

**sage**  
advocacy

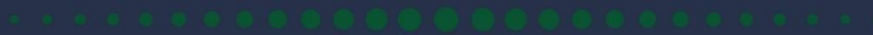
# Annual Report

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**Nothing about you / without you**





# Chairperson's Report

It is fair to say that 2020 was an extremely challenging year, particularly from an operational perspective. The difficulties posed by Ireland adopting levels of restriction, in accordance with public health measures, have challenged Sage Advocacy's work practice. Despite these challenges, Sage Advocacy saw a number of referrals consistent with the previous years, just 16% down on the previous year and a marked increase in the numbers of information and support calls.

Sage Advocacy personnel have shown tremendous resilience and flexibility, with extended periods of remote working and kept the 'show on the road' and maintained our high standards of service provision.

In February we launched a discussion document called 'Delivering Quality Medical Care in Irish Nursing Homes: Current Practice, Issues and Challenges'. In December we launched 'Choice Matters', a discussion document on how the Covid-19 public health emergency exposed how Ireland's current long-term support and care system, with its high reliance on residential nursing homes, was "totally inadequate" to safeguard vulnerable, older people.

Towards the end of 2020, the Sage Advocacy Board began a review of the Statement of Strategy, with a revised Strategic Plan to be adopted in early 2021. This, in co-ordination with our Service Level Arrangement with the Health Service Executive, provides a strategic blueprint for our organisation over the coming year.

Sage Advocacy had regular engagement during the year with our main funder, the HSE, and we continue to enjoy a positive relationship. We also secured EU funding for a project under the Erasmus+ Programme on the topic of safeguarding older persons' legal and human rights with partners BAGSO (Germany), Tulip Foundation (Bulgaria) and ProSenectute (Austria).

Sage Advocacy had some significant staff turnover during 2020, with Mervyn Taylor leaving his post as Executive Director. I want to thank Mervyn for the enormous contribution he has made to Sage Advocacy's work since its inception. Sarah Lennon was recruited to replace Mervyn in September 2020.

I would like to thank my colleagues on the Board and Committees of Sage Advocacy, including members of the Independent Complaints Review Panel, for the important contribution they have made to the effective governance of the organisation.

The Hon Mary Laffoy  
Chairperson

# Executive Director's Report

Looking back on 2020, each person's resilience and capacity for innovation was tested and this equally applied to Sage Advocacy.

I joined Sage Advocacy in September 2020, taking the reins from Mervyn Taylor, who has made such a significant impact to our organisation and its work. I would like to record my thanks to Mervyn for ensuring that as seamless as possible a transition could occur, in the circumstances.

I have been bowled over by the commitment, dedication and skills within the organisation by its staff, trustees and volunteers and, throughout the pandemic an unwavering commitment to the mission of Sage Advocacy has prevailed.

The biggest challenge has been the need to adapt the way we do our work. So much of what we do depends on the inter-personal, the making of connections and the building of trust. The necessity to keep social-distance is challenging to that.

Our advocates often had to establish contact with the people we support through phone, video calls or while observing social-distancing, all of which makes providing support that bit more challenging.

Sage Advocacy was glad to see that the importance of our work was recognised in the guidelines on visits to Long Term Residential Care Facilities (LTRCFs) developed by the Health Protection Surveillance Centre. These guidelines list 'advocacy services' as an Essential Service Provider and ensured that we could access nursing homes and other care facilities to provide face to face supports, where it was critical to do so.

Sage Advocacy thanks the HSE who provide us with our annual funding and with whom we enjoy an excellent working relationship which we continue into 2021.

The Covid-19 crisis showed no let-up in a demand for our services, with Sage Advocacy reporting a record year in terms of information and support enquiries and our second highest ever demand for advocacy referrals. These results show clearly the essential nature of Sage Advocacy's work and we are grateful to each of our staff for continuing to deliver in challenging circumstances.

I would like to thank the Board of Sage Advocacy who provide superb oversight, governance, expertise and knowledge for our work. I was glad to support the Board to develop a new strategic plan for 2021 – 2023, which sets out all of our ambitions for the organisation over the coming years. I am very much looking forward to working towards the realisation of those ambitions and to embedding the principle of 'nothing about you/without you' into all aspects of our work.

Sarah Lennon

Executive Director

# ACHIEVEMENTS IN 2020

2ND HIGHEST  
EVER  
REFERRALS FOR  
ADVOCACY



Launch of the  
Family Forum  
Initiative in  
September

ADDRESSED THE  
COVID-19 OIREACHTAS  
COMMITTEE IN MAY  
2020

Launch of new  
publication  
'Choice Matters'  
in December



€1.7m funding  
in 2020

1248 referrals  
for  
independent  
advocacy

1670  
information  
and support  
calls

# The Six Quality Standards of Our Work

## **1. Respect**

Reflecting the right of every person in regard to dignity and respect, including each individual's right to privacy, confidentiality and self-determination.

## **2. Social Justice**

Promoting equal treatment with other people in respect of access to basic goods, services and protections and a positive affirmation of social solidarity

## **3. Competence & Compassion**

Demonstrating high levels of skill, competency, compassion and consistency on the part of advocates

## **4. Accessibility**

Available in a manner that is convenient and easily accessible to people who require support.

## **5. Independence**

Structurally, operationally and psychologically independent from health and social care service providers and representing only the will and preferences of people receiving support.

## **6. Responsibility and Accountability**

Acting with integrity and responsibility and engaging with people who use the service and with other stakeholders in an honest and transparent manner

# Introduction

## **The Sage Advocacy Strategic Plan is centred around 6 themes.**

The events of 2020 have affected our world in many ways and in this context, we in Sage Advocacy, decided it was timely to review our most recent strategic plan. That plan restates our ambitions towards delivering on our main object to *promote, protect and defend the rights and dignity of vulnerable adults, older people and healthcare patients.*

This latest strategy represents the next stage in our development as we seek to grow and improve under the six themes: independent advocacy, the people we represent, systemic change, our organisation, our people, and partnerships.

The Strategic Plan was considered by the Sage Advocacy Board of Directors in December 2020. Nevertheless, this annual report, relating to 2020's work is designed to reflect on those themes.



