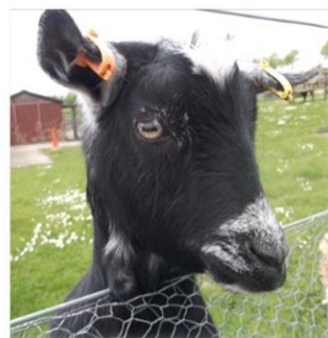
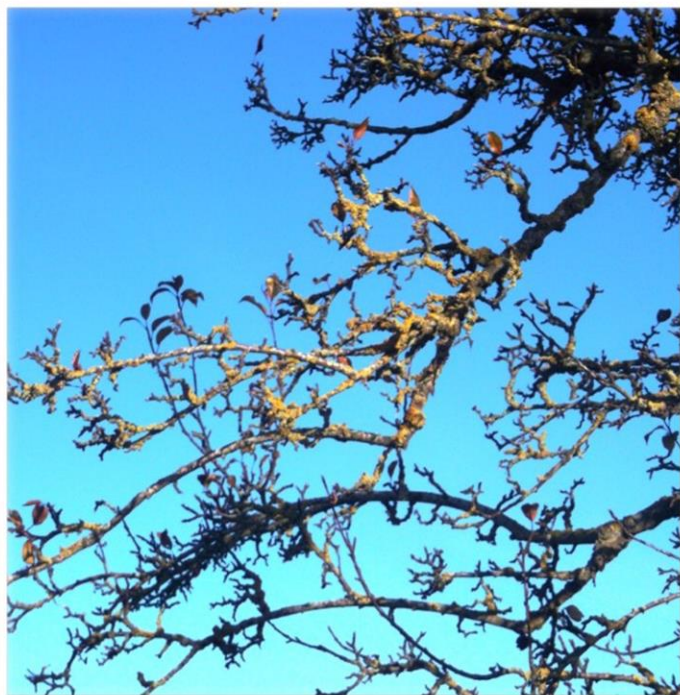




Annual Report 2020 - 2021



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### **Mission Statement**

The Patients' Advocacy Service aims to provide an independent, highly skilled, responsible and professionally run service within The State Hospital. Whilst observing the safety and security of the Hospital, the service works independently within it to promote patients as individuals, to support them and to enable them to be fully informed and involved in their care and treatment.

## **History of the Patients' Advocacy Service**

The Patients' Advocacy Service (PAS) was established in 1997, with the recognition patients at The State Hospital were particularly vulnerable and needed a mechanism of independent support and assistance that would help them access services and information. It is vital the service provided to patients is flexible, efficient, independent and professional. PAS were employed by the Scottish Council for Voluntary Organisations (SCVO) from April 2004 until March 2009. On 1<sup>st</sup> April 2009 PAS officially became a Private Limited Company and a Registered Charity in January 2010. PAS is now completely independent of The State Hospital in line with Scottish Government legislation and the Scottish Independent Advocacy Alliance Guide for Commissioners. PAS is managed by an independent Board of Directors.

During this financial year, PAS had a part time Manager, full time Senior Advocate, 2 part-time Advocacy Workers, and a part time administrator as part of the team.

### **Evaluations**

- PAS was evaluated in 2001 and 2006 by an external team, who found patients trusted and valued the Advocacy Service.
- PAS was benchmarked in November 2007 when The State Hospital ordered an internal audit report, following a value for money assessment.
- PAS instructed an Independent Evaluation of its service in February 2017. The evaluation was positive; feedback was sought from all levels of staff and patients as well as external professionals in the State Hospital and was used in the SLA tender in 2019.

### **Service Level Agreements**

- 3 years' Service Level Agreement (SLA) obtained for financial year beginning 1<sup>st</sup> April 2008 - 31<sup>st</sup> March 2011.
- 3 years' SLA with provision for a further 2-year extension obtained for financial year beginning 1<sup>st</sup> April 2011 - 31<sup>st</sup> March 2014 continued 1-year extension 2015.
- 3 years' SLA with provision for a further 2-year extension obtained for financial year beginning 1<sup>st</sup> June 2015 - 31<sup>st</sup> May 2018. 1<sup>st</sup> June 2018 we secured an additional year's extension.
- 3 years SLA beginning 3<sup>rd</sup> August 2019 with provision for a further 2-year extension.

### **Funding**

PAS continues to receive funding incorporated in to the SLA regarding "hard to reach patients" who because of their chronic and enduring mental health problems, and side-effects of medication are reluctant and hard to engage with, this includes new admissions into the hospital. All staff have a quota of 'hard to reach' patients they are required to engage with on a regular basis.

## **Chair's Report**

In 2020-2021 the Patients' Advocacy Service (PAS) has continued to deliver a vital, flexible and consistent service to Patients within The State Hospital during a period of great uncertainty due to the Covid-19 pandemic.

