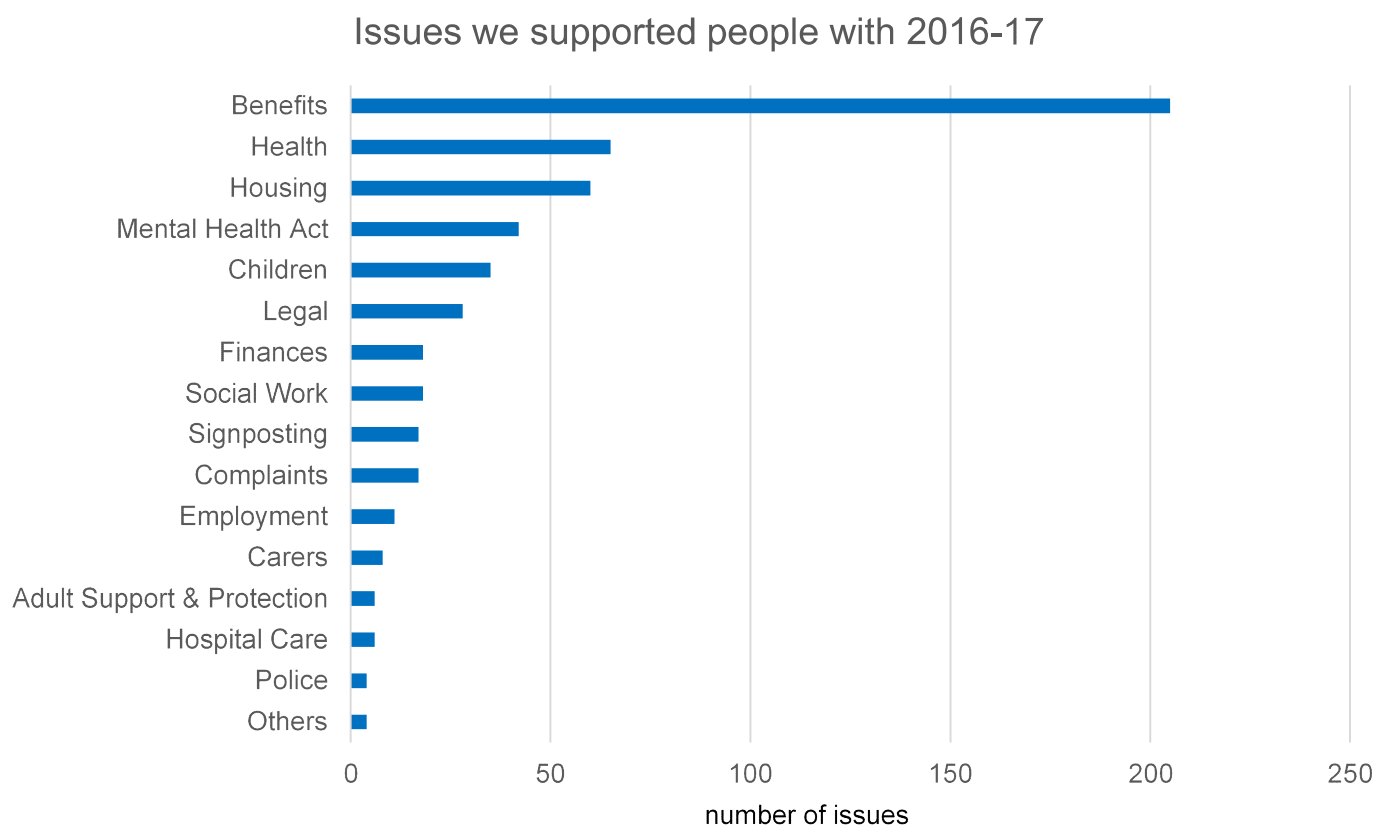
The graph below illustrates the huge growth of our service since 2005:





## What we've been working on

We support people to navigate almost any situation in which they feel they would benefit from advocacy involvement. Because of this we end up working with people on a huge range of different issues, from support at Mental Health Tribunals to dealing with consumer issues. However, there are some clear trends in the things people approach us for help with. This chart shows the relative numbers of different issues we worked with people on this year:



Many cases involved supporting people with more than one issue, so the total number of issues is greater than the number of cases.

