

# Social Care

## Care and support planning under the Care Act 2014

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If you are entitled to social care, you can plan what care and support you will get from your local authority (LA). This is called care and support planning. This factsheet explains how you can plan your care, who is involved and when you have to pay for services.



### KEY POINTS

- If you have eligible needs you will get a care and support plan.
- Your care and support plan will set out how your local authority will meet your needs.
- If your carer can get support, you can have a joint care and support plan with your carer.
- You can combine your care plan from your mental health team with your care plan from the local authority.
- You may get money to meet your needs. This is called a personal budget and you can choose how to spend this money.
- You can use direct payments to pay for services yourself.
- The local authority has to support you if you move to another area.
- Any care or support you get under section 117 of the Mental Health Act will be free.

## This factsheet covers:

1. [What is care and support planning?](#)
2. [How will the local authority meet my needs?](#)
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5. [What if my situation changes whilst I am getting services?](#)
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The 'local authority' or 'LA' is the organisation which manages public services in your area. Your local authority is responsible for social services. You may hear your local authority being called the 'local council' or 'council'. Local authority will be shortened to LA in this factsheet.

### 1. What is care and support planning?

If you need help to support and take care of yourself, then you can have an assessment of your needs by your local authority (LA). This assessment will look at all of your needs before deciding if you are eligible for care and support services.<sup>1</sup> The LA will decide if you have 'eligible needs' at this assessment. If they decide you do, you will get a care and support plan.<sup>2</sup> This plan will agree how the LA will meet your eligible needs.

This factsheet looks at the care and support plan. You can find more information about '**Social care – Assessment and eligibility**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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### 2. How will the local authority meet my eligible needs?

Once the local authority (LA) has assessed you as having eligible needs, they must meet these needs.<sup>3</sup> If you want to be involved, the LA has to involve you in making your care and support plan.<sup>4</sup> You are at the centre of the assessment and support planning. The LA should not tell you how they will meet your needs. You should decide how you want it to happen. You need to agree on the final plan with the LA.

Some examples of how the LA may meet your needs are:<sup>5</sup>

- counselling, making sure you are able to socialise outside your home, or other social work,

- providing goods and facilities or making sure you can access them,
- providing information, advice and advocacy,
- support and care at home or in the community, or
- arranging a care home or appropriate accommodation.

Your needs are specific to you. The services the LA offer you must meet your needs rather than only offering services they happen to have.<sup>6</sup>

The LA will not arrange medical treatment or other health services that the NHS should provide for you.<sup>7</sup>

The LA can meet your needs by:<sup>8</sup>

- arranging services for you,
- providing services themselves, or
- giving you the money to pay for services yourself. This is called giving you 'direct payments'.

The local authority (LA) is still responsible for your care and support plan even if you use direct payments.<sup>9</sup>

### **What if I'm already getting support?**

If another service is already meeting your needs, the LA does not have to meet these needs. But they have to do an assessment to make sure the support you get meets your needs. They have to put this in your care and support plan and review it.<sup>10</sup>

The LA does not have to:

- arrange treatment or a health service that the NHS should provide,
- do anything that the housing authority should, or
- arrange care your carer is giving you.

The LA does not have to arrange care if you are getting help from a carer who wants to keep on caring for you. The LA has to write this in your care plan and review it.<sup>11</sup>

### **What if I do not have eligible needs?**

If you do not have eligible needs the local authority (LA) does not have to meet your needs. They will write to you to explain why they made their decision.<sup>12</sup> They have to send this letter to your advocate if you ask them to.

If you have needs but they are not eligible, the LA has to give you information and advice about how you can reduce them.<sup>13</sup> The LA should use your assessment to decide on what advice to give you. The

advice should not be general or asking you to visit a website.<sup>14</sup> The advice should directly point toward action you can take.

They need to make sure you can access the information they send. For example they should not ask you to look at a website if you do not use a computer. If they gave you this information and advice after your assessment they do not have to give it to you again.

