

Making choices, taking control

**Direct Payments and mental health
service users/survivors**

**Edited by
Deborah Davidson and Laura Luckhurst**

The **Joseph Rowntree Foundation** has supported this project as part of its programme of research and innovative development projects, which it hopes will be of value to policy makers, practitioners and service users. The facts presented and views expressed in this report are, however, those of the authors and not necessarily those of the Foundation.

Joseph Rowntree Foundation
The Homestead
40 Water End
York YO30 6WP
Website: www.jrf.org.uk

© National Centre for Independent Living 2002

First published 2002 by the Joseph Rowntree Foundation/YPS

All rights reserved. Reproduction of this report by photocopying or electronic means for non-commercial purposes is permitted. Otherwise, no part of this report may be reproduced, adapted, stored in a retrieval system or transmitted by any means, electronic, mechanical, photocopying, or otherwise without the prior written permission of the Joseph Rowntree Foundation.

ISBN 1 84263 098 9 (paperback)
ISBN 1 84263 099 7 (pdf: available at www.jrf.org.uk)

Prepared and printed by:
York Publishing Services Ltd
64 Hallfield Road
Layerthorpe
York YO31 7ZQ
Tel: 01904 430033; Fax: 01904 430868; E-mail: orders@yps-publishing.co.uk

Contents

Acknowledgements	iv
Introduction	v
Aims	1
Presentations	3
What are Direct Payments?	3
Direct Payments in mental health	6
A personal experience of using Direct Payments	8
Discussion	12
Conclusions and recommendations	17
Additional resources	20
List of participants	23
Contacts	25

Acknowledgements

This is a report of a conference held in February 2002. We would like to thank the participants, presenters and conference facilitators for their combined contributions that have enabled us to produce this report. We would also like to thank the Joseph Rowntree Foundation for their support in funding the project and conference.

Report compiled by:

Deborah Davidson
Institute for Applied Health and Social Policy (IAHSP)
King's College London

Laura Luckhurst
National Centre for Independent Living (NCIL)

Introduction

On 7 February 2002, over 50 survivors and users of the mental health system came together in London to hear about Direct Payments and how some mental health service users are using them to bring more choice, control and independence into their lives.

Participants in the conference first heard John Evans (Chair, European Network on Independent Living) describe how disabled people developed schemes for managing their own 'care' budgets, so that they could leave the residential care homes they had been placed in during the late 1970s. Next, Tina Coldham (Project Co-ordinator, Hants and Surrey) talked about the development of the National Pilot Scheme, which focuses on five pilot sites in England where Direct Payments are being actively promoted with mental health service users.

Pauline Heslop from Bristol and Val Yellow from West of England Centre for Independent Living (WECIL) followed with an excellent presentation on the reality of getting and using Direct Payments. Pauline explained how she had used Direct Payments to help her move on from life as an in-patient, to living again in her own home, choosing her own activities and social life, and eventually managing a successful return to work. Val contributed helpful insights into the practical support that was available from WECIL, to enable people to plan for, gain access to and use Direct Payments.

One participant commented:

I was really inspired by [Pauline's] talk to go for it myself! I'd much rather stay out of hospital with help than struggle on my own every day barely ticking over!

What people really valued about Direct Payments was the possibility of having support which can be 'liberating' and which offers 'choice', 'dignity' and 'personal development'.

Participants wanted to know more about a support option they saw as potentially:

- allowing them to live a life independent of the mental health system
- providing a viable and sustained alternative to hospital
- challenging their perception as users that support is only available in a crisis.

The workshops were an opportunity for people to think about how Direct Payments might work for them in practice, and about some of the difficulties which might have deterred people from taking them up earlier.

On the 'downside' this brought up a number of concerns which might require local or national government action to address them, such as:

- the extreme difficulty, for many mental health service users, of actually getting the assessment of needs to which they have a right under Community Care legislation
- the fear that being assessed as 'mentally able to manage a Direct Payment' may then be seen as in conflict with 'needing services or support'
- fears that receiving Direct Payments could have an impact on people's entitlement to social security benefits such as Disability Living Allowance (DLA) or Income Support
- users' appreciation of their need for advice and support with obtaining and using Direct Payments, and questions over whether the support available locally would be in place, or adequate.