# Independent Advocacy

Sage Advocacy delivers our service through the provision of information and support, and individual case-based representative advocacy. Covid-19 presented challenges and required Sage Advocacy adapt our way of delivering independent advocacy to ensure individuals who may be in vulnerable circumstances had the benefit of an advocate when needed. We established a case prioritisation mechanism and service guidelines to ensure clients experiencing critical issues were met in person. We used technology to engage with clients remotely, we made best use of our strong working relationships with stakeholders to work collaboratively to progress individual issues on behalf of our clients, and we continued to highlight systemic issues regionally and nationally.

*The Information and Support Service* is a first point of contact for many people accessing Sage Advocacy by phone, email and online, providing information and guidance on a range of topics. During 2020, the normally office-based team transitioned seamlessly to operating remotely with no disruption in service. To ensure people had access to relevant information a Covid 19 pandemic resource section was created on [www.SageAdvocacy.ie](http://www.SageAdvocacy.ie) which brought together details on the variety of state and voluntary initiatives, supports and services operating in response to the pandemic.

Actively communicating, listening and engaging with the person are central to carrying out the role of an advocate. Sage Advocacy highly values the importance of meeting with the person in a place they are most comfortable to ensure verbal and non-verbal communication is facilitated. This is particularly important when engaging with different communication styles, language and when using communication tools. The challenge presented to our advocates by Covid-19 restrictions required them to reflect and adapt their practice to ensure people accessing the service were communicated with in a way that suited them while we adhered to public health restrictions and infection control measures. Our team have reflected that much could be achieved by using technology, phone and video calls, and there is potential for effective use of technology beyond Covid-19. However important non-verbal communication cues are missed when using some technology, and there is greater emphasis on verbal communication.

As a service we appreciated the collaboration of colleagues in other services and within care settings to enable us deliver an advocacy service, and we had to ensure that client confidentiality was not compromised through collaborative working. We found we could progress and deliver an advocacy service in response to the majority of referrals to the service, and through prioritisation ensured that, where critical issues arose, the advocate met with the person.



Due to restrictions some of our clients found it difficult to access supports in the community such as day services which led to increased pressure on carers. There was also difficulty in accessing some professional services such as a solicitor, in a nursing home. Sage Advocacy supported people impacted by operational decisions taken in the early stages of the pandemic. Amongst those affected were: people transferred to long-term care from acute hospitals without adequate time and support to decide about long-term care and complete paperwork, resulting in some people being in a place of care that they did not choose; people on transitional care funding; and people without access to personal finances for long periods.

The restrictions imposed by long-term care facilities to limit people coming into premises had an impact on Sage Advocacy in the early stages of the pandemic. We challenged resistance from a small number of facilities to facilitate advocates meeting with clients in long-term care. The Health Protection Surveillance Centre guidance documents on visiting clarified the situation for essential service providers, including advocacy. However, we continued to see varied interpretations of the guidance documents by long-term care facilities, which has undoubtedly impacted on residents and their loved ones.

## **Case Study 1**

### **Housing in a Pandemic**

'Client A' lived alone in the community. They received a letter advising them that the house they were renting long-term was to be sold the following year. Although they received the expected notice period from the landlord, when they called Sage Advocacy for support, the client stated they were feeling overwhelmed and very sad that they had to move at this stage in their life. Additional concerns were raised at the point of referral including mobility issues.

The client was in receipt of Housing Assistance Payment (HAP) and it was discovered that they had been removed from the housing list once they had started to receive HAP assistance for private housing. The Sage Advocate supported the client to engage with the local authority and they were reinstated on the housing list.

The renewal of the social housing application had its own difficulties, given the fact that Client A needed support with securing relevant documentation and completing a considerable amount of paperwork at the time of ever-growing concerns due to public health guidelines, which not only made meetings very difficult, but also contributed to considerable delays.

The Sage Advocate managed to escalate the case with the local authority, advocating for the client to be accommodated in the same community, given the current circles of support available.

The client was offered a property nearby their former home and despite the relief of managing to avoid the prospect of homelessness, new challenges had to be overcome before the advocate successfully closed the case. The advocate supported the client to attend meetings with various representatives in the local authority, to apply for an exceptional-needs payment for relocation, to secure support for cleaning the new property, packing, transporting and unpacking belongings, to liaise with the local authority in making minor adaptations to the property to suit the client's needs and to cancel and reinstate utilities.

Within a year from the referral, the client was supported by Sage Advocacy to move to their new home.

# THE YEAR IN NUMBERS FOR ADVOCACY AND SUPPORT

**1,248**

**REFERRALS FOR  
ADVOCACY**



**INFORMATION AND  
SUPPORT CALLS**

**1,030**

**HELPLINE CALLS**

**640**



**ENGAGEMENTS WITH  
FAMILY FORUM  
MEMBERS**

**23,000**



**CASE COMPLEXITY**

**RED – 14%**

**AMBER – 47%**

**GREEN – 39%**



### **Transitioning to long-term care in a pandemic**

'Client B' was admitted to hospital due to a fall at home. The client was living alone prior to hospital admission and subsequently discharged to nursing home with transitional funding granted. A referral to Sage Advocacy was received from the Person in Charge of the nursing home, seeking assistance with the Nursing Home Support Scheme (NHSS) Office application.

Due to the impact of Covid 19, Sage Advocacy could not immediately engage with Client B. The referrer advised that a family member attempted to support remotely and engaged to request some financial information. The client did not wish for family to have further involvement, but identified a neighbour who could potentially help, alongside the nursing home identifying his solicitor as a support for the NHSS application.

The Client's solicitor met with the client but had concerns about the client's ability to understand and instruct on financial matters, based on conversation held with the client and in the context of their former engagements. At this point the nursing home staff attempted to support the client by engaging with the NHSS office manager, alongside contacting the Medical Social Worker in the hospital who supported the client prior to discharge. The transitional care funding was due to cease due to no further progression of the NHSS application.