If some of your needs are eligible and some are not, the LA has to make a care and support plan and give you information. The care and support plan is for your eligible needs and the information and advice is for the rest of your needs.

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### **3. What will be in my care and support plan?**

You will work with someone from the local authority (LA) to write your care and support plan. This plan will explain:

- what your needs are,
- how these needs will be met, and
- how this plan meets your needs and wishes.

The local authority (LA) should involve you in developing your plan. You should tell them how you want to achieve your goals, what your wishes are and what is important to you. You should be involved as much or as little as you want.

Your plan must include:<sup>15</sup>

- the needs your LA thinks you have,
- details of your eligible needs,
- how the LA will meet your eligible needs,
- how the support will help you do the things you want to do,
- details of your personal budget,
- information and advice about how you can reduce your needs and, and
- if you are using direct payments for your support, what you will use them on and how much this will cost.

Your needs may change during the year, these are called fluctuating needs. Your plan should explain what services or support is available if you have a crisis or if your needs change suddenly.<sup>16</sup>

#### **How long will it take to make my plan?**

The law does not say how quickly the LA should write your plan. They should take time to get it right but make sure that it is finished as quickly as possible.<sup>17</sup>

## Can someone help me with my plan?

If you find it hard then you can ask someone to help you, like family or friends. If you cannot understand the information you can ask the LA for an independent advocate. If you lack mental capacity the LA has to get an independent advocate if you have no one else to support you. You can ask for an advocate at any point of the process.

If your carer is supporting you for some of your needs, they can help develop the plan. The LA has to make sure your carer is able to keep meeting your needs. If your carer has needs, you can have an assessment and plan together. You can make your plan with family or other people who may be involved in your care.<sup>18</sup>

You can find more information about '**Advocacy**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and them to send you a copy of our factsheet.

## Can I combine plans from different services?

Your plan should have a holistic approach. This means it should include information about other needs you may have, not just your eligible needs. The local authority (LA) needs to find out if you have plans with other services. If you do, they can combine different plans together. For example, you could combine your plan with your carer or your child.

If you are under the Care Programme Approach (CPA), your care and support plan for your social care needs should be included within your CPA care plan.<sup>19</sup>

Combining plans will make sure that two different services are not both doing the same things for you. If two services are combining their plans for you, they will decide which of them will monitor your plan.<sup>20</sup>

You can find more information about the '**Care Programme Approach**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

## When will my plan begin?

Your care and support will begin when you agree on and sign off your final plan. You, the local authority (LA) and anyone else who was involved in the plan have to agree on your final plan.<sup>21</sup> Everyone needs to agree on:

- if the information in your plan is right,
- how much your personal budget is, and
- how your needs will be met.

This is a big part of the planning process. You will have a copy of the agreement in your plan.

If you have agreed a large personal budget or an uncommon plan the LA may have to send the plan to an approval panel. The approval panel

should have proper training and skills to decide whether to approve your plan. The LA should only use approval panels in exceptional situations.<sup>22</sup>

If the LA won't agree to your plan, they need to tell you why. You may have to go back to parts of the planning process. You should still get support while you are agreeing the right plan. If you cannot agree on a plan the LA should signpost you to their local complaints procedure.<sup>23</sup>

When you agree, the LA will sign off your plan and give you a copy. They should write your plan in a way you understand it.<sup>24</sup> You can ask them to give a copy to your carer or advocate. The LA can give a copy to other professionals you have contact with if you want them to, for example your GP.

You can find more information about '**Complaints**' at [www.rethink.org](http://www.rethink.org). Or contact our General Enquiries team on 0121 522 7007 and them to send you a copy of our factsheet.

### **When will the local authority (LA) review my plan?**

The review is to make sure your plan is meeting your needs. The LA may decide your needs have changed and you need another assessment. You may need to change your plan, and this is called revising the plan. The LA can review your carer's plan at the same time as yours.