At the end of the day there were many calls for follow-up events, especially in the regions. There is clearly an urgent need for more work in this area, indicated not least by the 70 additional people who requested a place at the conference but could not be accommodated. The National Centre for Independent Living (NCIL) and the King's College National Pilot Scheme will be seeking to respond to this demand, and will be keeping in touch with all participants of the first conference.

Aims

The conference was planned as the first stage of a Partnership Programme between the Institute for Applied Health and Social Policy National Pilot to Promote Independent Living with mental health service users (IAHSP National Pilot), the National Centre for Independent Living (NCIL) and mental health service users/survivors.

The Partnership Programme aims to promote the social inclusion of mental health users/survivors by enabling their access to Direct Payments for Independent Living. Whilst the extension of Direct Payments to all eligible groups including users/survivors is warmly supported by government, take-up remains disappointingly low with fewer than 70 individuals nationally receiving them out of a total of over 5,000 Direct Payments users.

The primary aims of the conference were:

- to stimulate dialogue and debate on how to raise awareness and promote Direct Payments for mental health service users including those from black and ethnic minority communities
- to initiate the process of developing a survivor/user-led agenda on use of Direct Payments as an alternative option or an addition to existing services
- to provide a platform for engaging the mainstream disability and mental health service user movements in partnership working.

Method

A small group of individual users/survivors with knowledge or expertise in the arena of Direct Payments, and representatives of user-led organisations, were invited to a planning meeting which laid down the framework for the event. Representatives from ethnic minority mental health groups were invited at this stage but none was able to attend.

Following the advice of the planning meeting, the event was organised to be as accessible as possible, including, for example, a later start time, providing support with both transport and overnight stays to those who

needed them, and offering to pay expenses for personal assistants, personal support workers, etc., required to enable people to participate.

An information pack was produced that draws on the experience of mental health service survivors/users who use Direct Payments, and this was made available free of charge to all participants at the conference.

The conference publicity focused particularly on user/survivor-led groups, and was so successful that the conference was extremely oversubscribed. Due presumably to the widespread publicity, we were successful in attracting a small number of ethnic minority participants. However, we are aware that the specific issues which are likely to affect ethnic minority survivors/users in relation to access to Direct Payments were not able to be given sufficient space at this first event, and this is something we hope to be able to give further attention to in the next stage of the Partnership Programme.

The following report is a narrative constructed from the contributions and recommendations of speakers, participants and conference organisers.

What do we know about Direct Payments?

Many people had not heard of Direct Payments prior to the publicity for the conference. Some had previously heard of Direct Payments but did not understand what they were and what they could use a Direct Payment for. Only one or two participants were already using a Direct Payment or fully knew about it. Most mental health service users also were not aware of local Independent Living Centres or Direct Payment Support Schemes.

Most people said that local professionals in both health and social care were also not aware of Direct Payments and there was little to no awareness and information about Direct Payments in voluntary organisations, advocacy groups or user/survivor groups.

Presentations

What are Direct Payments?

John Evans OBE

Disability Consultant and Trainer

Direct Payments allow disabled people to have more control and choice in their lives.

Direct Payments are a means where disabled people can buy in the help and assistance they require for their everyday needs and support.

Direct Payments help disabled people do things for themselves instead of relying on services directly from the local authority social services in their area.

They help to empower disabled people and give them more independence, flexibility and better quality of life.

Where did Direct Payments come from?

Disabled people thought up Direct Payments first. It was because a group of disabled people living in a residential home did not want to live there for the rest of their lives, and wanted to live independently in the community. This is how it started.

In those early days, because they were so new, Direct Payments were known as Independent Living Schemes.

Disabled people wanted to have more control and choice and independence in their lives.

Disabled people designed, developed and pioneered Direct Payments. This was done in partnership with social services departments.

Direct Payments Act 1996

Direct Payments became law with the introduction of the Community Care (Direct Payments) Act 1996.

This Act now provides a duty for local authorities to implement Direct Payments.

The Direct Payments Act came about after many years of lobbying by disabled people's organisations and their supporters.

It was officially implemented in April 1997. However, since the early 1980s, a growing number of disabled people have operated their own Direct Payments schemes in the UK. These were called Independent Living Schemes or Self Operated Care Schemes.

Who can receive Direct Payments?

Direct Payments are available for any disabled person who is considered to be 'able and willing' to run his or her own scheme. This includes physically disabled people, people with learning difficulties, people with HIV and Aids, people with mental health backgrounds, people with sensory impairments, older people, 16–18 year olds, carers and parents of disabled children.