While most people across the country were advised to stay at home the PAS staff continued to attend The State Hospital to ensure all patients could access advocacy. Despite the challenges they faced, our team continued to provide an excellent service to patients. They have remained committed, flexible and gone over and above to ensure patients voices are heard.

As a board we are extremely proud of our team, Rebecca Carr, Trish Davidson, Stephanie Neilson, Lynn Macleod and Charlene Ramzan for the outstanding work they have done during an extraordinary year and we thank them for their commitment to improving the quality of patients' lives.

In 2020, our long-standing manager Ann Morton who was part of the service for 15 years, retired. The Board wish to thank Ann for the commitment to the service during this time. Rebecca Carr secured the post of Interim Manager in August 2020 which became permanent in January 2021. Rebecca has provided outstanding leadership through a period of uncertainty as well as moving the service forward and continuing to foster excellent working relationships with colleagues in The State Hospital.

The board continued to meet throughout the pandemic, quickly adapting to online meetings, linking to the hospital via video conferencing technology to ensure the vital contribution from our patient rep continued and colleagues within the State Hospital could attend. My thanks, to the rest of my board colleagues for adapting so quickly and continuing to provide expertise, support, guidance and governance to PAS. Over the next year we will look to strengthen and diversify our board through board member recruitment and training.

We also wish to pay respect to long-serving board member Francis Fallan who sadly passed away in October 2020. Francis dedicated his time to helping those in the community and in mental health services. Francis brought his wealth of knowledge, experience and charm to the PAS Board and will be sadly missed.

Michael Timmons

Chair



## **Manager's Report**

Covid-19 has had a massive impact on our service for the past year. Following the news, a pandemic had hit our country and the Scottish Government issuing a 'Stay at home, Save Lives, Protect the NHS' message, PAS had to alter its service in ways we had never imagined. More information on the way Covid-19 impacted the service and the measures taken is provided throughout this report.

Taking over as the interim manager in August of this period provided challenges I could never have anticipated. Our focus had to be on ensuring the safety and wellbeing of staff and patients in whatever means necessary, whilst continuing to adhere to legislation and our SLA to provide a vital service to those detained under the Mental Health (Care and Treatment)(Scotland) Act 2003 and Criminal Procedure Scotland Act 1995. Throughout this period, the PAS staff have been loyal, committed and flexible, without them the service would not have survived and they really are the unsung heroes of the organisation.

Our staff team remained consistent throughout the pandemic. Patricia Davidson successfully led the team in an interim manager capacity throughout the initial lockdown where she then returned to her role as senior advocate in August 2020. Following the retirement of Ann Morton, I came in to the role as interim manager for 6 months in August 2020 and in January 2021 secured the permanent position as service manager. Following a period of stepping up as advocate for a number of months 2 days per week, Lynn our administrator and volunteer, then took on a 4-day role as interim advocate in August 2020 and in January 2021 secured a permanent advocacy role. She has shown the progression PAS offers staff by starting as administrator, working as a volunteer and being able to move in to an advocacy position. Following a gap in the staff team, after a successful recruitment drive, we offered a fixed term contract to Charlene who quickly settled in to the role of administrator. She picked up the role incredibly quickly despite the challenges with Covid-19 and following the posts of manager and advocate being filled, she was offered a permanent post which PAS was incredibly happy to offer. She has settled seamlessly in to the team, providing vital administrative support.

In terms of the education, which has been evident in our team over the past few years, both myself and Stephanie successfully completed the MSc in Forensic Mental Health, bringing specialised knowledge of the subject to the team. Lynn also successfully completed her BSc(hons) in Psychology. The level of education our team possesses shows the extreme dedication of staff to continue to develop their knowledge on top of working in a challenging role, further highlighting the excellence this team possesses. Furthermore, throughout this period many organisations offered insightful webinars. Due to reduced office based working, the staff team had more capacity to make use of these sessions to enhance their knowledge. The specific webinars attended can be found on page 8-9.

Unfortunately, due to the instability of the situation with Covid-19, we were unable to recruit any volunteers. PAS are looking forward to the future and

bringing new faces and experiences to the organisation in the volunteering programme.

Patients continue to be the main focus of PAS and our activities. Despite a challenging year of online and telephone based CPA's, Parole Boards and Mental Health Tribunals, all patients were offered support to have their views articulated to the clinical team and other professionals. We also ensured all patients who requested advocacy were offered support, although this was not always their designated advocate, particularly during times when lockdown was in place. We continued to visit with new patients face to face to introduce them to the service, even during the height of the pandemic. Finally, we were approached by The State Hospital to offer all patients the opportunity to complete a care questionnaire regarding their Responsible Medical Officer. This allowed us to support patients to express their feelings towards their Doctors.

In spite of the restrictions, we continued to work alongside professionals both internal and external, this was of even more importance when patients had less access to these individuals during period of restrictions. We were able to ensure patients continued to have the opportunity to express their views and requests, throughout the financial year.

