The Mind guide to community-based mental health and social care in England
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This online booklet is about community-based mental health and social care in England. It describes what it is and how to access it.
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What is community-based mental health and social care?

Community-based mental health and social care means any care or support you receive to help you manage a mental health problem while you are living in the community (i.e. not in hospital).

Community-based services for people with mental health problems are divided into health care and social care.

Health care generally means any care you need to manage your mental or physical health. For example:
- treatments, such as medication or talking treatments (for example CBT, counselling or psychotherapy)
- crisis care, such as services in A&E
- support from a specialist mental health worker or team, such as a psychiatrist, community mental health nurse (CMHN) or community mental health team (CMHT)
- preventative, or public health services, that aim to help people look after their mental health and prevent mental health problems.

Social care generally means any care or support you need to manage your day-to-day life as a result of your mental health needs. For example:
- managing money, such as budgeting or paying the bills
- housework, such as cleaning, cooking or shopping
- using local services, such as peer support groups, employment services, or day centres
- transport, such as using a taxi, minibus or bus pass to attend appointments or services
- managing relationships, such as relationships with friends, family or neighbours
- aids and adaptations to your home or help with mobility issues
- personal care, such as washing or dressing
What is it like to use community-based care?

The way you use community-based mental health and social care will depend on your individual situation. You may use services on a one-off or short-term basis, or you may need more long-term support. You might use one service or several different services at once. You may use only mental health services, only social care services or a combination of both. You may also receive different levels of support at different times.

At its best, community-based care can provide you with the support you need to manage your mental health problem and continue with your normal life.

“I was allocated a care coordinator who is a social worker [and] I have been referred to the community mental health recovery service and have a care plan. My social worker is helping me to move into supported housing and has referred me to art therapy. I also see my GP weekly and she liaises with my psychiatrist. I finally feel as if I may actually get better as everyone supporting me seems to really want to help me, and I'm very grateful for that.”

However, the support you are offered, and how long you have to wait, may depend on where you live. Referrals and waiting times can also be long. This can make accessing the services you need difficult, and at times frustrating.
My experience has been very mixed with the local community mental health team (CMHT). Some community psychiatric nurses (CPNs) have been great, but they didn't stay for long and I kept being passed around between different people. I rarely saw a psychiatrist and when I did, they had no idea who I was or of my history. In the end, I was given a rushed diagnosis but was then promptly discharged as there was no support on offer for my condition. I tried to get re-referred but it is next to impossible to see anyone. My only advice to those struggling with the system is that the more you make a nuisance of yourselves... the better support you will receive.

How can I access community-based care?

**Referrals**

To access most community-based services, you need a referral from a health or social care professional, such as a GP or social worker. Referrals between different services can take time and waiting times on the NHS can be long.

You need to be persistent and proactive with the referral processes... [but] it's very difficult to be pushy and proactive when you're struggling with things already. I almost gave up a lot of times but I'm so glad I didn't, because the help I eventually got has been really good.
Some services allow self-referral, which means you can contact them directly yourself. Voluntary services often allow self-referral (see ‘Voluntary services’ on p.9).

“My GP gave me a number for a self-referral mental health care service when I went to them in desperation a couple of years ago. I rang them and left a message, and they rang me back to talk through symptoms. They put me onto an urgent list, and I was in group CBT and offered counselling within weeks.”

Accessing and using community-based care

The most common ways people access and use community-based services are listed below. These services may provide services directly, or they may refer you on to other services.

GP (general practitioner)

GPs are usually the starting point to get help with a mental health problem. GPs can prescribe medication or refer you to talking treatments, and may be able to refer you to a voluntary or social care service in your area. If your GP feels your needs are more severe or complex, they may refer you to a more specialist service, such as a community mental health team (CMHT) (see p.8).

Many people find that finding a GP who they can trust and who is sympathetic to their problems is the first step in getting the help they need.