What are the advantages?

Direct Payments provide more control and choice in the lives of disabled people. They are more flexible, and provide more freedom and less restriction in their lives.

The disabled person is the employer, and therefore is not dependent on social services or other providers.

Most people who use Direct Payments find much more user satisfaction and an improvement in the quality of their lives.

Direct Payments and support

If you do receive Direct Payments, you do not have to do everything by yourself, and can get support.

Support can come from Direct Payments support workers in your area, disabled people's organisations and other voluntary organisations, and special Direct Payments Support Schemes.

This support can provide help with advice and information. It can help you do your wages and accounts by providing a payroll system and can also cover advocacy or other people supporting you with your scheme. Other disabled people who have run their own schemes can also help you (sometimes called peer support).

How do you get Direct Payments?

Contact your local Direct Payments scheme or disabled people's organisation to help prepare you.

Contact your local social services department, and they will arrange for someone to visit you to make an assessment.

Your Care Manager will then assess you and calculate how much money you will need for your Direct Payments scheme. If this goes beyond £200 per week, he or she will then contact the Independent Living Fund to help provide the rest.

There are now many publications and resources available that provide good information and guidance to help you set up your scheme. There is also much information on Direct Payments on the Internet.

The National Centre for Independent Living (NCIL) can help provide this information for you, or direct you to other organisations who are experts in the Direct Payments field.

Direct Payments in mental health

*Tina Coldham, Project Co-ordinator
Hants and Surrey Pilot Site*

Why a pilot?

Mental health service users are not getting Direct Payments.

- At the start of the pilot there were only 12–20 nationwide.
- The pilot aims to help us discover why this is.

We need to push this as a way ahead:

- a liberating scheme
- a wider disability movement.

The National Pilot

Local authorities involved were:

- Hampshire
- Surrey
- Leicester
- Tameside (Manchester)
- Barnet

What we want to happen

- Users meeting own needs by purchasing own care packages.
- Users enabled to influence service development.
- Learn more about what services ethnic minorities want.

The co-ordinator role

- Gather Direct Payment information.
- Work well with local authorities and Independent Living Centres.
- Establish a multi-agency steering group.
- Provide leadership, direction and support to sites.
- Help develop, inform and guide local authorities.

Project process

- Quarterly meetings for local authorities and Independent Living Centres.
- Half-yearly users' meetings.
- Six-monthly newsletter.
- Study findings – networks, publications, websites, etc.
- Evaluation and report.

A presentation about Direct Payments and some of the ways in which they can be used was then given to illustrate their potential.

A personal experience of using Direct Payments

Pauline Heslop, Mental Health Service User, Researcher and Freelance Trainer

Val Yellow, West of England Centre for Independent Living

Getting to know about Direct Payments

- Finding out about Direct Payments.
- Finding out about WECIL and ILSA.

WECIL (West of England Centre for Inclusive Living)

- WECIL is an organisation of disabled people.
- WECIL runs a number of projects, one of which is ILSA.

ILSA (Integrated Living Scheme [Advice and Support] Service)

- ILSA gives advice, information and support to disabled people, to enable them to use Direct Payments to live independently.
- ILSA is funded by social services.

What does 'living independently' mean?

- Having choice over: where to live, how to live and who provides support.
- Having control over: who supports you, how and when they support you, and what they do.
- Independent Living is *not* about living on your own and doing everything for yourself.

Who can receive Direct Payments?

- Disabled people (includes people disabled by mental illness or 'mental disorder').
- People who use, or could use, social services support.
- People who are not restricted by mental health legislation.
- People who are 'willing and able' to manage Direct Payments (with support if necessary).

The needs assessment

You will need to have a meeting with a social worker to discuss what your needs are.

Before the meeting:

- think about what your needs are and how you would like them to be met
- keep a diary.

How much money do you get?

- It depends on the amount and type of support that you are assessed as needing.
- It is based on how much it would cost to employ someone to do the work on an hourly rate, plus a percentage for 'overheads'.
- Funding comes from social services and possibly the Department of Health.

Where do you start?