Benefits issues continue to be the most common thing we support people with, and demand for support with benefits in 2016-17 was **15%** higher than last year.

**48%**

of all our cases involved supporting people with their benefits

Although we continue to support people with all aspects of the benefits system including supporting people to attend PIP and ESA assessments, one of the drivers of this increase was the roll out of Universal Credit full service in East Lothian on 27<sup>th</sup> March 2016.

## Universal Credit

Universal Credit is a new working age means-tested benefit that replaces six previous benefits, including income related ESA, income based JSA and tax credits. It is being rolled out gradually across the country and in March 2016 East Lothian became the first whole local authority in Scotland to go full service. This is a big change for people we work with as now Universal Credit is the main working age benefit people can make a new claim for in this area.

Since Universal Credit full service came to East Lothian, we have supported people to navigate various issues with the claim process, including:

- Gathering information needed to make a claim;
- Attendance at many more Jobcentre appointments than under the old system;
- Accessing advice services;
- Medical assessments;
- Sanctions and problems with payments;
- Coping with the 6 week wait for first payment.

Far from being simpler, we have found that for most people we work with Universal Credit is more complex and difficult to navigate than the old system, sometimes involving multiple appointments in a week to support people to make a claim.

We have also found that there has been a general lack of knowledge about the process, leading to people we've worked with being given confusing and misleading information about their entitlement, or told to apply for Universal Credit when they didn't need to. An advocacy worker can support someone to access other services like advice agencies to help clarify these issues.

This financial year in the areas we work in, Universal Credit full service was limited to new claims in East Lothian. However, in late March 2017 full service was extended to Midlothian, and in the future existing claimants will eventually be migrated over to the new system too - so the need for advocacy support around Universal Credit will only increase in the future.

## Case Management Software

Another big change in 2016 was planning and preparing for the move to new electronic case management software. The system went live from 1<sup>st</sup> April 2017 and we said goodbye to our filing cabinets as all case files have now been digitised.

This change has freed up our advocacy workers to work more flexibly and update case information from anywhere, allowing us to work more efficiently in busy periods. It also means we will be counting things differently in the future, so look out for slightly different statistics next year!

## People we've provided Individual Advocacy for this year said:

"I have been treated with respect at appointments etc with my CAPS advocate present. I don't think that would have happened otherwise."

"Having a CAPS worker with me for my PIP reassessment made a huge difference as it made me feel a lot safer."

"My CAPS worker was incredibly sensitive and supportive."

"I feel like I was taken more seriously, and not fobbed off by healthcare professionals"

"Just having him with me at my Tribunal was enough for me."

"The staff are amazing. They really do go above and beyond to help people. CAPS is brilliant and I am so grateful for them."

# feedback

We e-mailed 50 different contacts that our Individual Advocacy team had been working with this year, and invited them to complete an online survey to tell us about their experience of working with us.