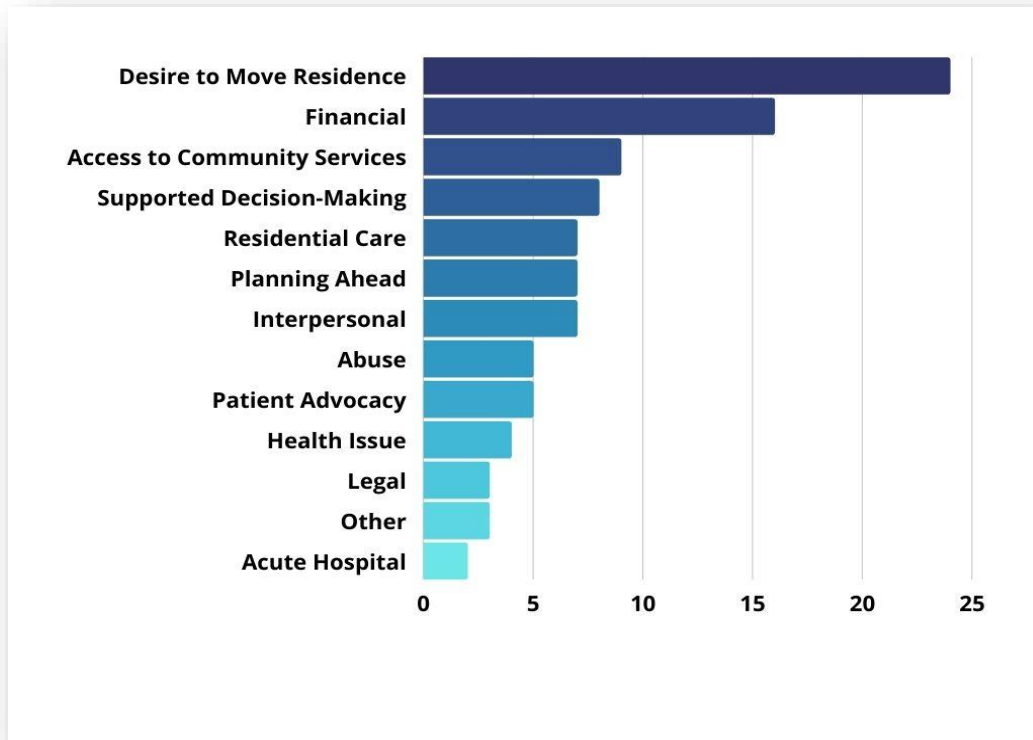
Sage Advocacy reviewed the case and brought it to our Case Management Group for discussion as to next steps. An in person visit with the client was advised to clarify both the client's wishes and consent for Sage Advocacy's service. On visiting with the client, it was established that their wish was to remain in long term care and initially they consented that Sage Advocacy a) support them in obtaining bank information, and b) contact their solicitor for further support. Client B did not consent at this time for a NHSS application to be progressed. Transitional care funding was extended to allow this period of reengagement, and for follow up actions.

On liaising with the client's solicitor, the solicitor reengaged with the client following a discussion on functional capacity and supporting decision making. The client's bank engaged directly with the client, and the client instructed on their wishes with regards to financial decision making around long-term care with support from their solicitor where required.

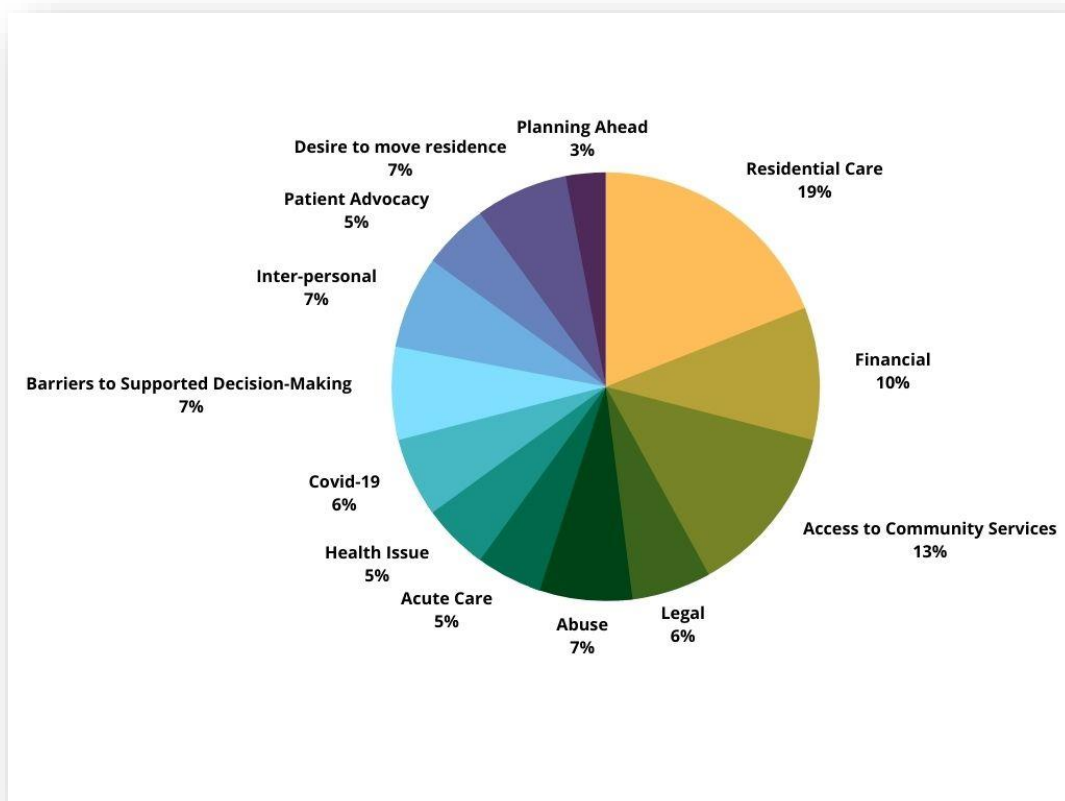
## Issues Arising

There were some interesting trends in 2020 in terms of the main issues arising in Sage Advocacy's case advocacy as well as our information and support service.

### New Cases Opened by Primary Issue



### Helpline and Information & Support Calls by Issue



## **Case Study**

### **Patient Advocacy**

'Person C' contacted Sage Advocacy on behalf of their adult child 'Person D' regarding difficulty they were having getting a hospital to respond to a complaint they had submitted ten months previously.

The complaint related to the care provided to D while she was an inpatient in the hospital. D gave C full permission to make the complaint on their behalf.

The hospital complaints officer had initially confirmed that they would be providing a written response to the complaint. As time went on and no response was received, C contacted the hospital again looking for an update. The hospital advised that the response would be provided in writing shortly and they were waiting on the clinician involved to complete the response to the questions asked.