- Needs assessment.
- Agreement for funding.
- Open separate bank account.
- Prepare for support worker:
 - set up payroll arrangements
 - arrange back-up support
 - take out insurance
 - think carefully about what you want the support worker to do
 - write clear guidelines/advance directives
 - write clear house-rules.
- Draw up job description(s) and contracts of employment.
- Design and distribute advertisements.
- Shortlist applicants and interview.
- Follow up references.
- Employ support worker for initial 'probationary period'.
- Offer necessary training as part of induction.

What particular issues should I think about?

- How to deal with emergencies.
- Keeping boundaries.
- Maintaining confidentiality.
- Keeping yourself, and your support workers, safe.
- Staying in control.

- Being a good employer.
- Ongoing monitoring and support.

What difference has receiving Direct Payments made?

- Flexible support when I need it.
- Supported by people I like.
- Support to live my life as I wish to live it.
- Friends are not also my 'carers'.
- Ongoing support – I don't have to be 'in crisis' to receive it; support acts as mental health maintenance and promotion.

Discussion

What ‘grabs’ us about Direct Payments

The presentation excited conference participants.

Both the discussions that took place following the presentation and the completed evaluation forms showed that conference participants were positive and inspired and began having creative thoughts about how Direct Payments might work for them, or how they needed to go back and stimulate local interest among users/survivors. The key themes were about looking at the *person* rather than the illness and having greater freedom and the opportunity to do things they *want* to do, as opposed to fitting into services’ activities and routines. They saw it as ‘new and exciting and ... gave me confidence’.

They also saw Direct Payments offering them greater control over their lives, for example, stopping their isolation through befriending support, going out to work, using psychotherapy, having an assessment which could include needs for support with child care, having support that was culturally aware and appropriate and having reliable and regular support at home with the everyday things that could be too difficult to manage on their own.

Other examples included having preventative support to enable them to manage crises and having an alternative to hospital. They felt that it positively challenged their perception as users that support is only available in a crisis.

The presentation also enabled conference participants to understand the potential for making choices and taking control that Direct Payments can provide.

How Direct Payments can help me to make choices and take control

One service user’s statement that Direct Payments had the potential for ‘giving me back my life’ illustrates many other responses to finding out about Direct Payments. The notion of being able to return to living an ‘ordinary’ life, having fewer people involved (often there are numerous professionals) and the potential for living a life independent of the mental

health system and the stigma and discrimination involved ran central to the notions of choice and control that services users expressed.

Direct Payments were seen to provide dignity and confidence. People felt that perhaps they would no longer need to 'prove yourself'. It was seen as an opportunity for personal development and for developing social and vocational opportunities by employing service users who are 'more able' to help others who are 'less able'.

Despite people's excitement and enthusiasm, there were many concerns about whether Direct Payments could be a reality for most people.

What obstacles do we need to overcome in order to access and/or use Direct Payments?

The main obstacles participants identified related to their own confidence and their experience of, and lack of confidence in, the mental health system. There was worry about whether they would be 'able' to understand and use Direct Payments.

Finding out about Direct Payments for the first time can be overwhelming and anxious-making until you understand how to go about getting a Direct Payment and what support you will get. There seems to be a lot of organisation, paperwork and responsibility involved in setting up and using Direct Payments. Some people might be turned off by this.

Many people thought that Direct Payments were only possible for those who were more 'academically minded' and that they were unlikely to be accessible for people who had less education or who were not able to express themselves clearly or be articulate. There was concern that people would need to have good organisational skills, be assertive and have the ability to articulate their needs before they could gain access to Direct Payments.

There was no confidence in the system to promote and support mental health service users to use Direct Payments.

Professionals' negative attitudes to mental health service users were cited as the main barrier to gaining and using Direct Payments.

For many people, the main issue was rejection. They felt that they would not be seen as 'able'. Professionals would not think that they could manage and as there is no independent advocacy or assessment available, it was unlikely that people would be able to assert their needs. For others, they were concerned that if they did not have a care plan or were not on the Care Programme Approach care plan, they would never get access as the eligibility criteria for a community care assessment were high.

Some people were fearful of bringing themselves to the attention of social services and having to be assessed by a social worker (as opposed to a health care worker). The fear about social services having knowledge of their situation and being involved in their lives, especially where they are parents, seemed to be expressed more strongly in some areas than others. For some this was due to their past experiences and the fact that they had been labelled as difficult, aggressive and a troublemaker when they had asserted their rights. They were concerned that if Direct Payments required them to assert their needs, this could happen again.

