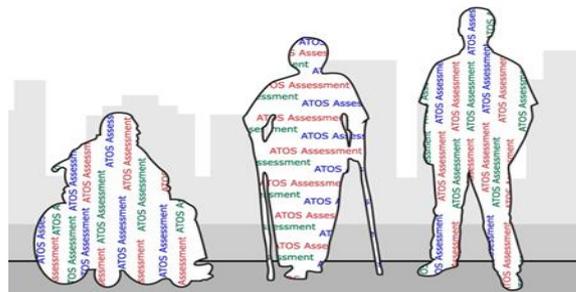


# Report on the ATOS Assessment

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## A report about people's experience of the ATOS Assessment

## Report on the ATOS Assessment

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# 1. EXECUTIVE SUMMARY

## Background

- RUN-UP is a user led service for people who use or have used mental health services and their carers. The project aims are to give the service user a voice and their voice to be heard regarding the service they receive.
- Advocacy in Redbridge is an advocacy partnership delivered by VoiceAbility and Daffodil Advocacy Project working with people with experiences of mental ill health, substance misuse issues, learning disabilities, autistic spectrum conditions, acquired brain injury, physical or sensory impairments or dementia.
- Over the past year RUN-UP and Advocacy in Redbridge have been hearing from Redbridge service users about their fears, anxieties, experiences and the distress caused by being asked to attend the ATOS Assessment. This is a *work capability assessment* for the Department of Work and Pensions for those claiming benefits because of disability or injury.
- In September 2013 we responded to our service users concerns by hosting two focus group meetings. We hope that this report will help to improve the future experiences of the most vulnerable members of our society and that the voice of Redbridge will be added to the national conversation.

## Key Recommendations

- There should be an organisation locally where people can get advice and help about the form
- ATOS should make it very clear that people can take someone with them to the assessment
- There is a clear need for assessments to be held nearer to the service users' own Borough. Many service users felt uneasy and vulnerable travelling long distances. Many had to rely on others to drive them to the assessment, most felt uncomfortable being out of their own area and this added enormous stress
- There is a real need for people to be able to have their assessment at home and strongly recommend ATOS look into this
- There should be a question on best contact methods for client included on the form
- There is a real need for specialist assessors for mental health and dual diagnosis
- The waiting time for the results of the assessment must be reduced and more information needs to be given to the service user after assessment

## 2. Introduction to RUN-UP

RUN-UP is Redbridge User Network-User Pressure Group. We are a local pressure group working for the improvement of mental health services and mental health and wellbeing. The project aims are to give the service user a voice and their voice to be heard regarding the service they receive. It encourages self esteem and confidence.

RUN-UP is a user led service for people who use or have used mental health services and their carers.

Our Aims:

- To ensure that users will have proper representation to assert their needs and rights.
- To make our service available to them through knowledge, information on social policies, locally and nationally.
- To exercise a responsible but strong pressure on local issues such as housing, benefits, employment, and mental health services for the promotion of users rights.
- To do this without prejudice of age, race, colour, religion, sexuality and disability.

### **Voice – Nothing about us without us**

A key role of RUN-UP is to influence the design, delivery and management of local mental health services. In particular: to contribute experience and expertise to policy development as a 'critical friend' as well as to promote and monitor the effectiveness of user involvement in the planning, commissioning, managing and monitoring of services to ensure service users have a full say in policies and practices which affect their lives. Articulating views and experiences of our members by attending meetings, seminars, workshops and debating issues

### **Campaigning for full inclusion in society**

We all want to live in communities where we can participate fully and equally. Many indicators show us that for people with mental health conditions this hasn't yet happened and there remains considerable work to be done to get to this point. People with mental illness commonly describe the stigma and discrimination they face as being worse than their main condition. Discrimination, stigma and prejudice can pervade every part of their daily life - their personal life, working life, sense of citizenship, their ability to maintain even a basic standard of living.

RUN-UP has a membership of over 600 including many local organisations. We produce monthly newsletters, hold monthly service user network meetings and send regular updates of information pertaining to mental health to service users, carers and allies.

### 3. Introduction to Advocacy in Redbridge

Advocacy in Redbridge is an advocacy partnership delivered by VoiceAbility and Daffodil's advocacy.