We have continued to work on the digitalisation of our office this year. This involved a lot of ground work in terms of preparing documentation to ensure we were data protection and GDPR compliant. This work is ongoing but we hope to be fully digitalised by the next annual report.

We continue to be passionate and champion the patient voice. During Covid-19 many of the ways we highlighted this voice, moved to be either telephone or online based. This allowed us to remain involved with the Mental Welfare Commission; SIAA; Mental Health Tribunal Service Users and Carers Group and a recommencement of the short life working group Communications and Specified Persons.

We are also incredibly grateful to our previous patient rep who moved on from the hospital during this period. He offered guidance on a patient who was interested in taking on this role and he has been able to participate in open board meetings via video conferencing since the beginning of 2021. He has brought updates to the board and ideas of how we can further highlight the patient voice. We are excited to continue to have him contribute to the board and bring an important perspective. In addition to our patient rep, we have begun the process of recruiting for new board members following the sad passing of our long standing Board member Francis Fallan. This process is underway and we hope to introduce some new faces over the coming months.

In the next year we will continue to offer a vital service to the patients detained in The State Hospital. Our future plans are included on page 14.

Rebecca Carr  
Manager

## **Review of 2020/2021**

### **Staff and Volunteers**

- Staff members completed their further education, enhancing their knowledge and skills within advocacy. Two advocates completed the MSc Forensic Mental Health and one a BSc(Hons) in Psychology.
- All staff continued to complete mandatory modules and attend training as required by The State Hospital (TSH) when restrictions allowed.

### **Board of Directors**

- Held 12 Board meetings with input from our patient rep when safe to do so.
- Attended 2 team meetings with Staff.
- Begin recruitment of new Board members.
- Following the previous AGM, Michael Timmons took on the role of Chair whilst our previous chair Danny Reilly resumed post of Board Member.

### **Participation**

- Person Centered Improvement Steering Group; Patient Partnership Group; TSH Research Conference; Responded to consultations and TSH policies including Grounds Access; Patient Groups via Virtual Platforms; Complaints and Feedback; Child and Adult Protection Forum.
- Mental Health Tribunal Service Users and Carer's Meeting.
- Attended SIAA Annual General Meeting.
- Attended Forensic Network Special Research Interest Group – Masters student presented project.
- SIAA Roundtable – Help to Shape the 2021 Manifesto.
- SIAA Roundtable – Human Rights.
- SIAA State of the Sector Survey.

### **Patient Contact**

- 1204 contacts with 148 patients on the wards.
- Skye Centre Contacts – 0 Contacts due to restrictions.

### **Mental Health Act**

- Attended 43 tribunals.
- Completed 11 Advance Statements and 1 Update of Advance Statement.

### **Knowledge**

- 'We Are a Human Rights Based Organisation' webinar.
- 'Impact, Demonstrating the Difference You Make' webinar.
- GDPR Training.
- 'Planning in a Crisis' webinar.
- 'Recruiting, Managing and Supporting Volunteers' webinar.
- Various webinars on the NHS move to using Outlook.
- Retirement Course.
- 'Advance Care and Treatment Planning' webinar.
- Autism webinar.
- 'Measuring Impact' SIAA training.



- 'Advance Care and Treatment Planning – End of Life Care' webinar.
- 'Sexual Harm, Research, Practice and Intervention' webinar.
- Anti-racism seminar.
- Team Member to Team Leader Training.
- 'Psychiatric Advance Statements' webinar.
- 'Victims and Trauma' Webinar.
- 'Fused Mental Health and Capacity Legislation' webinar.
- 'Ethnic Diversity Matters on Boards' webinar.
- 'The Triangle of Care – A Professional Perspective' Scottish Mental Health Law Review.
- 'Good Governance' webinar.
- 'Learning Disabilities' webinar.
- 'Good Governance – How to Build Strong Board Relationships' webinar.
- 'Infection, Prevention and Control During the Covid-19 Pandemic' webinar.
- 'Forensic Mental Health Review' Webinar.