There are three types of review:

- **Planned review:** the LA should review your plan six to eight weeks after it is signed off and then at least every 12 months.<sup>25</sup>
- **Unplanned review:** This happens if your circumstances change. For example you go into hospital.<sup>26</sup>
- **Requested review:** You, your carer or advocate can ask for a review at any time.<sup>27</sup> The LA can refuse to do a review if they feel the plan is correct and your circumstances have not changed. They need to tell you why if they refuse to do a review.<sup>28</sup>

When the LA reviews your care plan they need to think about the following things.<sup>29</sup>

- Has your situation or care needs changed?
- What works, what isn't working and what you might need to change?
- Do you have any new outcomes you want to meet?
- Do you need more support to achieve your outcomes?
- Can you meet your needs with the personal budget?
- Do you need to think about a different way of meeting your needs, such as direct payments?

- Is your personal budget enough to meet your needs?
- Has your social support changed and how it is affecting you?
- Are you at risk of abuse or neglect?
- Are you and your carer or advocate happy with the plan?

If the LA decides to revise the care plan you have to go through the assessment and planning stages. You do not have to start from the beginning, you can use information in the plan that is still right.

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#### **4. What is my personal budget?**

The LA should give you an idea how much your personal budget will be when you start planning. This is called an indicative amount.<sup>30</sup> This will change as you make your care plan.<sup>31</sup> The Personal Budget is the final budget contained in the care plan.

Your personal budget will explain:<sup>32</sup>

- how much your care costs,
- how much you may have to pay for your care (see [section 6](#)), and
- how much the local authority (LA) may pay for your care.

#### **Who will manage my budget?**

Your personal budget lets you choose how money is spent on your care. You can choose how your personal budget is managed. You can:

- ask the LA to manage it,
- use direct payments to manage it, or
- get another organisation to manage it– this is an individual service fund (ISF).

You can ask the LA to organise an individual service fund. An individual service fund is when the LA gives your budget to another service to hold. You are still in control of the budget if you have an individual service fund.<sup>33</sup>

#### **How can I use my budget?**

You can use direct payments to buy your own care or services for your needs in the plan.<sup>34</sup> For example you can pay for a personal assistant, someone to do household chores or a gym membership.

If you are paying for your care you could broker a service. This means the LA can help you decide who you want to get support from. If you pick a service outside of the LA they have to make sure that service will meet your needs.<sup>35</sup>

You can use these different options together. For example you can use direct payments for one service and ask the LA to manage the rest.

## How do they decide how much my personal budget is?

Your personal budget should be enough to meet your care and support needs. Your personal budget will say how much your care costs. The LA will do a financial assessment with you to see how much you can afford to pay. Whatever you cannot afford, the LA will pay. (See [section 6](#))

Your personal budget may have information about other money you get, such as your personal health budget.<sup>36</sup>

You can mix your personal budget with someone else's so you have more money to buy a service. This is called pooling your budget. You can pool your budget with someone you live with, your carer or other people in your community with the same needs. You could then buy a service together.<sup>37</sup>

The local authority (LA) has to explain how they worked out how much your personal budget is. There are different ways that an LA can work out your personal budget. The LA needs to make sure you understand how they do this. The LA can use any process they want but it must meet the criteria below.<sup>38</sup>

- **Transparent:** they need to tell you how they calculate your budget as part of their information and advice role. They need to make sure you understand how they decided your indicative budget and final budget. If the process is complicated they need to find a way to explain it so you can understand it.
- **Timely:** the LA should give you an indicative budget when you are starting the care and planning process. This will help you develop your plan quicker. Your final budget may be more or less than the indicative budget to make it enough to meet your needs.
- **Sufficient:** the LA needs to make sure your personal budget is enough to meet your needs.