We provide free, independent and confidential advocacy services to the residents of Redbridge. Advocacy and self advocacy can be vital for people who cannot speak up for themselves, or for people who feel that they do not have the power to do so. Our multi-skilled advocates carry out all elements of statutory and community advocacy to individuals over the age of 18, who may have lived experience of mental ill health, substance misuse issues, learning disabilities, autistic spectrum conditions, acquired brain injury, physical or sensory impairments or dementia. We also work with carers, older people and victims of abuse.

#### **Independent Mental Capacity Advocacy (IMCA)**

We work with people who have been assessed as lacking capacity and do not have family or friends who are appropriate to consult. Our advocates will become involved with any cases that involve decisions around serious medical treatment or changes in long term accommodation.

Our advocates can also be contacted where there are questions concerning safeguarding or care reviews.

If you have queries around Deprivation of Liberty Safeguards (DoLs), including paid representative duties, you can also access this service.

#### **Independent Mental Health Advocacy (IMHA)**

We support people who have been detained under sections of the Mental Health Act, or under a Community Treatment Order, we work with individuals to help them understand their rights and receive the treatment that's right for them.

Our advocates will assess any potential case, but issues we regularly become involved with are:

- Care planning
- Mental Health Review Tribunals
- Accessing Support or Services
- Aftercare planning
- Supporting people who wish to raise a complaint

#### **Community Advocacy**

Our experienced team professional advocates and volunteers support adults who may have lived experience of mental ill health, substance misuse issues, learning disabilities, autistic spectrum conditions, acquired brain injury, physical or sensory impairments or dementia. We also work with carers, older people and victims of abuse to get their voices heard.

We also run self advocacy groups to empower people to be their own advocates.

### 4. Project Background

Over the past year RUN-UP and Advocacy in Redbridge has been hearing from Redbridge service users about their fears, anxieties, experiences and the distress caused by being asked to attend the ATOS Assessment. This is a *work capability assessment* for the Department of Work and Pensions for those claiming benefits because of disability or injury.

We hope that this report will help to improve the future experiences of the most vulnerable members of our society and that the voice of Redbridge will be added to the national conversation.

MPs have criticised the test being used to see whether people claiming disability benefits are fit to work. The Public Accounts Committee said the Work Capability Assessment had resulted in too many wrong decisions which were overturned on appeal. Its chair Margaret Hodge accused the Department for Work and Pensions (DWP) of being "unduly complacent" and of hurting the "most vulnerable".

Paul Farmer, chief executive of mental health charity Mind, said her case raised the broader issue of how people with mental illnesses are assessed. He said: "Over a third of people apply for Employment and Support Allowance because they have mental health problems. We know that many are wrongly declared fit for work. "We want the government to make sure that the health professionals assessing people with mental health problems have an appropriate level of mental health expertise." (BBC news 8th February 2013 & 24th August 2012)

In statements, the Department for Work and Pensions and ATOS said they were working with disability groups to improve the medical tests, known as the Work Capability Assessment, and had recruited 60 "mental function champions" to give advice to the doctors and nurses carrying out the tests.

### **5. Publicity & Engagement**

RUN-UP and Advocacy in Redbridge sought to get the views from service users by holding two focus groups. These focus groups were advertised through RUN-UP's newsletter, on Advocacy in Redbridge website, RCMH website, RedbridgeCVS website and Healthwatch. The only criteria we stipulated was that all participants must have attended an ATOS Assessment.

In the month of September 2013 we held two focus groups with a total of 11 participants. One was held at RedbridgeCVS and the other by the Centre of Independent Inclusive Living – Redbridge.

Both focus groups were held over a two hour period. We designed three specific questions that we hoped would give a balanced view.

### 6. Work Capability Assessments

The assessments - or *fit to work tests* - were first introduced for new claimants in 2008 by the Labour government. Following the pilot schemes, in 2011 the Coalition extended the scheme to reassess those who had been on the old incapacity benefit. Their introduction sparked protests from disability campaigners.

ATOS Healthcare carries out work capability assessments on behalf of the Department for Work and Pensions (DWP). If you are claiming benefits as a result of a disability or injury, you may be required by the DWP to have an assessment with a qualified health care professional as part of your claim process. ATOS Healthcare conducts work capability assessments, using criteria set out by government, and provides the DWP with independent advice which is used by a DWP Decision Maker, along with any other information they have received, to decide on your entitlement to benefit.

How is mental health assessed?