#### **Ongoing**

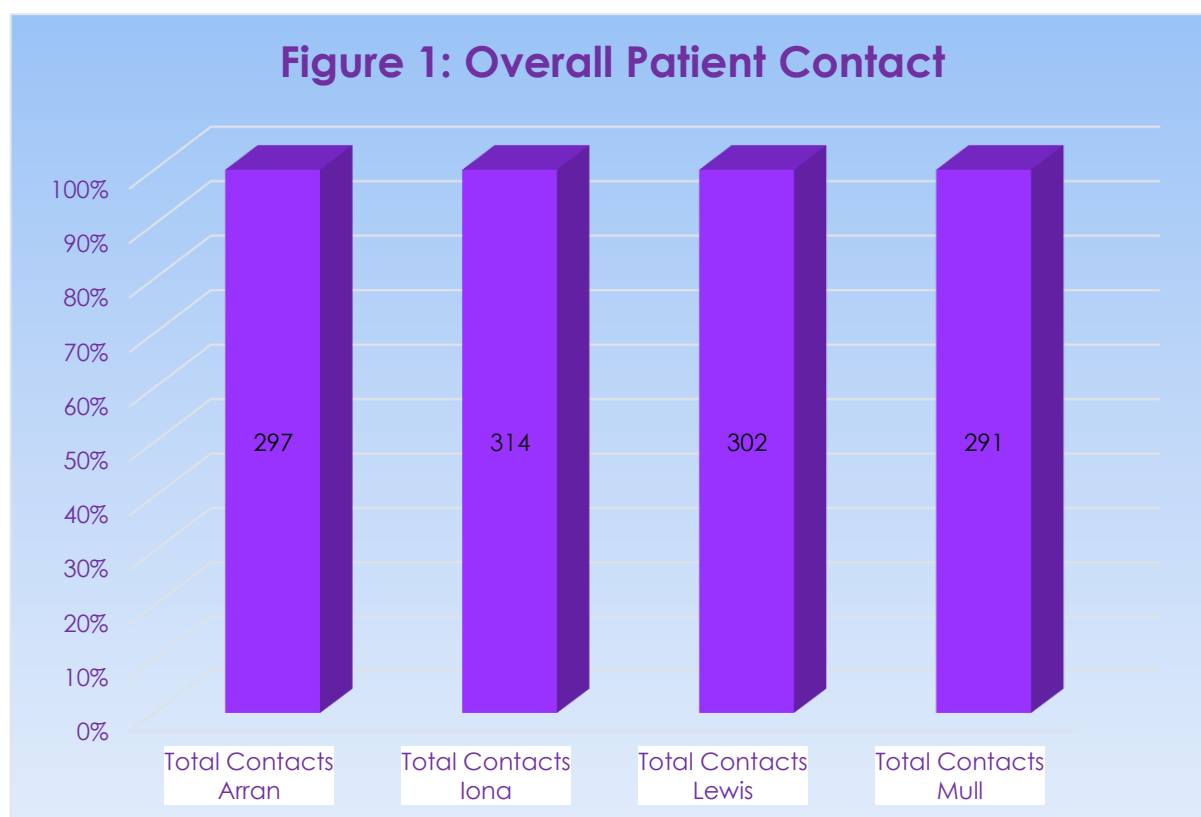
- Assistance to complete paperwork, e.g. Legal Aid, Tribunal paperwork, forms.
- Support given regarding Named Persons, Advance Statements, Tribunals, Case Reviews, Rights on Admission.

#### **Patient Support**

- Support before, during and after Case Reviews, Tribunals and Parole Boards.
- Contact with agencies and organisations.
- Drop in sessions on the wards when covid-19 restrictions allowed.
- Information gathering.
- Ensuring patient understanding of both human and legal rights.
- Letter Writing.
- Raising Complaints.
- Contacting Solicitors.
- Support at ASP investigations.

## Statistics

### Overall patient contact



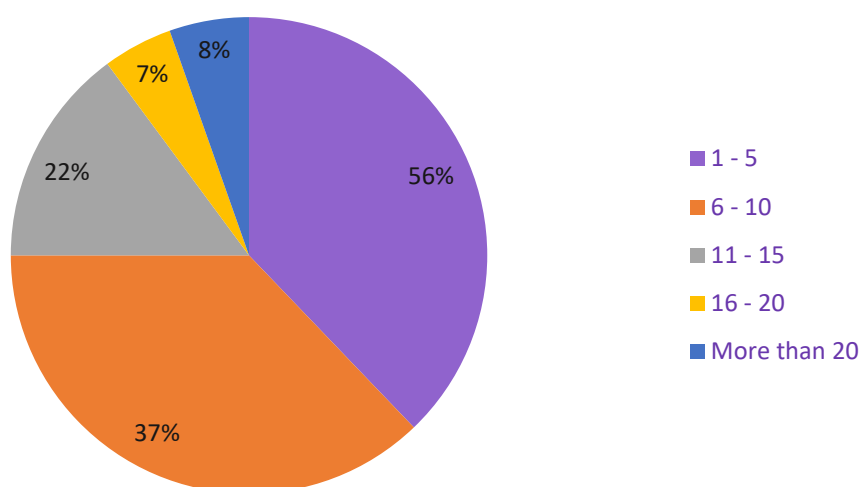
The chart above shows, 148 patients had 1204 contacts during the year; all patients within The State Hospital were seen at least once by an advocate, however most were seen a minimum of twice as we ensure each patient is approached prior to their case review, of which they have 2 per year. The average number of contacts per patient was 8. These figures include 34 patients transferred to medium and low secure units, returned to prison with 2 deaths recorded and the 36 admittances during this period. Despite there being no patient movement for a period of time, this is fairly consistent with the previous annual report.