“My GP has been wonderful. At my first appointment, he referred me to the community mental health team and was the first GP to offer me a follow-up appointment to check how I was. He didn't rush me through my appointment and talked through the idea of medication really clearly with me.”
**Community mental health team (CMHT)**
If your GP thinks your problems are more severe or complex, they may refer you to a community mental health team (CMHT). CMHTs are teams of mental health professionals including psychiatrists, social workers, occupational therapists and nurses. They may provide community-based mental health services directly, such as talking treatments or medication, or they may refer you to other mental health and social care services. A CMHT will also decide if you should be on the Care Programme Approach (CPA) (see below).

**Care Programme Approach (CPA)**
The Care Programme Approach (CPA) is a way of coordinating community-based mental health and social care services for people with more severe mental health problems or where there are particular risk factors. On the CPA, you have a care coordinator who is responsible for coordinating all your mental health and social care services. A care coordinator may provide services, such as administering medication or providing information and advice, or they may refer you to other service providers. You should also have a care plan, which should include a crisis plan, and this should be reviewed regularly.

**Specialist mental health teams**
There are a number of specialist mental health teams, and what is available varies from one area to another. Specialist teams include:
- early intervention teams (EITs)
- assertive outreach teams (AOTs)
- support, time and recovery teams (STRs or STaRs)
- crisis resolution and home treatment teams (CRHTTs).

To access one of these teams, you would normally be referred by your GP or CMHT. You can find more information about what different mental health teams do in Mind’s booklet *The Mind guide to who’s who in mental health*. 
Crisis care services
If you are experiencing a mental health crisis – i.e. you feel you cannot cope and have thoughts about suicide or harming yourself – there are community-based services that can help. You can:
- call or visit your GP
- go to your nearest Accident and Emergency (A&E) department
- contact the local crisis resolution and home treatment team (CRHTT) or community mental health team (CMHT).

See Mind’s booklet *The Mind guide to crisis services* for more information about support available to you in a crisis.

Social services
If you need social care support, you may be referred by your GP or CMHT to the social services department of your local authority for an assessment. You can also ask for an assessment yourself. If you are assessed as eligible for care, social services may provide services themselves, or they may refer you to service provided by another organisation. (See ‘Community social care assessment’ on p.12.)

Voluntary services
Voluntary organisations, such as local Minds, also provide mental health services. Some voluntary services will need a referral from a mental health professional, but others you can refer yourself directly.

Voluntary sector care can include:
- advocacy
- talking treatments, like counselling or CBT
- alternative and complementary therapies
- information, advice and support on issues such as employment or benefits
- peer support groups
- services designed for specific groups, such as women, black and ethnic communities or LGBT groups.
You can find out about voluntary services in your area by contacting your local social services department or by phoning the Mind infoline. (See ‘Useful contacts’ on p.27.)

**Aftercare under section 117 of the Mental Health Act**
You are entitled by law (section 117 of the Mental Health Act) to receive free community-based care (aftercare), if you have been discharged from hospital under certain sections of the Mental Health Act. If you receive section 117 aftercare, health and social care bodies have a legal responsibility to work together to meet your health and social care needs. This means you should be assessed for both health and social care and both bodies should be involved in decisions about providing or ending your care. (See Mind’s legal briefing *Aftercare under section 117 of the Mental Health Act.*)

**Community treatment orders (CTOs)**
If you return home from a stay in hospital under the Mental Health Act, you may be discharged under a community treatment order (CTO). If this happens, you have to comply with treatment or you may have to return to hospital to be treated under supervision. (See Mind’s booklet *Rights guide: community care and aftercare.*)
Pathways through community-based care

People access community-based services in different ways, but most people will follow the overall pathway shown in the diagram below.

1. **Referral** (from a health or social care professional or self-referral)
2. **Assessment**
3. Decision that you are eligible for care
4. Care planning and review (for social care or if you are on the CPA)
5. Referral to relevant specialist services or direct provision of care
6. Continuing long-term care or support
7. Decision that you are not eligible for care
8. Referral back to original point of access (e.g. a GP), discharge from services or referral to voluntary services
9. Discharge from services once you have recovered or after time limit of service is complete

**How can I access community-based mental health and social care?**
How will I be assessed?

You will usually need to be assessed before you receive community-based support. During an assessment, trained professionals ask you questions to find out more about your needs and decide whether or not you are eligible for a service and if so, which service(s) you should have.

