TOGETHER for Children and Young People

Together we will make Cheshire East a great place to be **young**

Cheshire East Children and Young People's Participation, Advocacy and Support Directory

Live practitioner resource

November

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Cheshire East Council

1. PURPOSE, SCOPE, AIMS AND VISION

1.1 This directory should be read alongside the Children and Young People's Participation and Advocacy Procedure and Participation Support Guide. It is intended to help practitioners identify current support routes after first considering what the child or young person needs in order to participate meaningfully.

1.2 How to use this directory

1.2.1 Start with the child or young person's need, not the service. Consider whether they need:

- clear information, preparation or changes to how we communicate;
- someone they know and trust to help them;
- an alternative way of expressing their views;
- additional or specialist communication or participation support;
- independent advocacy;
- an Independent Visitor;
- specialist advocacy relating to a particular process; or
- a combination of these.

1.2.2 Advocacy is not the only response to a participation need. Equally, children and young people should not be required to try other forms of support before accessing independent advocacy where the commissioned route applies. The child or young person's wishes, feelings and lived experience remain central. Advocacy should strengthen their voice rather than substitute an adult's view.

1.2.3 Practitioners should record participation barriers identified, support considered and decisions reached within relevant case records, assessments and plans.

1.2.4 Live resource note: Service eligibility, commissioning arrangements, referral routes and contact details can change. Practitioners should check current information before making or promising a referral.

INDEPENDENT ADVOCACY - CORAM VOICE

Type of support: Commissioned independent children's advocacy

Coram Voice provides Cheshire East's commissioned independent advocacy service for children and young people.

Advocacy is independent, child-led, issue-based and outcome-focused. It can help a child or young person to:

- understand their rights, options, processes and what will happen next;
- identify and communicate their wishes, feelings, questions and concerns;
- prepare for meetings and decisions;
- speak for themselves;
- have their views communicated or formally represented where requested or appropriate;
- participate in relevant meetings, reviews or placement decisions;

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- challenge decisions or make a complaint;
- resolve concerns as early as possible;
- access instructed advocacy; or
- receive non-instructed advocacy where they cannot give instructions in the usual way.

The commissioned service must respond to individual communication needs and can use accessible information, visual or communication tools, interpreters, preferred communication methods and flexible ways of working. A child placed outside Cheshire East should still be able to access advocacy.

Who can access the commissioned advocacy service?

The commissioned service includes:

- children in care aged 0-18;
- care leavers aged 18-25;
- children subject to Child Protection Plans;
- specified homeless young people aged 16-17 who meet the commissioned Children Act criteria;
- young carers;
- children and young people making complaints;
- children and young people with disabilities aged 0-18 and those in transition; and
- children and young people seeking asylum.

Who can refer?

For general advocacy, contact/referral can come from:

- the child or young person directly through self-referral;
- Cheshire East;
- a parent or carer; or
- another professional where independent support is considered beneficial.

Practitioners should support children to self-refer where this is what they want and should not become an unnecessary gateway to the service.

Current contact: Coram Voice | Freephone 0808 800 5792 | WhatsApp/text 07758 670369 | help@coramvoice.org.uk

Use the current Cheshire East/Coram Voice referral pathway for professional referrals.

Timing: For general issue-based advocacy, the commissioned expectation is allocation within 3 working days and initial contact within 5 working days of allocation. Child Protection advocacy should instead be arranged in accordance with conference timescales so that the child's views can genuinely influence the process.

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CHILD PROTECTION ADVOCACY

Type of support: Commissioned independent advocacy - specific Child Protection pathway

Children and young people aged 8-18: OPT-OUT

Do not wait for the child to ask.

Children and young people aged 8-18 within the Child Protection process are within Cheshire East's commissioned opt-out advocacy model. Use the specific Child Protection pathway so that advocacy is proactively brought to the child in time to influence the conference.

The advocate can:

- explain the Child Protection process;
- help the child understand what is happening;
- gather their wishes and feelings;
- help them prepare for conference;
- support them to participate in the way they choose;
- formally represent their views at conference where requested;
- provide instructed or non-instructed advocacy as appropriate; and
- re-engage around review conference where required.

Opt-out does not mean compulsory. The proactive offer should not depend upon the child first requesting advocacy, but the child retains choice about whether and how they engage.

Children aged 0-7: BY REFERRAL

Children aged 0-7 are not within the 8-18 opt-out model but can access independent advocacy by referral where appropriate. Age or an inability to give conventional instructions should not itself be treated as meaning advocacy cannot be provided. Consider communication approaches and, where appropriate, non-instructed advocacy.

INDEPENDENT VISITOR SERVICE - CORAM VOICE

Type of support: Independent long-term befriending and mentoring relationship

The Independent Visitor service is for children and young people in care who have limited or no meaningful contact with their parents and for whom an Independent Visitor would be beneficial.