Patient contact was slightly reduced (235) from the previous annual report however, given the impact of Covid-19 and the reduced office presence, this figure is impressive and a testament to how hard the team have worked during this period.

The spread of contacts was fairly consistent across the 4 hubs which again, on reflection from the previous report, shows we have worked hard to ensure patients have fair and equitable access to independent advocacy providing patients positive outcomes.

## Contacts Per Patient

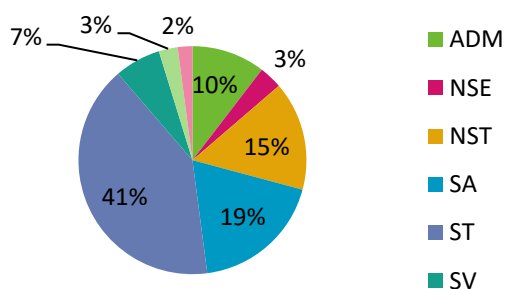
**Figure 2: % of contacts per patient**



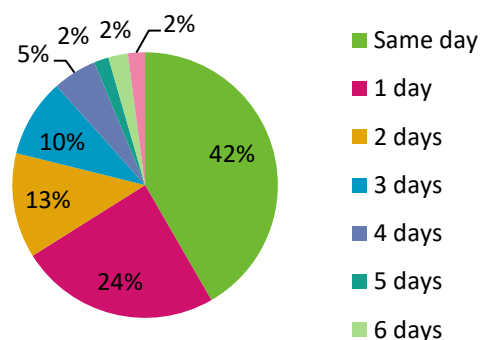
This graph demonstrates 56% of patients were seen between 1-5 times with only 8% seen more than 20 times. It does show however an amendment to the previous annual report whereby 10% of patients had this level of input. We continue to monitor patient contacts to ensure they are reflective of the service we provide. Some patients require more support than others, this is particularly true of our intellectual disability patient group and new admissions to the hospital.

## Formal Referral Routes & Timescales

**Figure 3: Patient Referral Type**



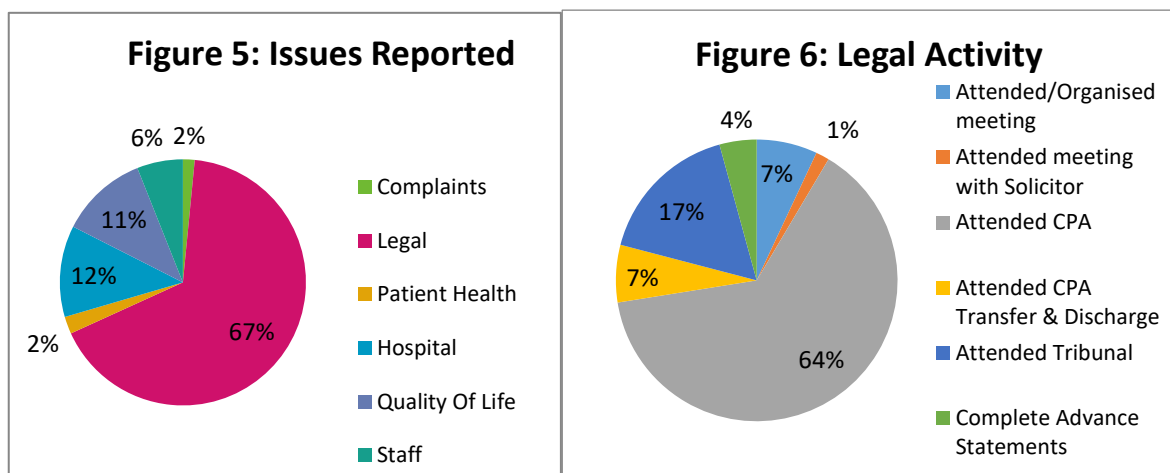
**Figure 4: Referral Timescale**



These statistics relate to formal requests to see an Advocate, 48% of referrals came from patients directly via the PAS free phone or discussion with an advocate. Hospital staff continue to be vital for us to provide support to patients with a further 18% of referrals coming from nursing staff. 100% of referrals were seen within 7 days which is PAS's target however, 66% were seen within 2 working days which is just a 3% drop from the last report. This highlights

fast access to advocacy support to action their rights, even during a pandemic.

## Issues



The service dealt with 1941 issues which is a decline of 118 from the previous annual report; 1293 were legal (67% of the total), this includes, contact with solicitors; tribunal discussions; informing patients of their legal rights to have representation; instructing a solicitor; preparing a statement (if required) for a mental health tribunal or parole board and attending a tribunal or parole board with support from an advocate either in person or via teleconference.