You may receive one of the following assessments to work out your health and social care needs.

Mental health care assessment

A mental health care assessment is designed to work out the level and type of mental health care services you need. This assessment will be carried out by a health professional or team, such as a GP, a CMHT, a mental health link worker or a community mental health nurse (CMHN).

At the assessment, you will be asked questions to find out what support or treatment is appropriate for you. The person assessing you will then decide whether to provide help directly, or whether they need to refer you to another service.

As part of the assessment, the severity of your mental health problem is likely to be taken into account, along with other factors, in order to determine what help you are offered. If you find that your needs change, you can ask to be reassessed.

Community social care assessment (also called community care or social care assessment)

If you have a need for social care services and support, you are entitled to have a social care assessment. You are entitled to this even if you have been found not eligible for the care programme approach (CPA).
Social care assessments are carried out by your local authority social services department. You can ask your social services department for an assessment yourself by phone, letter or email – some local authorities also have an online form you can complete on their website. A carer, friend or relative can also ask for an assessment on your behalf.

If you are being assessed for your social care needs, you may be asked the following questions:

- Do you rely on support to carry on with your day-to-day life, including caring for yourself, doing household chores, maintaining a social life and relationships, or carrying out responsibilities such as work or caring for others?
- Do you rely on support to maintain relationships with family and friends?
- How often do you need this support and how long does it take?
- Are you prevented from doing something because of lack of help?
- Do you manage to do something, but with difficulty, when having some support would make things easier for you?
- Do you need help to keep yourself safe from harm or abuse?
- Do you have any specific needs because of your cultural or religious background?
- Do you already receive help from anyone, including relatives or friends, and are they are happy to carry on offering this help?

**Care Programme Approach (CPA) assessment**

If your community mental health team (CMHT) thinks you might be eligible, you may be referred for a care programme approach (CPA) assessment.

The CPA assessment will focus on whether you are eligible for the CPA, and will assess your health and social care needs together.
You may be put on the CPA if you:

- are diagnosed as having a severe mental health problem
- are at risk of self-neglect, suicide, self-harm or harm to others
- do not cooperate with your treatment plan
- are vulnerable because of physical or emotional abuse, financial difficulties or cognitive impairment, or have learning disabilities
- misuse drugs or alcohol
- are currently or have recently been detained under the Mental Health Act (sectioned)
- rely significantly on the support of a carer, or have caring responsibilities
- receive multiple services from different agencies, such as housing and employment services
- have particular difficulties because of parenting responsibilities, physical health problems, employment or housing issues, or because of your ethnicity, sexuality or gender.

If you are not found eligible for the CPA, you will be normally referred back to your GP or CMHT for alternative care.

Mental Health Act assessment (also called emergency or crisis assessment)

If you are seen by a GP or other professionals when you are in crisis and they think there is a strong risk that you might harm yourself or others, you may receive a Mental Health Act assessment. The assessment will be carried out by two doctors and an approved mental health professional (AMHP).

A Mental Health Act assessment could result in you being sectioned and detained in hospital. This should only happen if the doctors and the AMHP believe that sectioning is the best way of providing you with the care and treatment you need. (See ‘Can I be sectioned at an assessment?’ on p.17 and Mind's booklet The Mind guide to the Mental Health Act 1983 for more information.)
Assessment on discharge from hospital

If you have been discharged from a psychiatric hospital under certain sections of the Mental Health Act, you are entitled by law to receive an assessment of your needs for aftercare and have aftercare services provided (see ‘Aftercare under section 117 of the Mental Health Act’ on p.10). If you have been in hospital as a voluntary patient, you should also be entitled to have an assessment of your health and social care needs when you leave hospital if you want it.