After a further delay, C contacted the complaints officer again. The complaints officer replied to say that a meeting would be arranged instead. Many more weeks passed and no meeting was arranged. C contacted Sage Advocacy to request assistance. They felt that the complaint was not being taken seriously and were frustrated at the length of time it was taking for the hospital to provide them with a response.

Sage Advocacy spoke to D who advised of their experience in the hospital and outlined the aspects of the care they were unhappy with. D confirmed that they wanted Sage Advocacy to assist C to try to get a response to the complaint that was made. With D's consent, Sage Advocacy contacted the hospital complaints officer and asked that the written response to the complaint be sent and that a meeting be arranged afterwards to discuss the contents of it. Within 10 days this response was finally received. C was grateful to finally receive a response after so long. However, they expressed they felt upset that the matter only seemed to be addressed when Sage Advocacy became involved.

Both C and D confirmed that they wanted to go ahead with a meeting and that they wanted Sage Advocacy to support them.

Prior to contacting Sage Advocacy, D said that they felt the hospital was dragging the process out in an attempt to wear them down so that the complaint would be retracted. They reported that if Sage Advocacy did not assist them they did not know if they would have had it in them to continue to battle for answers.

## **Patient Advocacy Overview**

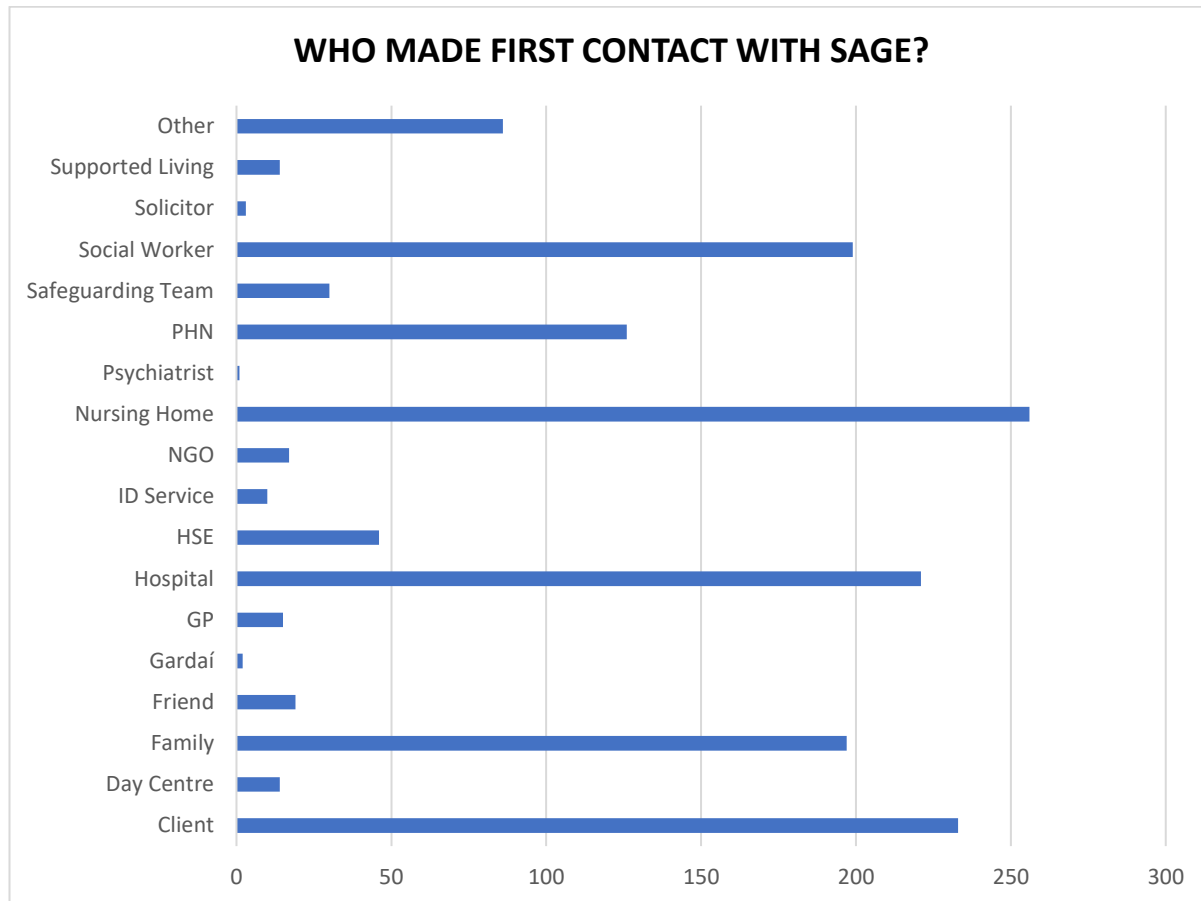
In 2020, patient advocacy work related to complaints to care providers, the Ombudsman and regulators. We also provided advocacy to patients through clinical review processes. We assisted people who had issues with the care provided in hospitals, nursing homes and the community. Due to the Covid-19 pandemic many services experienced delays in dealing with complaints, which can be frustrating and disheartening to people who have concerns about the care they or a family member received. Sage Advocacy continued to provide support to clients throughout the entirety of the process and helped to alleviate people's concerns about the delays and managed people's expectations in order to lessen the hurt and distress when they experienced delays. Towards the end of 2020 the Service Manager and Patient Advocacy Coordinator commenced in house training on patient advocacy with the team to further develop competencies and broaden our knowledge base. This training will continue in 2021.

## **Review of Cervical Screening; Supporting Women and Families**

In 2020 Sage Advocacy concluded our role to provide independent support to the women and families at their Open Disclosure meetings as part of work of the Independent Expert Panel Review of Cervical Screening and the review carried out by the Royal College of Obstetricians and Gynaecologists (RCOG) in the United Kingdom. This work had commenced in 2019. Sage Advocacy representatives attended over 25 of the Open Disclosure meetings. Information and support were also provided over the phone. Sage Advocacy liaised with the Screening Service and the HSE throughout the process to make them aware of any difficulties the families were encountering with the process. Once the meetings were completed the Patient Advocacy Coordinator met with the HSE to provide feedback on the process from the patient perspective and from Sage Advocacy's perspective. The Patient Advocacy Coordinator was also invited to present on their experience of the RCOG disclosure process from the patient perspective to the Screening Service's CervicalCheck Interval Cancer Implementation Group.