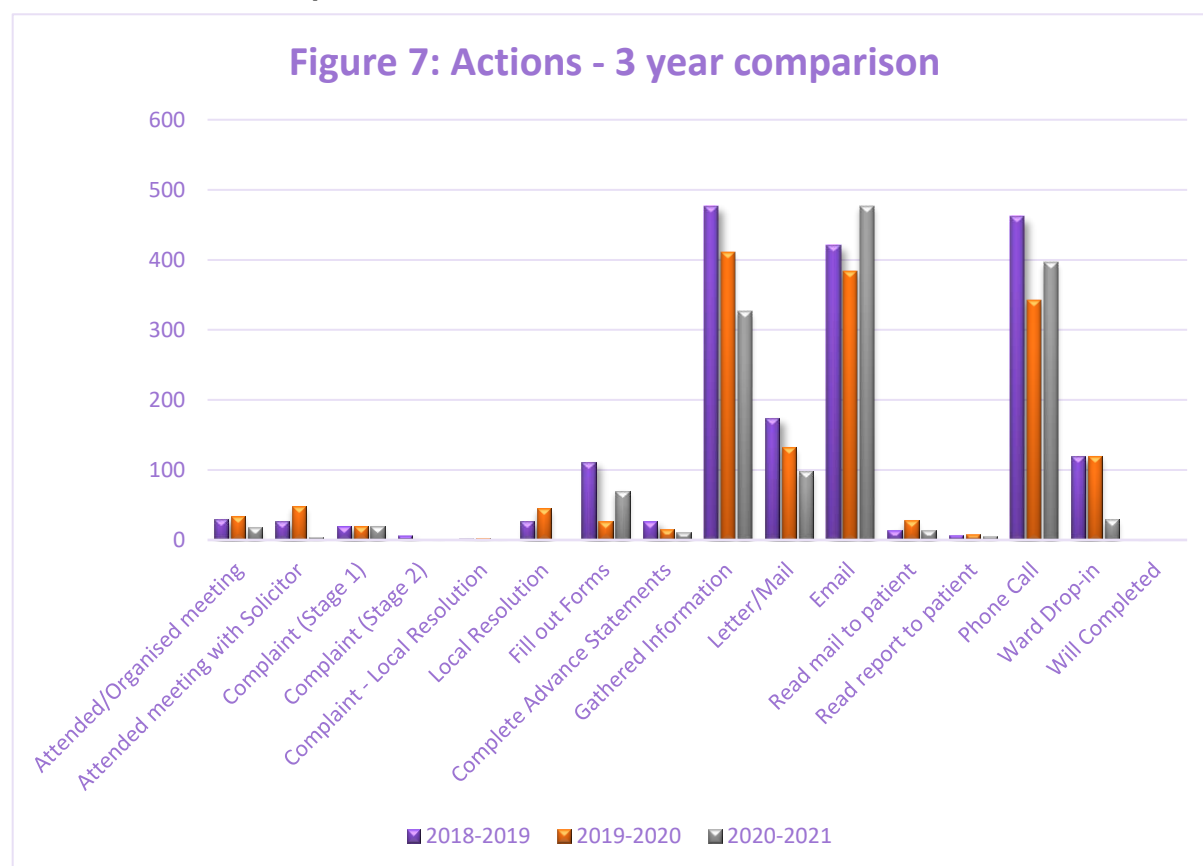
Hospital issues account for a further 12% which is double the previous report and quality of life 11%, a decrease of 7% from last year's report, which covers any hospital based issues including policies and procedures; ward or hub moves; changes to their clinical team; issues relating to food, family and grounds access etc.

PAS recorded 22 complaints during this period. 19 were submitted at stage 1, 1 at stage 2, 1 was not taken forward by the patient and 1 was resolved locally. This is reduced from previous reports and may be attributed to patients spending more time in their rooms due to covid-19 restrictions.

The activity classified as legal [Figure 6 above] was associated with support and attendance at formal meetings with patients, such as Care Programme Approach meetings (CPA), Mental Health Tribunals, Parole Boards and Solicitor contact; all of which require support prior, during and following the meeting. We documented 11 Advance Statements being completed and 1 being updated within legal activity due to them being a legal document.

As detailed in our last report, we have been working on our statistical reporting so we can be more accurate in the reporting of our activity. This work is ongoing and is updated every April with amendments made as necessary.

## Actions carried out by PAS



The service followed up requests from patients by various actions as outlined above. There were 2388 total actions in 2020/2021, this is in comparison to 2688 in 2019/2020 and 3284 in 2018/2019. There has been a clear decline in the actions carried out over the past 3 years. This can partly be attributed to a loss of the Skye Centre drop in during the SLA process in 2019. Additionally, with the reduced staffing in place due to covid-19 there were less staff on site to be able to action work and less opportunity to visit the wards due to restrictions implemented by PAS. However, given these restrictions over the past year, despite a decline of 11% in actions from the previous year we have clearly continued to provide an essential service to patients.