Carer’s assessment

If you feel you need a service to support you while you are caring for someone with a mental health problem, you are entitled to contact your local social services directly by phone, letter or email to ask for a carer’s assessment.

If you are caring for someone who is being treated on the care programme approach (CPA) (see p.8 and p.13), you are also entitled to have your own care and support needs assessed.

Single assessment for people over 65

People over 65 are entitled to have a single assessment for health and social care. This means that any professional assessing you is expected to take both your health and social care needs into account and to refer you to any health or social care services you may need.

How can I prepare for an assessment?

Before you go to an assessment, make sure you know which assessment you are going to and exactly what is being assessed.
You may find it helpful to ask about the following things:
- Who will attend the assessment?
- What is being assessed?
- What information they will be looking for?
- What will happen after the assessment?

Most local authorities also have information about what to expect from health and social care assessments on their websites.

At any assessment, you may be asked about:
- your thoughts, feelings and behaviour and how long you have been experiencing them
- your relationships, living and working situation
- whether you have had a mental health problem before and, if so, what helped
- whether you have a physical health problem
- whether there is a history of mental health problems in your family
- whether you have experienced domestic violence or sexual abuse
- whether your mental health problems have an impact on your children if you are a parent
- whether you have thoughts about suicide or harming yourself.

Before an assessment, it may help to think about what you might be asked and what you want to say. It may also help to write the main points down and take them with you.

“It’s hard to express mental health worries in a short appointment... A list is great – put your biggest worry or problem at the top, or the thing you need to ask most importantly. It’s very easy to get stressed by going to assessments, never mind trying to remember what you need to communicate.”
You might find it helpful to take:
• any documents about your condition and treatment that support what you are saying, such as medical reports or letters from your GP or social worker
• the contact details of anyone currently involved in your care
• any medication you are using, including any over-the-counter medicines.

**Take someone for support**
You may find it helpful to have a friend, family member or advocate to support you to express your views and preferences through the assessment process.

For example, they could:
• help you to get an assessment
• help you prepare before the assessment
• come to the assessment with you (you will need to check beforehand that this allowed).

*If there is someone you feel comfortable talking openly in front of, take them with you to your appointment for moral support.*

For more information about advocates and how to get one, see 'Get support from an advocate' on p.24 and Mind’s booklet *The Mind guide to advocacy.*
At a Mental Health Act assessment, the doctors and approved mental health professional (AMHP) may decide that the best way of providing you the care and treatment you need is in hospital. If you do not want to go to hospital, they could section you, which means you could be detained in hospital against your wishes.

This is a serious decision, and the professionals have to follow strict processes if they decide you need to be detained. (See Mind’s booklet *The Mind guide to the Mental Health Act 1983* for more information.)

While many people find hospital admission a scary experience, some people find it is a chance to access more intensive support in a setting that is more structured than home.

**What are my rights after I have been assessed?**

After you have been assessed, you may or may not be offered services, depending on whether or not you have been found eligible for support.

For social care, this can vary from area to area because local authorities can set their own eligibility criteria. However, all local authorities must provide a service to any person at risk of serious harm. This means there must be a significant risk of harm or abuse, risk to your health, or that your mental health problem has a significant impact on your day-to-day life, including caring for yourself, working, carrying out caring or family responsibilities or maintaining relationships. They can also take account of whether anyone else can reasonably be expected to provide for your needs.

If you have been assessed for your health care needs, but are not found eligible, you will most likely be referred back to the person or team who made the original referral (i.e. your GP or CMHT) for alternative support.
If you are found eligible for support, you will be referred to services, and you have the following rights while you are receiving care.

**Care planning and reviews**

If you are receiving community-based care, you may be offered a care plan (also called a care and support plan). You should be given a care plan if:

- you are receiving social care after a social care assessment
- you are receiving mental health and social care on the care programme approach (CPA)
- you are receiving mental health and social care as part of aftercare under section 117 of the Mental Health Act.