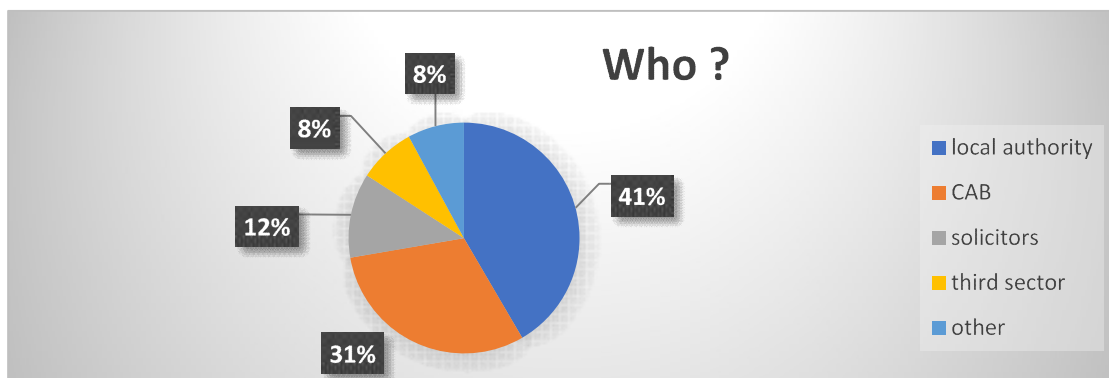
We received a **52% response rate** with **26 online surveys** completed.

## Who replied?

- 15 responses were from people who work in East Lothian;
- 14 from people who work in Midlothian.

Some people's work covered both East Lothian and Midlothian, and for two of the responses their work also covered Edinburgh, and one person's work also covered West Lothian.

The highest response was from local authorities, including Welfare Rights, Social Work and Health & Social Care Partnership workers – 41%.



## We asked / they answered

Do you feel you/your organisation has enough understanding of what CAPS does as an independent provider of Individual Advocacy?

**100% YES**

Do you think CAPS' involvement has been helpful for people you work with who have experience of mental health issues?

**100% YES**

Do you think CAPS' involvement has been helpful to the work you do?

**100% YES**

How well did you feel CAPS responded to your enquiries?

- **speed** of our response - **81% very good, 15% good, 4% ok**

- **quality** of our response - **81% very good, 19% good**



We invited people to make any other comments that they would like to about CAPS. Below are some of the comments people made;

*"It takes pressure off me in my role."*

*"...in all circumstances they put the client first but at the same time aim to have a good working relationship with third parties that may also be working with a client."*

*"The CAPS workers always aim to achieve the best outcome for their client."*

*"CAPS have responded well to increased demands without any increase in their resource. They are always responsive to any requests whether this is in relation to individual or collective advocacy. They are professional and well respected locally."*

*"Excellent service."*

*"CAPS workers always try to accommodate meetings, even at short notice. Meetings are always clear and solution focussed."*

*"CAPS is a vital service. Having independent advocacy for some service users who require the support, is essential."*

*"The service you provide is needed and appreciated."*

*"We have a great working relationship with CAPS. We only have positive comments."*

*"Extremely valuable service, prompt response, good communication."*

# who's who

## Management Committee

Elsbeth Morrison - Vice Convenor

Laurelle Edmunds

Sandra Ramsay

Liz Smith

Convenor Lin Cochrane left the Management Committee during the year.

## Staff

Jane Crawford - Chief Executive Officer

Fiona Macdonald - Senior Advocacy Worker

Clive Baker - Individual Advocacy Worker

George Kappler - Individual Advocacy Worker

Joanna Cowan - Individual Advocacy Worker

Kousar Javaid - Individual Advocacy Worker

Kyna Reeves - Individual Advocacy Worker

Victoria Jackson - Volunteer Co-ordinator

Pam van de Brug - Arts as Advocacy Worker

Kirsten Maclean - Community History Worker

Ele Davidson - Development Worker

Fingal Dorman - Development Worker

Niamh Allen - Development Worker

Anne O'Donnell - LEARN Co-ordinator

Andrew Kernohan - LEARN Educator

Fiona Kernohan - LEARN Educator

Tom Frank - LEARN Educator

Julie Ross - LEARN Assistant

Glen Faulkner - Office Administrator

Development Worker Lili Fullerton left the staff team during the year.

The work of CAPS is also supported by our invaluable **Volunteers**. Please see the Volunteering section on pages 15-16 for more information.

# contact us

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## Administration enquiries

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## Collective Advocacy

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## Individual Advocacy

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