## **Plans For The Next Financial Year**

### **Organisational**

- Continue to recruit Board Members to ensure diversity of experiences.
- Volunteers, we aim to recruit new members to meet the conditions as set out in the SLA.
- Further expand our knowledge by maintaining current training and continuing to attend relevant courses and webinars.
- Explore the options for being more active online such as a website and twitter.

### **Service**

- Remain committed to responding to consultations as appropriate, to champion the voice of our patients in their unique position.
- Review our annual patient questionnaire in conjunction with the Patient Partnership Group to allow greater scope for feedback.
- Continue to work towards a cloud based system for storing PAS documentation to enable us to further be independent and paper free.
- To continue to support The State Hospital in regards to changes in the Clinical Model, ensuring patients' voices are prioritised.
- Review our ward drop in service and how this can better support our patients.
- To explore the 'hard to reach' population and assess how PAS can better support these individuals.
- To develop an admission pack to provide to all new patients to TSH to inform them of PAS and how we can support them.
- To develop a robust recruitment and induction process for any future recruitment drives, including those for volunteers.
- To continue working on measuring impact and how we can further evidence our impact to patients.

## **Board of Directors**

Michael Timmons  
Chair



Joined PAS in 2017

Michael started his involvement with PAS as a Volunteer Advocate. He graduated from the University of Glasgow with a BSc in Psychology. Michael has worked in a variety of roles in the Health and Social Care Sector. Michael is currently the Head of Communities for the music and dementia charity Playlist for Life embedding the use of personally meaningful music for those living with dementia across the UK.

Danny Reilly



Danny had a career of over 30 years in local government, including community development and management of care services. He currently works in the field of care service improvement. He joined the Board of the Patients' Advocacy Service in 2013.

He also chairs the Open Gates organisation; based in Glasgow and working with people on community payback orders and men coming to the end of life sentences. Danny is a qualified hypnotherapist, practicing in the west of Scotland.

Andrew Gardiner  
Treasurer



Andrew became involved with PAS in March 2000 and has held the roles of Chairman and Treasurer of the organisation. Work wise, he retired after a career in social work, education and public health having gained experience in local authority, NHS, voluntary sectors and as a university lecturer.

Previous voluntary roles include Training and support work with Councils on Alcohol and Victim Support Board member of the African Health Policy Network, Chair of the Nairn Community Care Forum, Health Council member in Highland and former Convenor of the Scottish Association of Health Councils.

Heather Bailie



Joined PAS October 2011

Solicitor since 1980 initially involved in court work.

1986 specialised in licensing law. Co-author: annotations to the Licensing (Scotland) Act 1976.

1993 appointed chairman: Social Security Appeal Tribunal, then Tribunal Judge: First Tier Tribunal (Social Entitlement Chamber).

2005 appointed Legal member: Mental Health Tribunal for Scotland (MHTS) and in house convener 2011.

2008 appointed Legal member: Parole Board and vice chair 2011.

Now semi-retired and working part time as convener of mental health tribunals.

## **Treasurer's Report**

Treasurer's Report for Financial Year ending 31st March 2021.

Treasurer's Comment:

### **1. Operating:**

The Statement of Financial Activities shows a net deficit for the year of **£4,565**, our reserves stand at £45,667.

### **2. Income:**

Overall income for the year was **£144,682** this includes the interest received, funds carried over from previous year.

### **3. Costs:**

Overall expenditure for the year was **£148,797**.

### **4. Capital Items Purchased:**

During the year no capital items purchased.

### **5. Cash and Bank Balances: £46,164**

OSCR (Office of the Scottish Charity Regulator) requires that charities must have a minimum of three months running costs held on account at any given time. At the year-end these reserves stood at **£45,667**.

Treasurer,

Andrew Gardiner

## Financial Report

### Patients' Advocacy Service Income and Expenditure Report For the period from 1 April 2020 to 31 March 2021

	£
<b>Gross Income</b>	144,682
<b>Gross Expenditure</b>	149,247
<b>Incoming Resources</b>	
Government Funding	144,682
Bank Interest	0
	<b><u>144,682</u></b>
<b>Cost of Charitable Activities</b>	
Employment Costs	142,658
Expenses	470
Establishment Costs	1,583
Print, Post, Stationery	0
Subscriptions and donations	380
	<b><u>145,091</u></b>
<b>Governance Costs</b>	
Accountancy Fees	2,274
Professional Fees	1,432
	<b><u>3,706</u></b>
<b>Total Resources Expended as per Account</b>	<b>148,797</b>
<b>Cash &amp; Bank Accounts</b>	<b>46,164</b>
Liabilities payable in one Year	5,062
<b>Net Current Assets</b>	<b>41,102</b>



## **Covid-19: Staff Wellbeing**



CIPD (2020)