Your care plan should list your needs and describe how these needs will be met. If you are on the CPA, your care plan should also include a crisis plan that explains what you want to happen if you become unwell. You should be involved in making your care plan and you should be given a copy. Your care plan should be reviewed at least once a year.

**Decisions about your care**

Whatever care or treatment you are offered, you should always be involved in discussions about your treatment, and your needs and preferences should be recorded and taken into account.

If you would like a friend, family member or carer to be given information about your care or treatment, you have to give your consent.

If you become unable at any point to make decisions about your care, health care professionals have a duty to talk to your family, and to follow the code of practice for the Mental Capacity Act (see Mind’s legal briefing *Mental Capacity Act 2005*).
Access to records

You have certain legal rights to see your health records and to control who else sees them. If the information held about you is factually inaccurate or parts of your records have been blocked out inappropriately, you may be able to challenge this. (See Mind’s legal briefing Confidentiality and data protection for more information.)

Reasonable adjustments

When people provide a service, they have a duty to make reasonable adjustments. This means that if using or accessing a service is more difficult for you because of your mental health problem, they may have a duty to consider making changes to address this. This may mean:

• changing the way in which services are delivered or functions are performed
• providing extra equipment like an induction loop or extra staff assistance
• removing, altering or avoiding physical barriers (see Mind’s legal briefing Disability Discrimination for more information).

How will my care be paid for?

The following services should always be provided free of charge:

• any mental health care you receive on the NHS
• any aftercare under s117 of the Mental Health Act
• any advice you receive from a local authority about social care services
• if you are assessed as having a need for ongoing healthcare and receive health and social care under the NHS continuing healthcare, or fully funded NHS care package.
When you are assessed for social care, you should be given benefits advice if you need it, to make sure you are getting all the benefits you are entitled to. You should also be given clear general written information about how your local authority sets its care charges and how people are assessed. After the assessment, you should receive written information about how your own charges have been calculated.

**Means-tested social care**

Social care services provided by local authorities are dependent on means testing. This means you will be assessed to see how much you have to pay towards the services. The amount that you are expected to pay will depend on your income and capital (i.e. any property you own).

The local authority has to make allowances for expenses related to your disability when working out your income. This includes all the reasonable expenses you have because you have a mental health problem or physical disability, such as paying extra fuel charges or personal assistance costs.

Once you have been assessed as needing a service, the service should not be withdrawn because you cannot pay the charge. If you do not think you will be able to pay, you can ask your local authority to review the charge. It is a good idea to get legal advice if you decide to do this.

**Personal budgets and direct payments for social care**

In some areas, you may be allocated a personal budget to spend on social care services. Your local authority decides how much money you will be given, based on your financial means assessment and the estimated cost of the services that you need.

You can then choose whether you want to be given this money to manage and spend as a direct payment, or whether you want the local authority to arrange services for you.
A direct payment is a cash payment that is paid to you so that you can pay for and arrange your care services. If you receive a direct payment, you will be asked to show how you have spent the money to ensure that it has been used for suitable purposes. If you find that the money you are offered is not enough to cover your assessed care needs, you should get legal advice about what to do next. Direct payments will not affect your benefits.

If you are not offered a personal budget and would like one, you can ask your local social services department whether they provide this option and about your entitlement to one. (See Mind’s booklet *The Mind guide to personal budgets for social care* for more information.)

### How will I be discharged from community-based care?

If you are receiving care or services, they should not be stopped without a review of your needs and the impact that stopping your care will have on you. You should also be given information about what happens next and about any help you are entitled to.

If you are discharged from the CPA, you may still be entitled to social care and you can contact social services to ask for an assessment of your social care needs. (See ‘Community social care assessment’ on p.12.)

If your care or treatment is stopped, and later you want to re-access care, you will normally have to have another assessment. However, you may be given information about how to re-access help through a quicker route if you need it, for example by phoning your care coordinator.