## Referrals for Advocacy

In terms of who is making referrals to Sage Advocacy, the majority of referrals continue to come from nursing homes. There are however, a significant number of self-referrals, referrals from hospitals and family-referrals.





# The People we Represent

## **Sage Advocacy Nursing Homes Residents Relatives Forum**

Our Family Forum was initially established in September 2020 and generated significant interest from its inception. The Forum allowed Sage Advocacy to regularly communicate with members and to provide direct support or advocacy services, if required.

We regularly communicated with Family Forum members in a number of ways throughout 2020: by responding directly to members by phone, via email; and by collectively engaging with our Family Forum members across our social media pages, chiefly Twitter, Facebook and LinkedIn.

The Family Forum also received enquiries from families and nursing home residents who were not registered members of the Forum and who may have approached with a one-off inquiry or issue, which they sought support or advocacy services for.

At specific times of the year, particularly for example in relation to updated visiting guidance issued by the Health Protection Surveillance Centre (HPSC) or at a special time for nursing home residents and families, for example Christmas, there was a large increase in the number of calls and engagements with nursing home residents and their families.

From September 2020 to December 2020 Sage Advocacy's Nursing Home Residents Family Forum recorded more than 23,000 engagements via phone, email, survey and across our social media platforms.

## **Sage Advocacy supporting Access to Justice**

In 2020, the delay in commencing the Assisted Decision-Making (Capacity) Act 2015 persisted and we were still dealing with the archaic, Victorian-era wardship legislation as well as the wardship court itself moving on line. In addition to the President of the High Court, two additional judges were assigned to hear wardship cases.

These changes coincided with the appointment by the Wardship Court of Guardians ad Litem (GALs) for some adult persons who were the subject of wardship proceedings, which included Sage Advocacy clients. As there are no Court Rules setting out the function or role for GALs, in practice, there is a lack of consistency in approach and understanding of the role, making it extremely difficult to ensure uniform and transparent access to justice.

The National Disability Authority held a virtual Conference in May 2020 on “Facilitating the effective and equal participation of persons with disabilities in the Irish criminal justice system (Article 13 UNCRPD)” at which then UN Special Rapporteur on the Rights of Persons with Disabilities, Ms Catalina Devandas Aguilar, spoke of the need for support for people in accessing justice. She described them as “support persons or facilitators who support the person with the disability to understand and make informed decisions”. She stated that these support persons “do not speak for the person with the disability but are neutral enablers for that person to participate in the legal process”. She clarified that it is then up to the support person to insist that the pace of court is slowed sufficiently and adjourned as necessary to enable the person with the disability to “catch up” with their support person, and with their lawyers if necessary, on what is happening.

This resonated with Sage Advocacy as it has been our experience that access to justice for people with disabilities is much wider than access to lawyers willing to represent them or court premises that accommodates persons with physical disabilities.

It is necessary for the Irish Courts system to recognise the requirement for procedural accommodations such as a support person to ensure the rights of vulnerable adults to partake or participate in court proceedings are fully respected. Sage Advocacy has previously provided very necessary support for clients of the Legal Aid Board who are parties to family law proceedings where it has become clear during court proceedings that a party to the proceedings does require assistance. Access to justice is such a fundamental right for the people Sage Advocacy represent, that the role of advocates acting as a “support person” remains an ongoing key priority for us.

# Systemic Change

## **Submission to the Covid-19 Nursing Home Expert Panel**

In June 2020 Sage Advocacy made a submission to the Nursing Home Expert Panel, which had been established by the Minister for Health.

In its submission Sage Advocacy called for private nursing homes to be integrated into the wider framework of health and social care. We asked for clarity as to responsibilities for oversight over all congregated care facilities for older people at both regional and national level and arrangements for intervention and re-deployment of relevant staff across sectors in line with future pandemic planning.

Sage Advocacy outlined in the submission that it had made the recommendation because it was *"not at all clear to us who is ultimately responsible for clinical care in nursing homes and there are no HIQA standards with regard to the levels and skills of nursing care and with regard to clinical governance and the level of medical cover in many nursing homes."*

The submission specifically referenced the care of a resident in a nursing home which Sage Advocacy had highlighted to the Minister for Health and requested an investigation into in relation to both the circumstances surrounding this particular case and the adequacy of response by statutory agencies.

Sage Advocacy recommended "short to medium" term actions which should be implemented including:

- Clear responsibility for clinical care in all nursing homes (public, private and voluntary) in each region should rest with a community-based doctor specialising in medicine for older people.
- The regionally based doctor should be supported by a small team of Advanced Nurse Practitioners (ANPs) who are specialists in the care of older people and who should be linked into the public health nursing structures of the region.
- Each ANP should be responsible for a cluster of nursing homes based on an assessment of current spread and characteristics and emerging need.

[Read our submission to COVID-19 Nursing Home Expert Panel \(June 2020\)](#)

## **Delivering Quality Medical Care in Irish Nursing Homes: Current Practice, Issues & Challenges**

In February 2020 Sage Advocacy published the discussion document: *Delivering Quality Medical Care in Irish Nursing Homes: Current Practice, Issues and Challenges*.

The discussion document aimed to encourage debate about medical care in nursing homes in Ireland by identifying current practice and highlighting issues as identified by key stakeholders.

The discussion document described existing policy, legislative and regulatory provisions and current practice by GPs. The document also described blockages and challenges sets out possible options for addressing these.

Areas where further research and development would be helpful were also identified.



## **Best Practice in Supporting Adults Who May Be Vulnerable to Manage Their Own Finances.**

In May 2020 Sage Advocacy published this discussion document, compiled by Sage Advocacy in consultation with the National Federation of Voluntary Bodies (NFVB), the HSE Patient Private Property Accounts Section, HIQA, representatives of the private nursing home sector and the Department of Employment Affairs and Social Protection.

The purpose of the discussion document was to promote openness, accountability and consistency in working with adults who may be vulnerable and who may need support in the management of their personal finances.

It also sought to place the protection of the human and legal rights of such persons to the fore through ensuring the safe, open and accountable management of their money.