The LA needs to make sure that you will have enough money to pay for local services. If it costs more than expected to pay for services, the LA needs to review your care plan and personal budget.<sup>39</sup> Your personal budget may change if you move area because the cost of local services may be different.

You can find more information about '**Direct Payments**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.



## 5. What if my situation changes whilst I am getting services?

### **My health gets better or worse**

Your needs may change during your support and care plan. During your assessment you will look at how your needs may change, or fluctuate.<sup>40</sup> Your plan will explain what care you will get when your needs change.

If your condition gets better the local authority (LA) may temporarily stop your direct payments.<sup>41</sup> If your health changes a lot or for a long time then you have to have new assessment to see if you have eligible care needs or if your plan still meets your needs.

Remember you, your carer or advocate can request a review at any time.

### **I want to move away from the area**

If you move out of the area you should have care and support during this move.<sup>42</sup> The LA where you are moving from needs to organise your care and support with the LA of the area you are moving to.<sup>43</sup>

The LA you are moving to should assess your needs before you move. If they cannot do this, they need to continue the care and support plan you already have until they do their own assessment.<sup>44</sup>

If you decide to move area you need to tell your LA so they get in touch with the LA where you are moving to. The LA you are moving to needs to make sure you are serious about moving. Once they are sure you are going to move they have to give you and your carer advice and information about services and care in the area.<sup>45</sup> You will have a named person from both local authorities. They will work together to support you to move.<sup>46</sup>

If you have direct payments the LA should give you advice to make sure you do not breach any contracts with services you are getting at the moment.<sup>47</sup> Your LA needs to send your current plan, your carer's plan and any other information about your care to the LA where you are moving.<sup>48</sup> Both LAs need to keep in touch with you during your needs assessment and care and support planning. They need to make sure you know what is going on and what progress they are making.<sup>49</sup>

If your personal budget is different in the LA you are moving to they have to explain why. They need to show you how they decided on your personal budget (see [section 4](#)).

If you have health needs, both local authorities need to work with the NHS to ensure you get the support you need.<sup>50</sup>

You can find more information about ‘**Social Care – Assessment and Eligibility**’ at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## 6. Will I have to pay for social services?

The LA may charge you for social care services. You can find more information about ‘**Charging for Social Care**’ at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## 7. What if I am under section 117 aftercare?

If you have been in hospital for treatment under the Mental Health Act 1983, you may get free after-care under Section 117 of the Mental Health Act. The local authority might still assess your social care needs in the way we have explained in this factsheet.

If you are eligible for Section 117 aftercare, your health and social care needs are usually arranged using the Care Programme Approach (CPA). The Care Act 2014 is the main piece of law for social care so the local authority (LA) may assess your social care needs using the process we have explained in this factsheet. This assessment will then be included in your CPA plan. But the duty to give you after-care still comes under the Mental Health Act. The LA cannot charge you for any care and support that you get under Section 117 of the Mental Health Act 1983.<sup>51</sup>

You can find more information about:

- Section 117 aftercare
- Care programme approach

at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## 8. How can I deal with problems with social care?

You can deal with problems with social care services informally or formally. The LA should make sure you know how to appeal their decisions or complain if you want to.

### Informal options

It is best to try and deal with the problem informally first. You can talk about your concerns with the professional who is in charge of your care plan. If you do not have a care plan you should contact the person who

did the assessment. You can ask them to explain their decision or discuss your concerns.

If you speak to someone keep a note of:

- who you spoke to,
- when you spoke to them, and
- what you discussed.

If you are under the Care Programme Approach (CPA), discuss any problems with your care coordinator or key worker.

## **Formal options**

### Complaints

If you want to complain you have to use the local authority's (LA) complaints procedure.

You can find more information about '**Complaints**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

### Legal action

You should be able to deal with most problems informally or through the complaints procedure. However, if you feel that your LA is not following the law, you could get legal advice. You would need to speak to a community care solicitor.