If you feel that you are being expected to recover too quickly or in a way that is not possible for you, you can request a review or make a complaint.
You can also seek support from an organisation such as a local Mind, Healthwatch or Patient Advice and Liaison Service (PALS). (See ‘Useful contacts’ on p.27.)

**What can I do if I don’t get the care I need?**

Accessing community-based services can be complicated and at times frustrating. As a result, some people feel that they have not been given the care or support they need.

“My mum’s experiences were not so good. It wasn't until she reached a real crisis point and had to be admitted to a mental health unit that she got help, despite my dad being in touch with the GP on a really regular basis and the fact that she'd had problems in the past, including trying to hurt herself. I felt incredibly let down by the processes there and was amazed at how different things could be across one county boundary to another, at pretty much the same time."

If you feel you have not received the support or care you need, there are some things you can do.

**Ask for a written statement**

If you do not understand why a decision has been made or you are unhappy with the outcome of an assessment, you should ask for a written explanation from the people who assessed you. This will help you if you want to challenge the decision or make a complaint.

**Ask for a different service or treatment**

Once a decision has been made about your care, you can challenge the decision or ask for a different treatment. You can also ask for a second opinion, but you do not have a legal right to get one.
Don't be afraid to ask as many questions as you like. If you think something sounds wrong, challenge it or ask for a second opinion.

You can also change your GP if you find your current GP is not providing you with the help you need. If you think a particular treatment is suitable for you, but it is not available in your area, you may want to ask for advice about whether you can do anything about this from your local Healthwatch or Patient Advice and Liaison Service (PALS) (see ‘Useful contacts’ on p.27).

If you are unhappy with your care coordinator, you can also ask for this to be a different person, but you do not have a legal right to change.

If you are unhappy with an aspect of your care, for example, if you are not clear who your care coordinator is or you do not have a copy of your care plan, your GP or an organisation such as the Citizens Advice Bureau or your local Healthwatch may be able to support you to ask questions about this (see ‘Useful contacts’ on p.27).

Get support from an advocate

My advice is to be persistent, and keep chasing people and appointments up. If it feels overwhelming get someone to deal with it for you.

If you finding it difficult to access the services you need, you may find an advocate helpful. An advocate can help you put across your point of view, and ensure that you are listened to. For example, they could help you write a letter to say what you want to happen next, or come with you to a meeting to help you explain what you want. Well-trained and well-informed advocates can also advise on your rights and what you are entitled to ask for.
An advocate may also be able to help you access the services you need, particularly if you are feeling too unwell to pursue this yourself. You can find an advocate through your local Mind, Healthwatch, Patient Advice and Liaison Service (PALS) or Citizens Advice Bureau. A friend or family member can also act as an advocate. (For more details about advocacy, see Mind’s booklet *The Mind guide to advocacy*).

**Complain**

"I wouldn't say it's been a total nightmare but it has been hit and miss. Navigating your way around the services can be challenging. Don't ever feel awkward about complaining."

If you have not received good care, you can complain. The first step is to make a complaint under the NHS complaints procedure. If that fails, you can approach the Care Quality Commission. You can also go to Healthwatch, Patient Advice and Liaison Service (PALS), or the Citizens Advice Bureau to get help with making a complaint about your services or service provider. (See Mind’s legal briefing *Complaining about health and social care*).

If you think you have been discriminated against (treated less fairly because of your mental health problem), you may find it helpful to talk to a discrimination helpline to find out more about your rights. (See Equality Advisory Support Service in ‘Useful contacts’ on p.27.)

**Report abuse or neglect**

If you (or someone you know) is at risk of abuse or neglect by others (including by professional staff), you are entitled to inform the police and health or social services and this should be investigated. If abuse or neglect is found to be happening, local Adult Safeguarding bodies (coordinated by local authority social services) should offer a safeguarding plan.
If you are offered a safeguarding plan, it is good practice to involve you in making this plan. You can refuse to have a safeguarding plan if you don’t find it helpful.

If you want to report abuse or neglect, you may find it useful to talk to an organisation such as Victim Support, who provide information and support for victims of crime. (See ‘Useful contacts’ on p.27.) You should be also offered a chance to speak to professionals privately if you have concerns about what will happen if you report abuse.