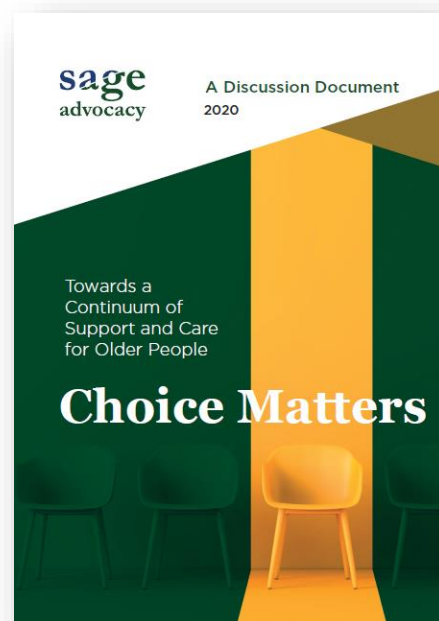
Sage Advocacy's position was that this was deemed necessary in order to reflect the basic principles of 'voice' and 'nothing about you/without you'.



## Choice matters

The discussion document “Choice Matters” which was published by Sage Advocacy in 2020, examined how the “dangerous architecture” on which the current system of care in congregated settings for older people is built, had presented major difficulties in responding to the challenges of Covid-19.

Choice Matters also highlighted key long-term care issues in Ireland and provided a policy action framework for an alternative model of long-term support and care which could be progressed through the Government’s proposed Commission on Care.



It specifically addressed the issue of continuing concerns in relation to inadequate clinical oversight in private nursing homes, a lack of any protocols between the HSE and the private nursing home sector and the continued use of multi-occupancy rooms and outmoded premises in some nursing homes.

Choice Matters also highlighted the feedback and reflections of Sage Advocacy’s frontline teams on their experience of Covid-19 during the first wave of the pandemic. Because of their involvement with vulnerable adults throughout the support and care process they were well placed to provide an eyewitness account of what happened and why – observing the response of public bodies, nursing homes/ other residential care facilities, community and home care and also acute hospital care to the public health emergency.

Members of the Sage Advocacy team through their work were aware early on during the first wave of Covid-19 of the tensions between private nursing homes and the HSE, the delay in testing for Covid-19 in nursing homes and the impact of visitor restrictions on nursing home residents and family members.

Members of Sage Advocacy also identified the difficulties the nursing homes and residential care sector initially had in obtaining PPE and examples of a lack of communication and sharing of information by the sector.

This feedback underlined the fact that Covid-19 placed significant additional pressures on a long-term care system that was already under stress: private nursing homes were under-staffed, lacking in clear clinical governance and without adequate oversight.

One of the key questions that Choice Matters posed in relation to residents in nursing homes and Covid-19 is whether they would have been there in the first place if there had been any alternatives to the nursing home model?

The Choice Matters discussion document also questioned whether, or not, nursing homes have a future in Ireland's long-term support and care infrastructure and outlines why it is now time for a shift in the balance of care away from nursing home models.

Sage Advocacy, launched the discussion document in December 2020 with presentations by the report author Michael Browne, Olivia O'Leary, broadcaster and Michael McNamara TD.

### **Key Campaigns**

Towards the end of 2020, the Board considered the development of a 'Key Campaigns' document for 2021, to establish the key areas of systemic change we want to effect and areas we want to communicate with our stakeholders.

### **Sage Advocacy Key Campaigns 2021**

1. Access to Justice
2. Adult Safeguarding
3. Advance Planning
4. Assisted Decision-Making
5. Choice Matters
6. Equality & Human Rights / Public Sector Duty
7. Financing Long-term Care
8. Independent Advocacy
9. Liberty Protection
10. Rights in congregated care
11. Social Protection

## Media

Sage Advocacy continued to promote the rights of older people, adults who are vulnerable and healthcare patients in 2020. Regular contact with both national and local news outlets across television, radio and print ensured that Sage Advocacy kept issues of concern in the public domain.

Unsurprisingly, Covid-19 was a dominant theme throughout the year, and Sage Advocacy provided commentary on stories throughout the year, such as [this story](#) in the Irish Independent, in March 2020 Which reported on dozens of older people in care homes who had tested positive. As the Pandemic continued, Sage Advocacy's



[appearance at the Special Oireachtas Committee on Covid-19 response](#) in May 2020 was covered by the Irish Times.

Sage Advocacy was a constant voice on nursing home visitor restrictions, ensuring that a light was shone on this issue and called at all times for safe but meaningful contact for families. This appearance on [RTE Drivetime](#) was just one example

Sage Advocacy was also able to engage the media in other important conversations such as [this report](#) in the Irish Times in May 2020 on ending the use of the term 'next of kin'. There was coverage of our work on [highlighting concerns on the Carer's Allowance](#) in the Irish Times in August 2020.

Sage Advocacy's calls [for a Commission on Care](#) was covered by the Irish Examiner in December 2020.

## Social Media 2020

Sage Advocacy currently operates a Facebook page, Twitter account and LinkedIn Page.

In 2020, all three channels were developed and our Metrics at the end of 2020 were

Facebook – 750 followers

Twitter – 1,727 followers

LinkedIn – 78 followers



## **Legal Aid Board - civil legal aid needed for people defending wardship or planning ahead**

Sage Advocacy is represented on the External Consultative Panel of the Legal Aid Board (LAB) which provides civil legal aid as well as Family Mediation services. However, the services provided, and the skill base of the lawyers employed by LAB, is limited to family law, such as separation and child custody issues. During 2020 we continued to engage with LAB to press for it to broaden its definition of "family law" and be available to provide legal assistance for vulnerable adults in matters such as the preparation of Enduring Powers of Attorney and Advance Healthcare Directives, the defence of wardship proceedings and advice regarding proceedings to allow a vulnerable adult to seek the return of their property wrongfully appropriated by their relatives or others, who have unduly influenced them. All of these are matters in regard to which we support our clients.

In September 2020 the Minister of Justice announced that Governmental approval had been obtained for a complete reform of the Family Justice System. We will be working towards ensuring that the definition of "family" is broadly defined and that the work of the LAB reflects this.