There were also fears that once using Direct Payments, if they were seen to be 'getting better' at reviews, Direct Payments might be withdrawn. It was not clear to participants that Direct Payments is about meeting their needs and not about treatment and whether their mental health should improve or not.

There were also some very practical concerns: a major concern for participants was whether receiving a Direct Payment would impact on their benefits. These ranged from concerns about it being means tested, an age limit, a financial limit, a time limit, reducing other benefits such as Income Support, Disability Living Allowance or Invalid Care Allowance, or whether having some capital in the bank reduces the amount of Direct Payment paid. Despite reassurances that Direct Payments were not linked to the benefits system, people mostly remained unconvinced. Participants were also concerned about the impact of charging policies (which vary across the country).

There were a number of specific themes/questions that were repeatedly raised during the conference. It is important to record them here.

Common questions raised by conference participants

‘How will we be able to access and use Direct Payments, especially if we find it hard to understand things, have not had an education or are less assertive?’

We can answer this in several ways:

- information about what’s available, including an Easy Guide, videos, local support services
- information on government policy and guidelines (what people should have access to)
- examples of good practice happening now
- you don’t have to do it all on your own
- use peer support from other current Direct Payments users (from across the disability communities).

In this context please see lists of additional resources on pp. 20–22.

‘How can we get a needs assessment which shows both that we need a significant amount of support, *and* that we are ‘able to manage’ a Direct Payment (the ‘able’ versus ‘unwell’ dilemma)?’

Part of the answer to this is that the guidance says you have to be ‘able to manage, with assistance if necessary’, so you do not have to be able to manage unassisted. Taking time to understand what Direct Payments is all about and using the support available to keep a diary and prepare for the assessment will help.

We also need to challenge the medical model of mental health which says you are either 'ill' or 'well' and look at other models, for example recovery models and the Social Model of Disability, which look at what support you need in order to live your life as you wish to.

'Is there a consistency of support in Scotland, Wales and other parts of the UK? Will we get full support with the range of needs to set up and use Direct Payments?'

The law on Direct Payments is the same for England, Scotland, Northern Ireland and Wales, but the promotion and development of Direct Payments differ.

Support from social services departments or through Independent Living Centres varies across the country. Some provide a comprehensive service including employer advice, accounting and wage payment support, while others just provide advice and information.

These are matters of fact that NCIL can provide some information on. People can also contact NCIL or use their website to find details of a local support service. Please see contacts list on page 25.

Conclusions and recommendations

The conference organisers have pulled together much of the information from the flipcharts produced on the day to compile this report. In doing so, they have also extrapolated key messages from mental health service users to local authorities (round bullets). These are supplemented by recommendations from the conference organisers to local and central government (square bullets).

Information

What users/survivors need

- User-friendly information about Direct Payments and how to access it, to be developed and widely distributed in local areas.
- Promotion of awareness by targeting information at the statutory, voluntary and community sectors.
- Local targeting of clinics, community centres, community psychiatric nurses (CPNs), general practitioners (GPs), libraries, post offices, patients' councils and patient advice and liaison services (PALS), wards.
- National targeting of organisations such as United Kingdom Advocacy Network (UKAN), Regional User Forums, Mind Link and the Mental Health Foundation.
- Use of existing information networks, for example websites, to spread information.

What national and local government needs to do

- Provide clear guidance and promotion about Direct Payments as part of the National Service Framework for Mental Health (NSFMH).

- Make it a requirement for Local Implementation Teams (LITs) to:
 - promote the development of Direct Payments for mental health service users/survivors
 - be responsible for the education and training of professionals
 - establish local targets for take-up.

- Include targeted questions about Direct Payments promotion and information, training and take-up in the annual Local Implementation Plan (LIP) returns

- Follow up the *Fair Access to Care* guidance and the Health and Social Care Act 2001 with circulars targeted at mental health services.

Overcoming obstacles

What users/survivors need

- Local opportunities to understand and see Direct Payments in action.

- Support to build up their confidence in order to even consider Direct Payments as something they are *able* to undertake.

- Local departments and Centres for Independent Living that provide a comprehensive support service including employment and accounting support.

- Care plans to look at the whole person.

- Specific information on whether Direct Payments are affected by benefits.

- A withdrawal of the charging policy for Direct Payments users.