An Independent Visitor (IV) is a trained volunteer who is separate from the care system. Unlike advocacy, which is usually focused on a particular issue, decision or process, the IV role is intended to provide a consistent and trusted relationship over time.

An IV can:

- build a long-term supportive relationship with the child or young person;
- meet them regularly and spend enjoyable and meaningful time together;
- provide consistent emotional and social support;
- listen to what matters to them and promote their identity;
- encourage their participation in decisions affecting their life;

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- support communication with professionals;
- attend review meetings where the young person wishes; and
- offer advice and support where appropriate.

The contract anticipates regular visits and outings, typically around twice a month, arranged at times and places appropriate to the child or young person, including evenings and weekends.

Key criteria for appointment

An Independent Visitor should be considered where:

- the child or young person is in care and has limited or no meaningful parental contact;
- having an IV would be beneficial to their welfare; and
- the child or young person agrees to have an Independent Visitor.

The child's wishes and feelings should be central to the decision and to the subsequent matching process. Matching should take account of the child's interests, needs, preferences, personality and culture.

Who can refer?

The commissioned pathway allows referrals from social workers, Independent Reviewing Officers, carers, and the child or young person themselves. The wider contract specifies that IV referrals may be made by Cheshire East or through self-referral where an Independent Visitor is considered to be in the child's best interests.

What happens after referral?

The commissioned service should:

- assess and accept or decline the referral within 10 working days;
- match the child with a suitable IV within 6 weeks of referral acceptance;
- base matching on shared interests, personality, culture and the child's preferences; and
- arrange an initial meeting within 2 weeks of the match being confirmed, with support from staff where required.

Important distinction: An Independent Visitor is not the same as an independent advocate. A child with an Independent Visitor may still need advocacy concerning a particular decision, complaint, Child Protection process, care plan, placement or other issue. Equally, an advocate working with a child on an individual issue does not provide the longer-term relationship intended through the Independent Visitor service. Do not assume one role meets both needs.

CHILDREN AND YOUNG PEOPLE SEEKING ASYLUM AND UASC AGE ASSESSMENTS

Type of support: Independent advocacy / specialist age-assessment support

Children and young people seeking asylum are one of the eligible cohorts within Cheshire East's commissioned advocacy service. The contract additionally provides a specific UASC Age Assessment Support Service for young people going through an age-assessment process.

For UASC age-assessment advocacy, the referral is made by Cheshire East so that appropriate independent support can be provided during the assessment process. The commissioned role

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includes acting as an Appropriate Adult and providing advocacy support so that the young person understands the process, can express their views and has their rights protected.

Practice note: Language or communication need must not create a barrier to advocacy. The commissioned service is expected to provide accessible support, including interpretation where needed.

SEND INFORMATION, ADVICE AND SUPPORT - CEIAS

Type of support: Free, confidential and impartial SEND information, advice and support

CEIAS supports children and young people with SEND from birth to 25 who live in Cheshire East, as well as their parents and carers.

It can help children and young people understand and navigate:

- SEN Support;
- Education, Health and Care Plans;
- education and SEND processes;
- SEND rights and options;
- meetings;
- mediation and appeals;
- preparation for adulthood; and
- routes for resolving SEND-related concerns.

Current contact: 0300 123 5166 | ceias@cheshireeast.gov.uk | online contact is available through CEIAS.

Important distinction: CEIAS may be exactly the right support where the barrier concerns understanding or navigating SEND. It should not automatically substitute for independent advocacy where the child needs independent representation in a Children's Services decision or where independence is important because of the nature, consequence or power imbalance of the process.

SOMEONE THE CHILD OR YOUNG PERSON TRUSTS

Type of support: Informal participation support

A child or young person may choose a family member, friend, carer, trusted adult or another person with whom they feel comfortable to help them understand, prepare or have their say.

The child should be asked what they want that person to do. They may want the person alongside them while they speak for themselves, to help them remember information, help them prepare questions, or help communicate some of their views.

A trusted person should enable rather than replace the child's voice. Any restriction should be necessary and proportionate and should take account of safeguarding, confidentiality, coercion, conflicts of interest and the child's own wishes. A trusted person is not a substitute where the child wants or requires somebody independent.

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COMMUNICATION, LANGUAGE AND ACCESSIBILITY

Type of support: Reasonable adjustment / accessible participation / specialist communication support

If a child or young person is struggling to participate, first consider whether the barrier can be removed or reduced by changing how we work. This might include:

- age-appropriate information;
- Easy Read or other accessible information;
- visual communication;
- symbols, pictures or communication aids;
- preferred communication methods;
- professional interpretation;
- British Sign Language interpretation;
- alternative formats;
- additional preparation time;
- shorter meetings or breaks;
- a different environment;
- remote or alternative participation;
- specialist communication support; or
- allowing the child to write, draw, record or otherwise communicate their views rather than requiring them to speak in a meeting.