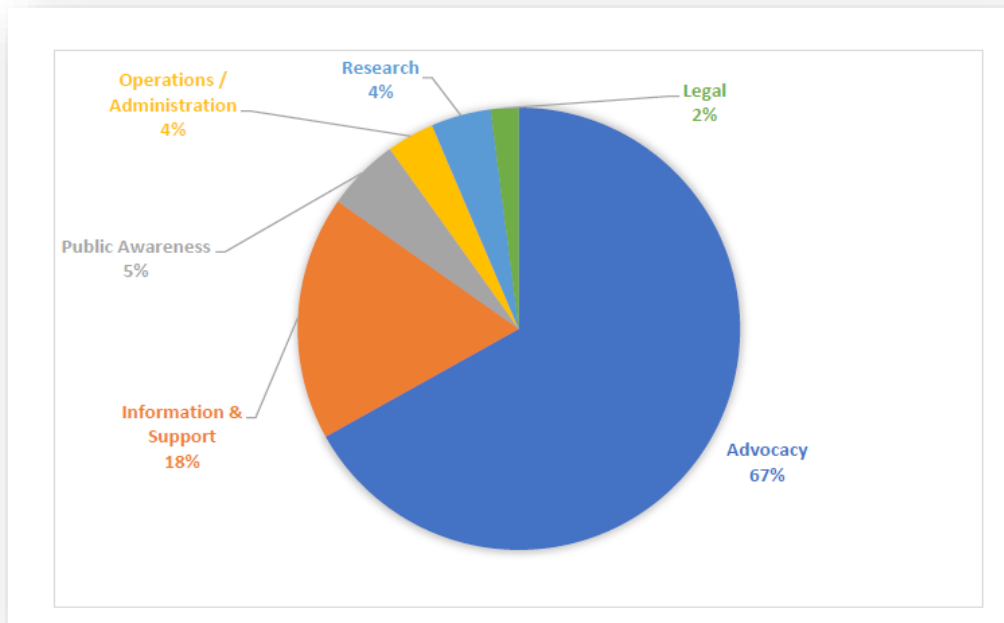
The only other organisations which provide civil legal aid are the Community Law Centres funded by a limited number of local authorities. During 2020 we provided, at their request, training to Coolock Community Law and Mediation Centre (CCLMC) on the functional approach to capacity and the Assisted Decision-Making Act. More training has been requested by them. Law Centres provide a free legal service in a wider scope of legal matters than LAB. CCLMC have indicated their willingness to work with us and our clients. It is intended to continue to develop this relationship and to foster others.



# Our Organisation

## Financial Statements

A breakdown of expenditure for 2020 is set out below based on the key activities of Sage Advocacy. This shows that Advocacy along with Information & Support are the two major areas of expenditure.



There has been a small but steady increase in income over the last three years, as illustrated in the chart, below. While Sage Advocacy is reliant on HSE funding we are looking towards other sources of income and the development of an income diversification strategy is an objective for the organisation.

	2018 €	2019 €	2020 €
<b>Total Funding</b>	1,502,953	1,663,465	1,708,828
<b>HSE</b>	1,368,000	1,651,771	1,693,278

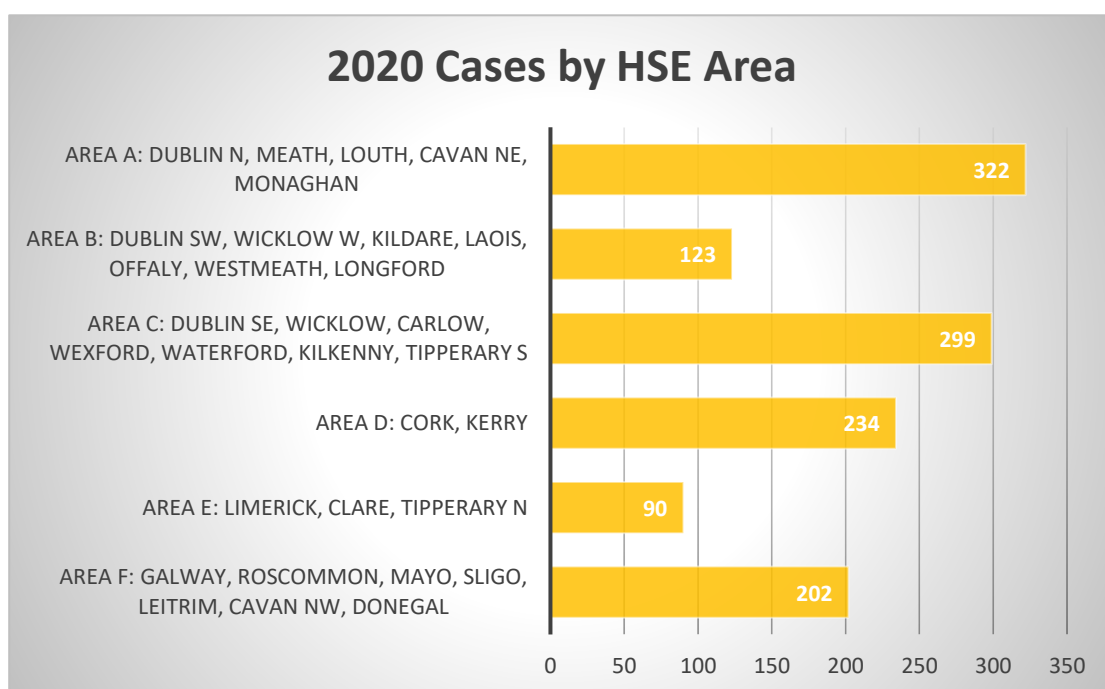
Full financial statements for Sage Advocacy for 2020 can be found on the Sage Advocacy Website or by clicking [on this link](#).

## Impact of Sage’s work

Sage Advocacy operates a Case Management System which records statistical information and demographics relating to our case work.

In December 2020, the Board of Sage Advocacy signed off on a revised strategic plan and a corresponding operational plan is to be developed by the executive and monitored by the Board.

Sage Advocacy works regionally and a strategic priority for us is to “develop a business plan for the development of independent advocacy in all 6 Sláintecare health regions”. A statistical analysis of Sage Advocacy’s work in 2020 by region, is provided below.



# Our People

2020 was a year of change for Sage Advocacy, with some of our valued colleagues departing for pastures new and the arrival of new faces to our team.

The challenges of Covid-19 meant that our staff had to respond quickly and with great flexibility to new ways of working. We are very grateful, as ever, to our dedicated and talented staff team.

Similarly, the Board of Sage Advocacy provided superb governance and oversight to the work of our organisation with many of the 7 Board meetings held virtually.

## **Staffing overview**

In 2020 we were delighted to expand our team and welcome new members. Lisa O'Connor joined our Information and Support Service, Frances McDonnell was recruited as our Communications and Research Officer and Sarah Lennon took up the role of Executive Director. Barbara McGeough also joined as a Regional Coordinator on a temporary basis.