What national and local government needs to do

- Adopt the Review of the Mental Health Act 1983 Expert Committee's recommendation that 'capacity' is the basis from which all care commences and treatment starts.
- Develop a comprehensive programme to educate and train mental health professionals (including clinicians) in the social model of disability and the recovery model.
- Promote the 'capacity and potential' mental health service users have at a senior level in local authorities and drive the implementation of new ways of working in social work.
- Change the Care Programme Approach (CPA) care plan to use a Direct Payments approach to meeting care needs and consider it as a starting point, not as an afterthought.
- Withdraw the charging policy for Direct Payments users.

Additional resources

An Easy Guide to Direct Payments

Department of Health Pack including booklet, audio tape and CD-ROM.
Available FREE from:
Department of Health Publications, PO Box 777, London SE1 6XH
Fax: 01623 724524, e-mail: doh@prologistics.co.uk

Community Care (Direct Payments) Act 1996

Policy and Practice Guidance 2000
Available from Department of Health Publications, as above
Note: updated guidance is expected later in 2002

Everything You Need to Know about Getting and Using Direct Payments

NCIL/BCODP publication
Price £2.50 + £1.00 p+p per copy
Bulk orders (over 10 copies) £1.00 plus postage
FREE to disabled individuals on receipt of an A4 envelope stamped with 72p (first class) or 54p (second class)
Also available in Braille and on audio tape

Direct Payments for Mental Health Users/Survivors – A Guide to Some Key Issues

NCIL publication
Price £2.50 + £1.00 p+p per copy.
Bulk orders (over 10 copies) £1.00 plus postage
FREE to disabled individuals on receipt of an A4 envelope stamped with 72p (first class) or 54p (second class)
Also available in Braille and on audio tape

Personal Assistance Support Schemes Directory

NCIL publication
This directory includes all the PA Support Schemes currently known to NCIL. Please send a 54p/72p stamped addressed envelope for this (For those with no access to the Internet)

The Rough Guide to Managing Personal Assistants

NCIL publication

'Having PAs enabled me to find out who I am and now enables me to be who I am.'

If you are a disabled person and about to start receiving a Direct Payment to employ your own personal assistants (PAs), this book aims to give you a flavour of what it is like: the joys and the challenges. The book covers recruitment, managing, using PAs in social situations and at work, and dealing with problems.

Put together by Sian Vasey with cartoons by David Shenton

Also available on floppy disc, on audio tape and in Braille

Price £7.00 + £1.50 p+p per copy

Video: Direct Payments: A Beginner's Guide

NCIL production

A 30-minute video, which covers the essential aspects of managing a personal assistant, including starting up, recruitment, supervision and contracts. A useful training tool.

Produced and directed by Sian Vasey

Price £8.00 + £1.00 p+p per copy

All NCIL publications above available from:

NCIL, 250 Kennington Lane, London SE11 5RD

Tel: 020 7587 1663, Fax: 020 7582 2469, e-mail: ncil@ncil.org.uk

Direct Routes to Independence: A Guide to Local Authority Implementation and Management of Direct Payments

By Frances Hasler, Jane Campbell and Gerry Zarb, 1999

Published by the Policy Studies Institute (PSI)

Offers detailed practical information covering all aspects of running a Direct Payments scheme

Price £10.00 plus £1.50 p+p

Please direct all orders and enquiries to:

Central Books, 99 Wallis Road, London E9 5LN

Tel: 020 8986 4854

Fair Access to Care Services – Guidance on Eligibility Criteria for Adult Social Care

Local authority circular LAC (2002) 13
Issued by the Department of Health on 28 May 2002
Tel: 08701 555455, Fax: 01623 724524
Available on-line at www.doh.gov.uk

Hardcopy also available from Department of Health Bookstore,
PO Box 777, London SE1 6XH

On-line the actual policy guidance is accessed through a link embedded in the circular. In the hardcopy they are bound together.
The practice guidance will be issued by 31 July 2002, available as above.

Websites

National Pilot Scheme
www.kcl.ac.uk/iahsp

National Centre for Independent Living
www.ncil.org.uk

'It's Your Voice' newsletter

This newsletter is available to download at www.nwmhdc.co.uk. There is an e-group directpaymentsmh@yahoo.com for all of you who are interested and determined to promote independence for people experiencing mental distress. To join, visit:
<http://uk.groups.yahoo.com/group/directpaymentsmh/>

For more information on The National Direct Payments Project contact Deborah Davidson, see contacts list on page 25.