Communication support and advocacy are different functions. A child may need both.

NON-INSTRUCTED ADVOCACY

Type of support: Specialist independent advocacy

Some children and young people cannot tell an advocate directly what they want or give instructions in the usual way. This may relate to age, disability, communication needs, cognitive needs, or the particular issue or decision. This should not end consideration of advocacy.

Where appropriate, non-instructed advocacy keeps the child's rights, preferences, wishes and lived experience visible within decision-making. The need for non-instructed advocacy is issue-specific, rather than a fixed judgement about the child. Practitioners must continue to use direct work, observation, communication methods and aids, knowledge of the child and professional curiosity alongside advocacy.

ALTERNATIVE WAYS TO PARTICIPATE

Type of support: Participation arrangement

Attendance at a meeting is not the same as meaningful participation. A child or young person may instead or additionally:

- speak to the practitioner or Chair beforehand;
- provide written views;

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- draw or use visual communication;
- provide an audio/video recording where appropriate;
- participate remotely;
- attend only part of a meeting;
- have their views communicated by an advocate or trusted supporter;
- meet the decision-maker separately; or
- agree another individual way of contributing.

Practitioners should make arrangements early enough for the child's views to reach the decision-maker and influence the process.

WHEN THE CHILD DOES NOT WANT ADVOCACY

Respect an informed decision wherever possible.

Explore whether the child wants:

- a different advocate;
- someone they trust;
- another way of communicating;
- another form of support; or
- no additional support.

Do not describe an informed decision not to use advocacy as 'non-engagement'. Do not assume a previous refusal remains permanent. Advocacy should be reconsidered when circumstances change, a significant new decision arises, the child says they do not feel heard, or a statutory/commissioned trigger requires reconsideration.

NO AVAILABLE SERVICE MEETS THE IDENTIFIED NEED

Unmet advocacy or participation need

Type of response: Management oversight / individual solution / escalation / quality assurance

A child's need does not disappear because they do not fit an existing service specification.

Where a child cannot participate meaningfully and the commissioned advocacy route or another existing service cannot meet the identified need:

- return to the participation barrier;
- discuss the need with the relevant manager;
- consider what can be changed within our own practice;
- consider an individual solution;
- identify interim adjustments or alternative support;
- record the need and the routes explored;
- escalate significant or persistent unmet advocacy need through the agreed Children's Services route; and
- ensure recurring gaps become quality-assurance and commissioning intelligence.

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Do not close the issue as simply 'Not eligible for advocacy'. The outstanding question remains: What does this child or young person need in order to understand, participate and be heard - and what are we going to do about it?

Quick practitioner guide

If the child or young person says or demonstrates...	Think...	Then check...
I want somebody independent to help me.	Independent advocacy	Coram Voice eligibility/current referral route
Child Protection, age 8-18	Opt-out advocacy	Use CP pathway - do not wait for them to ask
Child Protection, age 0-7	Independent advocacy	Referral where appropriate
I want to complain / nobody is listening to me.	Independent advocacy	Coram Voice complaints advocacy
Child in care / care leaver with an issue or decision	Independent advocacy	Coram Voice
Child in care has limited/no meaningful parental contact and would benefit from a consistent independent relationship	Independent Visitor	Discuss IV offer; child's wishes are central; use current Coram Voice IV referral route
Child already has an IV but needs help with a particular decision, complaint or process	Independent advocacy	Consider Coram Voice advocacy separately - IV involvement does not replace advocacy
Young person undergoing UASC age assessment	Specialist independent support	Cheshire East UASC age-assessment referral route
My difficulty is about SEND.	SEND information/advice/support	CEIAS; consider advocacy separately if independence is required
I want [trusted person] with me.	Trusted support	Enable where appropriate; clarify what the child wants them to do
I don't want to talk in the meeting.	Alternative participation	Writing, drawing, recording, pre-meeting, partial/remote participation etc.
Child cannot communicate conventionally	Communication adaptation + possible non-instructed advocacy	Adapt first; do not conclude advocacy is impossible
Language/communication/accessibility is the barrier	Accessible practice/specialist support	Interpretation, communication support, accessible formats, adjustments

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If the child or young person says or demonstrates...	Think...	Then check...
I don't want an advocate.	Respect choice	Explore alternatives and revisit at future trigger points
None of those work for me.	Potential unmet participation/advocacy need	Individual solution + manager discussion + escalation

Key principle

One child or young person may appear in several rows.

Do not ask only: 'Which service are they eligible for?'

Ask: 'What is getting in the way of this child or young person participating meaningfully, and what combination of support or changes will address it?'

Use the Participation Support Guide to identify the decision, test Understand / Communicate / Consider / Influence / Challenge, identify the barrier, choose the response and review whether participation actually improved.

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