You may get advice and representation depending on your situation. You may be entitled to legal aid but there are rules around this. Civil Legal Advice will tell you if you qualify for legal aid. They can give you information about local solicitors who accept legal aid. Their contact details are below.

### **Civil Legal Advice**

Civil Legal Advice can help you to find a solicitor who works under legal aid.

**Tel:** 0345 345 4 345 (9am to 8pm Mon- Fri, 9am to 12.30pm Sat)

**Text:** 'legalaid' and your name to 80010

**Web:** [www.gov.uk/civil-legal-advice](http://www.gov.uk/civil-legal-advice)

You can find more information about '**Legal Advice**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## **9. Frequently asked questions**

### **Will my personal budget affect my benefits?**

In most cases your personal budget will not affect your benefits. The Department for Work and Pensions (DWP) should not say any direct

payments you get are income. This means you do not need to tell them you get these payments.

However, if you use a direct payment to pay someone to work for you then you do need to tell Her Majesty's Revenue and Customs (HMRC).<sup>52</sup> This might be if you pay someone to do paperwork or clean your house.

You have to tell the DWP about any other financial support you are getting. Letting them know early can help to make sure you don't get overpaid which can cause problems in the future.

When the local authority (LA) is deciding your personal budget, you will need to tell them about all your income. This is so the LA do not pay for something you are already getting benefits for.

You can find more information about '**Charging for social care**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

### **Will social services take my children away from me because of my mental illness?**

Social services cannot take your children away just because you have a mental illness. If they did they would be discriminating against you and going against your human rights. If you need support for you and your family you should contact social services.

The local authority (LA) can make sure you have services to support you to look after your child. Your needs assessment will look at what support you need to do this. Social services will try and keep you and your children together. They will only take action to protect your children if you are a serious risk of harm to them or if you cannot protect them from harm.

### **I will be discharged from hospital soon. Can I get a social care assessment before I am discharged?**

If the NHS thinks that you need care and support so they can discharge you they need to tell the LA, this is called a notice of assessment. They need to give this notice to the LA where you are an ordinary resident. If they do not know where you are an ordinary resident they need to give it to the LA where the hospital is.<sup>53</sup>

They need to make sure the LA knows in time so they can plan an assessment. They should normally do the assessment before the NHS discharges you. If the NHS sends the notice late the LA have to assess you within 2 days of receiving the referral.<sup>54</sup> If the LA does not assess you in time they delay your discharge. If they do this they could have to pay a charge to the NHS.<sup>55</sup>

## I've just been discharged from the Care Programme Approach (CPA) – can I still get help from social services?

The short answer is yes. If you were getting services as a result of a social care assessment whilst you were under CPA, these services should not be taken away just because you have been discharged from CPA. You will only stop getting services if a review decides you do not have eligible needs(See [section 3](#)).