List of participants

Name	Organisation (if any)
Ms Sheila Ames	Surrey IL Council
Ms Carey Bamber	NW Mental Health Development Centre
Mr Raymond Baron	East Lancashire Service User Panel
Ms S.E. Baxter	Midlands Gold Network
Mr Derek Beer	
Mr Peter Beresford	
Mrs Lily Bidmead	Swansea Patients' Council
Mr Hugo Butts	
Mrs J. Byron	MH Direct Payments
Mr Peter Clayton	Mindlink
Ms Amanda Dale	
Mr Nick Danagher	Surrey IL Council
Ms Deborah Davidson	IAHSP
Mr Desmond Dawes	Age Concern Walsall
Ms Caroline Denley	Surrey IL Council
Mr Colin Gell	Nottingham Advocacy Group
Ms Janet Gibson	WECIL
Ms Gloria Gifford	GLAD
Mr Patrick Gladdon	REMHUG
Mrs Edith Green	Walsall
Mr Mark Greveson	Walsall Money Advice Project
Ms G. Hampton	Mind Link
Mr Robin Hanau	Harrow Mind
Mr Dave Harris	US Network
Ms Irene Harris	WATCH
Ms Yvonne Harrison	
Mr Mike Hay	Independent Living Team
Mr Clifford Hayes	Advocacy Network
Mr John Healy	Brent MH User Group
Mr Christopher Hodson	Gofal Housing Trust
Ms Gay Hughes	User Forum
Mrs Lillian Hughes	North Denbighshire Survivors' Network
Mr John Husband	Mindlink
Ms Angela King	North Denbighshire Survivors' Network
Mr Matthew Knight	Cos East
Mr Robert Lewis	Mind Link
Ms Laura Luckhurst	NCIL

Name	Organisation (if any)
Mr Brian McDonald	Mind Link
Mr Mario Marichi	Mind Link
Ms Jackie Mattingley	Volunteer Therapist
Ms Miriam Mica	IAHSP
Ms Carol Nordstrom	Patients' Council
Mr Jason Nordstrom	Patients' Council
Ms Patricia Nye	Walsall Service User Council
Ms Ann Owen	Umbrella
Ms Christine Poole	Sure Start
Ms Fibi Prideaux	Somerset Partnership NHS and Social Care Trust
Mr Steve Roberts	WECIL
Ms Anita Sebastian	
Mr John Sirotkin	Mind Link
Ms Jean Smyth	US Network
Dr Emma Stone	Joseph Rowntree Foundation
Mr N. Stones	Winford Manor Retreat
Mr Glenn Townsend	Patients' Council
Ms Maria Trainer	Leeds Mental Health Advocacy Group
Ms Heather Trenchard	National Mindlink Advisory Panel
Ms Helen Trenor	
Mrs C. Vaughan	
Mr Peter Warburton	Self Help Services
Ms Rosemary Wickett	North Cornwall Forum
Mr Jeff Williams	US Network
Mr Phil Yarwood	WATCH

Contacts

Deborah Davidson

Pilot Project Manager

IAHSP

5th Floor, Waterloo Bridge Wing

Franklin-Wilkins Building

150 Stamford Street

London SE1 9NN

Tel: 020 7848 3770/07767 253 540, Fax: 020 7838 3771,

e-mail: deborah.davidson@iahsp.kcl.ac.uk

Website: www.kcl.ac.uk/iahsp

Laura Luckhurst

Development Worker

NCIL

250 Kennington Lane

London SE11 5RD

Tel: 020 7587 1663, Fax: 020 7582 2469, e-mail: ncil@ncil.org.uk

Website: www.ncil.org.uk

More information on the National Pilot Scheme can be obtained from project co-ordinators

Barnet:

Miriam Mica

Tel: 07885 626 006, e-mail: miriam_mica@hotmail.com

Leicester:

Colin Gell

Tel: 07980 528 947, e-mail: ColGI@aol.com

Hampshire and Surrey:

Tina Coldham

Tel: 07710 714 748, e-mail: TRColdham@aol.com

Tameside:

Carey Bamber

Tel: 0161 873 7444, e-mail: carey.bamber@nwmhdc.co.uk