Based on CIPD guidance and the focus on well-being at work, PAS made the decision as of the 23<sup>rd</sup> April to reduce staff in the office to one day per week which was operated having a 7-day gap to give routine to staff and ensure a period of incubation should symptoms develop. This was imperative to the well-being of our staff, many who have other responsibilities. It was also our intention to protect patients as much as possible and so initially, contact was offered via the patient phone or letter. Only those who would be unable to engage via these methods of communication were visited in person. However, proper PPE was utilised where required. We adhered to all protocols put in place by TSH to keep both our staff group and patients as safe as possible. As intermediate CPA's were paper based for some time, as soon as these were resumed we acted to ensure patients were appropriately supported to voice their views at these meetings. We also ensured we fostered a plan should anyone have to self-isolate, or, in the worst case scenario, advocacy was unable to come in to the hospital. This was a rapid response whereby appropriate packs were made up for new admissions regarding information on their legal status and the rights they held. We also made sheets which could be sent to the wards for patient requests for advocacy input. Fortunately for us, this was not something we needed to utilise however it was an important piece of work which required to be completed should the situation arise.

Discussion within the team remained strong with weekly team meetings, held virtually, to both share information and provide peer support. At all stages emails and calls to each other was imperative to ensure staff didn't feel alone in the office. We also moved to using a digital diary to ensure all staff were able to access the diary and were aware of any meetings which may be held. It also ensured a measure of safety for the member of staff in the office alone as those working from home were aware of where the person was and when they should be in the office.

Additionally, we shared knowledge relating to covid-19 as updates were provided from both TSH and the Scottish Government. The interim manager met with the Skye Centre Lead to discuss the updated security arrangements, social distancing, masks, lateral flow testing and the offering of Covid-19 vaccines to all those in patient facing roles. This highlights the positive relationships in place between TSH and PAS staff.

As time progressed, we began to work in bubbles of teams to ensure there would always be a team available to staff the office in the event someone had to isolate or had a positive test. We also brought in the risk team and estates from TSH to reconfigure the office to be socially distanced. Further keeping everyone safe.

Staff wellbeing was of great importance to PAS during this time and it was important they were offered time and space to deal with the effects of the pandemic whilst also continuing to offer an important and necessary service to patients detained within TSH. We offered all staff a gift to purchase food and drink for their online Christmas party which was necessary for PAS to show gratitude to the team for their commitment and hard work during this period.

Unfortunately, following Christmas, we found ourselves in the position of another lockdown and again we reduced the staff in the office with 2 members on site each day and 1 on a Friday. This allowed us the opportunity to have 3 bubbles but was an unfortunate end to the financial year. We are hopeful we can resume a fully staffed office in the coming months, not only for patients, but also for the team to come together again in person.

PAS is aware it's staff are the lynchpin that holds the organisation together, providing patients the opportunity to have their voice heard. They have been able to successfully lead the team through a turbulent year ensuring patients have access to independent advocacy whilst also ensuring the staff team remained supported throughout.

## **Recruitment During a Pandemic**

Recruitment at the best of times is challenging, never more so than during a pandemic. PAS worked hard to ensure an informative advert was placed and we received a high volume of interest to our fixed term advert for an administrator. After a period of time and strict scrutiny of applications, we had to organise 5 interviews to take place over Microsoft Teams. I'm sure for applicants it was a daunting process, potentially using technology they had never encountered and trying to portray themselves via video rather than in person. For the team behind the recruitment, there were challenges that saw many emails being circulated however, we successfully scheduled each interview, held test meetings with those new to the technology and finally held the interviews which all went ahead on time without any technology glitches, a challenge in and of itself.

Following a unanimous agreement, I was lucky enough to be able to call and tell the lucky candidate of their success and offer them the role which was, thankfully, gratefully accepted. If we thought this process was challenging, far more was in store.

The disclosure also brought its own challenges, with applications needing to be submitted online and delays due to an increased number of those responding the pandemic requiring their own checks. Ordinarily we would welcome a new member of staff to the office prior to their start date to introduce them to the team. Unfortunately, due to the restrictions in place both by TSH and PAS we were unable to offer this. Therefore, Charlene's first day she was thrown in at the deep end completing many of her tasks independently. This highlighted to PAS they had made the best choice in their recruitment with her being so accepting of the situation.

She very quickly settled in to the role, picking things up at an incredible pace. Lynn, our previous administrator was instrumental in helping her settle in to the role and being on hand to answer any queries she had. I was also at the end of a video call to offer support wherever possible, definitely a novel way to meet a new member of the team and work with them for some time after they began the role and not one I'd wish to do regularly. After a successful few months, a permanent position became available for an administrator and PAS were delighted to offer this opportunity to Charlene. She has brought a breath of fresh air to the office and continues to flourish in the role.

### **Acronyms**

PAS	Patients' Advocacy Service
TSH	The State Hospital
SLA	Service Level Agreement
GDPR	General Data Protection Regulation
SIAA	Scottish Independent Advocacy Alliance
AGM	Annual General Meeting
PPG	Patient Partnership Group
CPA	Care Programme Approach
MHT	Mental Health Tribunals