You can find more information about '**Care programme approach**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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- <sup>1</sup> Department of Health. *Care and Support Statutory Guidance*. <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>. Para 6.10. (accessed 13 September 2017).
- <sup>2</sup> As note 1, at para 10.9.
- <sup>3</sup> s18(1) Care Act 2014 c23.
- <sup>4</sup> As note 1, at para 10.2.
- <sup>5</sup> As note 3 (Care Act 2014), s8(1).
- <sup>6</sup> As note 1, at para 10.10.
- <sup>7</sup> As note 3 (Care Act 2014), s22.
- <sup>8</sup> As note 3 (Care Act 2014), s8(2).
- <sup>9</sup> As note 1, at para 10.17.
- <sup>10</sup> As note 1, at para 10.21.
- <sup>11</sup> As note 1, at para 10.26.
- <sup>12</sup> As note 3 (Care Act 2014), s24(2).
- <sup>13</sup> As note 3 (Care Act 2014), s24(2).
- <sup>14</sup> As note 1, at para 10.29.
- <sup>15</sup> As note 3 (Care Act 2014), s25(1).
- <sup>16</sup> As note 1, at para 10.44.
- <sup>17</sup> As note 1, at para 10.84.
- <sup>18</sup> As note 3 (Care Act 2014), s25(3).
- <sup>19</sup> As note 1, at para 6.78.
- <sup>20</sup> As note 1, at para 10.80.
- <sup>21</sup> As note 3 (Care Act 2014), s25(5).
- <sup>22</sup> As note 1, at para 10.85.
- <sup>23</sup> As note 1, at para 10.86.
- <sup>24</sup> As note 1, at para 10.87.
- <sup>25</sup> As note 1, at para 13.15.
- <sup>26</sup> As note 3 (Care Act 2014), s27(4).
- <sup>27</sup> As note 1, at para 13.23.
- <sup>28</sup> As note 1, at para 13.25.
- <sup>29</sup> As note 1, at para 13.12.
- <sup>30</sup> As note 1, at para 11.7
- <sup>31</sup> As note 1, at para 11.24.
- <sup>32</sup> As note 3 (Care Act 2014), s26(1).
- <sup>33</sup> As note 1, at para 10.14.
- <sup>34</sup> As note 3 (Care Act 2014), s33.

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- <sup>35</sup> As note 1, at para 10.15.
- <sup>36</sup> As note 3, s26(3).
- <sup>37</sup> As note 1, at para 11.34.
- <sup>38</sup> As note 1, at para 11.24.
- <sup>39</sup> As note 1, at para 11.28.
- <sup>40</sup> As note 1, at para 6.58.
- <sup>41</sup> As note 1, at para 12.72.
- <sup>42</sup> As note 1, at para 20.1.
- <sup>43</sup> As note 1, at para 20.2.
- <sup>44</sup> As note 3 (Care Act 2014), s38(1).
- <sup>45</sup> As note 3 (Care Act 2014), s37(4).
- <sup>46</sup> As note 1, at para 20.18.
- <sup>47</sup> As note 1, at para 20.14.
- <sup>48</sup> As note 3 (Care Act 2014), s37(5).
- <sup>49</sup> As note 3 (Care Act 2014), s37(9).
- <sup>50</sup> As note 1, at para 20.33.
- <sup>51</sup> As note 1, at para 8.14.
- <sup>52</sup> HM Government. *Tell HMRC about a new employee.*  
<https://www.gov.uk/new-employee> (accessed 13 September 2017).
- <sup>53</sup> As note 1, at Annex G, para 5.
- <sup>54</sup> As note 1, at Annex G, para 19.
- <sup>55</sup> As note 1, at Annex G, para 40.

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This factsheet is available  
in large print

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## Rethink Mental Illness Advice Service

Phone 0300 5000 927  
Monday to Friday, 9:30am to 4pm  
(excluding bank holidays)

Email [advice@rethink.org](mailto:advice@rethink.org)

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### Did this help?

We'd love to know if this information helped you.

Drop us a line at: [feedback@rethink.org](mailto:feedback@rethink.org)

or write to us at Rethink Mental Illness:  
RAIS  
PO Box 17106  
Birmingham B9 9LL

or call us on 0300 5000 927.

We're open 9:30am to 4pm  
Monday to Friday (excluding bank holidays)



Leading the way to a better  
quality of life for everyone  
affected by severe mental illness.

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 [www.rethink.org](http://www.rethink.org)

### Need more help?

Go to [www.rethink.org](http://www.rethink.org) for information on symptoms, treatments, money and benefits and your rights.

### Don't have access to the web?

Call us on 0121 522 7007. We are open Monday to Friday, 9am to 5pm, and we will send you the information you need in the post.

### Need to talk to an adviser?

If you need practical advice, call us on 0300 5000 927 between 9:30am to 4pm, Monday to Friday. Our specialist advisers can help you with queries like how to apply for benefits, get access to care or make a complaint.

### Can you help us to keep going?

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