While we could not mark the occasion as we would have liked, Sage Advocacy bid a fond farewell to Mervyn Taylor, who had been the Executive Director since 2014.

At the end of 2020 Sage Advocacy had 24 staff members, including full-time and part-time roles.

## **Challenges and opportunities with remote working**

Sage Advocacy adapted very well to working from home due to the secure systems and cloud-based structures the organisation had in place, and an established practice of remote working within the organisation. With significant coordination and support led by our staff responsible for our information systems structure and operations we worked through virtual meetings, phone and email to deliver the service and continue the operational aspects of the organisation.

The opportunities to virtually connect allowed the team to come together more regularly than we would have in person. No doubt in person interaction cannot be replaced but the frequency of regional and national team meetings, and one-to-one staff support was increased, and staff have valued the increased connections. The opportunity to meet colleagues instantly through virtual platforms has benefitted us in minimising time that would have been spent on the logistics of arranging meetings and has allowed the organisation to become efficient at consulting, planning and progressing actions with colleagues.

## The Sage Advocacy Board of Trustees 2020

<b>Board Member Name</b>	<b>Attendance 2020</b>	<b>Notes</b>
Ms. Patricia Rickard-Clarke	7 of 7	<i>Resigned as Chair of the Board 24th September 2020, appointed to Deputy-Chair of the Board 24th September 2020</i>
The Hon. Mary Laffoy	7 of 7	<i>Resigned as Deputy-Chair of the Board, appointed to Chair of the Board 24th September 2020</i>
Mr. Brian Ward	4 of 7	
Ms. Catherine Dunleavy	5 of 7	
Prof. Cillian Twomey	6 of 7	<i>Retired from the Board 24th September 2020</i>
Mr. James Milton	6 of 7	
Mr. Eoin Kennelly	2 of 7	<i>Resigned as Company Secretary 24th September 2020</i>
Ms. Claire Kelly	7 of 7	
Ms. Angela Mezzetti	0 of 7	<i>Retired from the Board 6th February 2020</i>
Ms. Bríd De Buitléar	7 of 7	<i>Appointed to the Board 6<sup>th</sup> February 2020, appointed as Company Secretary 24th September 2020</i>
Dr. Helen Burke	7 of 7	<i>Appointed to the Board 6th February 2020</i>
Mr. Timothy Dalton	6 of 7	<i>Appointed to the Board 6th February 2020</i>
Prof. Rónán Collins	2 of 7	<i>Appointed to the Board 6th February 2020</i>

## Volunteers

Sage Advocacy works with volunteers across Ireland to protect the rights, freedom and dignity of vulnerable adults and older people in local communities. Our volunteers support us to carry out our work in many ways. During 2020, the Covid-19 crisis had a big impact on our work and two of our volunteers tell us their story of volunteering during Covid-19.

**If you are interested in finding out more about volunteering with Sage Advocacy visit <https://www.sageadvocacy.ie/join-us/volunteering>**

### **Volunteer 1: Eileen Beechinor**

*"You can't understand someone until you've walked a mile in their shoes."*

As my parents aged and I assisted them at appointments, house issues, etc..... (the time for 'pay back' for what they did for me), I noticed how many elderly and vulnerable people had no one to support them.

I met a friend who talked about her Sage advocacy work and I felt that this sounded hugely beneficial. This was just what was needed by some of the elderly I had met when with my parents, so I volunteered to become a Sage Advocate. For the clients of Sage, in many cases having no family for support, it is great to know that there is someone who can be called upon to give all kinds of assistance e.g. form filling, banking, application for grants, advice on how to get house adaptations, linking with befrienders, and so, so many more issues.

Sage gives tremendous support to the elderly and vulnerable and the staff I meet are extremely warm, caring and dedicated in what they do. Volunteers are given great support and there is total respect and understanding to their availability. There is such satisfaction when an issue has been addressed, knowing that the older person has benefited from the Sage advocate's input.

One has to wonder who gains most from volunteering, the client or the volunteer?

## **Volunteer 2 – Bernie Dowling**

“There has certainly been an impact on advocacy and how Sage Representatives can support clients who are referred to Sage Advocacy. We had to find different ways of adapting, such as video calls and phone calls, which lacked that human connection and may have impacted on a person’s willingness to share what they are worried about as the communication methods seemed more formal.

There was also the added issue of technological issues (e.g. internet connections) which further impacted on the client’s ability to communicate well to us, and a lack of privacy as many clients needed to be supported with the use of technology.

We had to become reliant on the support of other services to help us with forms and arranging calls etc., and it felt as though the natural progression of advocacy had taken a step back. Other services too felt the impact of Covid, which further impacted on our clients, such as relevant professionals being redeployed, and others working from home. Services became very health focussed and at times it felt as though the wellbeing of the person was placed on hold.

We could no longer visit our client with an update, or to talk through what was happening face to face. Although we could call our clients (many times through the support of other services), each process took significantly longer to complete (for example, liaising with external services, signing forms, and arranging calls).”

# Partnerships

Sage Advocacy's strategic objective in relation to partnerships is to forge strong and meaningful partnerships with organisations with complementary visions and similar values.

Sage Advocacy continues to work alongside partners through our membership of Safeguarding Ireland and the Home Care Coalition and we have collaborated with European partners in 2020 to develop an Erasmus + project.

## **Erasmus project**

Sage Advocacy (Ireland) were awarded funding in 2020 until 2022 for a project with partners BAGSO (Germany), Tulip Foundation (Bulgaria) and Pro Senectute (Austria) for a project called "safeguarding older persons' legal and human rights through an active citizenship inter-generational approach". The project will seek to develop through learning and exchange of practice how an active citizenship and inter-generational response to protecting the human and legal rights of older persons in the participating countries can be advanced.

The project will have two horizontal priorities: social inclusion and common values; civic engagement and participation.

## **Sage Advocacy engagement with external committees**

Sage Advocacy engages with external committees and organisations in a variety of structures on a regional and national basis. We value the opportunities these engagements give for Sage Advocacy to progress issues of importance for our client groups on a systemic basis, and we aim to contribute our knowledge, expertise and experience of our client groups to advance the objectives of the committees.

## **The Health Service Executive**

We would like to express our gratitude to our primary funders the Health Service Executive (HSE) for their support in 2020 and their continued future support.





#### SAGE ADVOCACY CLG

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