**Take legal action**

If you have an urgent need for a service and it is not being provided, and there may be serious implications for you as a result, you may be able to take legal action. If this is the case, you should contact a community care lawyer, who can explain your rights and the options available to you. You can find details of lawyers in your area on the Law Society website or via the Civil Legal Advice (CLA). (See ‘Useful contacts’ on p.27.)
Useful contacts

Mind
Mind infoline: 0300 123 3393
(Monday to Friday 9am to 6pm)
email: info@mind.org.uk
web: mind.org.uk
Details of local Minds and other local services and Mind’s Legal Advice Line. Language Line is available for talking in a language other than English.

Care Quality Commission
tel: 03000 616161
web: cqc.org.uk
Independent regulator for health and social care.

Citizens Advice
advice lines: 08444 111 444
(England); 0844 477 2020 (Wales)
web: citizensadvice.org.uk with online advice from their adviceguide.org.uk
Confidential advice on a range of issues.

Civil Legal Advice
tel: 0845 345 4 345
web: claonlineadvice.justice.gov.uk
Legal adviceline for England and Wales.

Equality Advisory Support Service
adviceline: 0808 800 0082
web: equalityadvisoryservice.com
Provides information, advice and support on discrimination and human rights issues in England, Scotland and Wales.

Find Me Good Care
web: findmegoodcare.co.uk
Information about care providers in England.

Healthwatch
tel: 03000 683 000
web: healthwatch.co.uk

In Control
tel: 0156 482 1650
web: in-control.org.uk
Supports individuals to get more choice and control in their care.

Information Commissioner's Office
helpline: 0303 123 1113
web: ico.gov.uk
Supports information rights, by promoting openness by public bodies and data privacy for individuals.
Law Society  
web: lawsociety.org.uk  
Information on how to find a solicitor.

NHS choices  
web: nhs.uk  
Information about NHS services, including where to find a Patient Advice Liaison Service (PALS) office in your area.

Samaritans  
Freepost RSRB-KKBY-CYJK  
Chris, PO Box 90 90  
Stirling FK8 2SA  
24-hour helpline: 08457 90 90 90  
email: jo@samaritans.org  
web: samaritans.org  
24-hour support for anyone experiencing distress, despair or suicidal thoughts.

Social Care Institute for Excellence  
tel: 020 7024 7650  
web: scie.org.uk  
Monitors good practice in social care.

Victim Support  
supportline: 0845 30 30 900  
web: victimsupport.org.uk  
Provides confidential advice and support for victims of crime.
Further information

Mind offers a range of mental health information on:
• diagnoses
• treatments
• practical help for wellbeing
• mental health legislation
• where to get help

To read or print Mind's information booklets for free, visit mind.org.uk or contact Mind infoline on 0300 123 3393 or at info@mind.org.uk

To buy copies of Mind's information booklets, visit mind.org.uk/shop or phone 0844 448 4448 or email publications@mind.org.uk

Support Mind

Providing information costs money. We really value donations, which enable us to get our information to more people who need it.

Just £5 could help another 15 people in need receive essential practical information booklets.

If you found the information in this booklet helpful and would like to support our work with a donation, please contact us on:
tel: 020 8215 2243
e-mail: dons@mind.org.uk
web: mind.org.uk/donate

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Mind
(National Association for Mental Health)
15-19 Broadway
London E15 4BQ
tel: 020 8519 2122
fax: 020 8522 1725
web: mind.org.uk
We're Mind, the mental health charity for England and Wales. We believe no one should have to face a mental health problem alone. We're here for you. Today. Now. We're on your doorstep, on the end of a phone or online. Whether you're stressed, depressed or in crisis. We'll listen, give you advice, support and fight your corner. And we'll push for a better deal and respect for everyone experiencing a mental health problem.

Mind Infoline: 0300 123 3393
info@mind.org.uk
mind.org.uk