ATOS says: "ATOS health care professionals (HCPs) conduct assessments for all conditions, including mental health. We also have Mental Function Champions who provide additional expertise in mental health, cognitive and learning disabilities. They can advise the healthcare professional on any aspect of the effects of mental health conditions. ATOS health care professional will ask you questions about how you are affected by your mental health conditions. Based on this discussion, and all available evidence, our HCPs will provide their advice to the DWP. This advice is based on the DWP criteria and covers your capacity to cope with change, your understanding and focus, and social interaction."

### 7. Findings

Many of the participants wanted to remain anonymous for fear of having their benefits taken from them. We provided a safe, private space in which to air their views. Both RUN-UP and Advocacy for Redbridge agreed to respect their wishes and believe that fear of this kind this was a reason for low participation. However those that took part in the focus groups provided us with rich, detailed information about their experiences.

Many of the participants gave detailed experiences of their journey, starting with the dread of getting a letter asking them to attend an ATOS Assessment; the anxiety of waiting for the date of the assessment to come through; wondering where the assessment was going to be held and who would interview them - would they be suitably qualified? Could they take someone with them for support? Who could they turn to for support with the form?

RUN-UP and Advocacy in Redbridge designed three specific questions for participants, they were:

- 1 What went well?
- 2 What didn't go well?
- 3 What could have made it better?

#### **Question one – What went well?**

One person said the woman who assessed him was very nice, and the interview went well. They went on to say the doctor seemed interested and engaged well.

The rest of the group unanimously agreed that 'nothing went well' for them.

A lot of people in the group wondered how to present themselves at such an assessment. Some felt they should dress up well, as if they were going to court. Others felt they should dress down, as they might be taken more seriously, because, as one participant said, "if you have broken bones they can see you're physically unwell, so if I dress down they will see how unwell I am."

#### **Question two – What didn't go well?**

Most of the participants didn't understand the letters very well.  
3 felt the street map giving directions to the ATOS building were not very helpful.  
For most of the participants nothing about the experience was positive.

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All the participants thought the forms focused on physical disabilities, therefore making the form confusing to complete for mental health service users.

Half of the participants did not know they were supposed to take evidence with them when their case went to an appeal.

One service user said they went alone to the first one, but didn't really understand why they were going. The person's benefits were stopped after that interview leaving them almost destitute. At the 2nd interview they again went alone, as they were not informed that they could take someone with them and thought that they were not allowed to. Eventually the case went to a tribunal and the person got their benefits backdated for eighteen months.

### **Question 3 – What could have made it better?**

All participants agreed on the importance of having assessors who have experience of working in the mental health field.

11 out of 11 participants agreed that the outcome for the service user was dependent on the medical expertise the ATOS assessor.

11 out of 11 believed it was pot luck who assessed you on the day

10 out of 11 felt the assessment interview felt insulting (“they want to try and catch you out” said one) and wanted more respect and understanding shown at the assessment.

11 out of 11 said that waiting for the results is the most distressing thing and wanted to hear the outcome of the assessment sooner.

11 out of 11 agreed that people should not postpone responding to letter.

11 out of 11 agreed that there needs to be a choice where assessments are held and wanted to local places for service users to be able to attend the assessment. At least one in each borough.

There should be an organisation locally where people can get advice and help from. 10 out of 11 recommended finding someone you can trust to help you fill in the forms.

8 out of 11 said they didn't realise they could take someone with them. Clearer information about who and what is needed for the assessment was needed.

### **8. Key Recommendations**

- There should be an organisation locally where people can get advice and help about the form
- ATOS should make it very clear that people can take someone with them to the assessment
- There is a clear need for assessments to be held nearer to the service users' own Borough. Many service users felt uneasy and vulnerable travelling long distances. Many had to rely on others to drive them to the assessment, most felt uncomfortable being out of their own area and this added enormous stress
- There is a real need for people to be able to have their assessment at home and strongly recommend ATOS look into this
- There should be a question on best contact methods for client included on the form
- There is a real need for specialist assessors for mental health and dual diagnosis
- The waiting time for the results of the assessment must be reduced and more information needs to be given to the service user after assessment

### **Acknowledgements**

RUN-UP and Advocacy in Redbridge worked in partnership during this research. We were supported by RedbridgeCVS.

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We gratefully acknowledge the Service Users who came forward with their stories and was willing to help us in our research. We also fully respect their wish to remain anonymous.



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