

ORAL HISTORY RECORDING TRANSCRIPT

'Fighting for our Rights' project

Surname	Levick
Given names	Philip George
Date of birth	1953
Place of birth	Haringey, London
Date of interview	11 May 2017
Length of interview	00:51:32
Number of tracks	1
Name of interviewers	Callistus Dywili, Ijeoma Aniyeloye, Jen Kavanagh
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CD: This is an oral history interview with Phil Levick by Callistus Dywili on Thursday 11th of May 2017. Also present are Ijeoma Aniyeloye and Jen Kavanagh. The interview is taking place at Kingston Centre for Independent Living's office as part of their Fighting for Our Rights project. Okay welcome Phil.

PL: Thank you.

CD: Could you kindly please state your full name.

PL: My full name is Philip George Levick.

CD: Would you please state your date of birth?

PL: My date of birth? Cheeky question [laughs] [REMOVED] 1953.

CD: Thank you. Whereabouts were you born, if you don't mind telling us Phil?

PL: I was born in Haringey in London.

CD: And do you want to tell us about your parents, what their names were?

PL: My father is dead now but his name was William Levick. My mother is still alive, her name is Leah Levick. My mother's French, dad was British and they met during the Second World War.

CD: Thank you, thank you about that and sorry about your dad.

PL: Thank you.

CD: Well you said your parents met during the Second World War, would you know what kind of professions they were doing then when they met?

PL: My mother was a seamstress dressmaker. My father was in the army as a chef at the time.

CD: Okay. Would you tell us please about where you went to school, you know your childhood experiences?

PL: I started going to school once we left London and at the time I was around seven years old I went to a primary school in Boxmoor, Hemel Hempstead which is in Hertfordshire.

CD: Okay. Why did you move to Hemel Hempstead from London?

PL: My parents moved to Hemel Hempstead from London because my father's job moved out like a lot of companies did in those days out of London and there were more opportunities for him outside London, so we moved to Hemel Hempstead from London. At the time he was a scientific instrument maker, he changed his profession.

CD: That's a brilliant transition from head chef to--,

PL: It is, isn't it?

CD: To a scientist which is very brilliant. So at what age would you say you left school?

PL: I started school--, I left school what, as a young adult or?

CD: Yes.

PL: Okay I left school--,

CD: I'll ask the question again Phil. At what age would you say you left school as a young adult?

PL: I left school, secondary school, when I was 18, 18 years old after studying for A levels.

CD: What was your first job, if you still remember, after you finished your education?

PL: After I left school I went to college, did an evening class to study for two more A levels 'cause I hadn't done very well at school. I was a very naughty boy. So I got those two A levels and then I went on to do a degree at Kingston Polytechnic, as it was called then, and then I went on to do a Masters at Essex University. So I finally left education probably around 1980/81.

CD: Okay so you'd moved back to Kingston at that time?

PL: Yes. I moved to Kingston to do the degree, I did a degree in sociology.

CD: Okay. And another quick question now, you said that your dad's job moved him around a lot when you were young which obviously meant that you were changing schools. How was that experience for you?

PL: It was fine. He didn't move around a lot really, just once or twice. It wasn't a very difficult transition, it was okay.

CD: Okay. Would you kindly please talk me through your career between your first job and joining Kingston Council?

PL: Well [laughs], my first job--, I had a lot, a series of casual working jobs whilst I was studying for my A levels and some of the time whilst I was studying for my degree, my first degree, so all sorts of jobs, working in factories, building sites, cleaning companies, I was just an odd-jobber [laughs].

CD: Fair enough. Would you please tell us about--,

Q1: Hang on sorry a sec--, So when--, Sorry do you want to--,

PL: I mean do you want to know about my first proper job so to speak?

Q1: Yeah I guess so yeah, and then how you ended up working for the Council.

PL: Okay yeah. So once I got my Masters in sociology from Essex University my first professional career job was working as a research assistant for the NHS in north east London where I stayed for two or three years working with a community physician. So that's a public health doctor. So that was supporting her to research local public health needs within Islington actually. I continued there--, I worked there for about three or four years and then that work brought me into contact with lots of people in communities and I felt I wanted to change my career to move into more social work type--, a more social work type career supporting individuals within a community setting. I think my job at Islington had taught me that communities are very important in supporting people to be independent but I felt personally I wanted to work towards that support, working one to one with individuals. So I applied for a job at Kingston Council as a social work assistant. So starting at the bottom again really and then after two or three years I trained as a social worker so I qualified as a social worker. And then I picked up a job in the, what was then called The Health and Disability Team supporting older and disabled people in the community.

Q1: Can you talk us through what that job involved?

PL: Right, I'll just have a sip of tea [laughs]. Is that okay? Am I answering the questions all right or is it--,

Q1: Yeah. Perfect [laughs].

PL: [sips tea] I'm not sure how much detail you want but anyway. Okay. So when I was at the--, started off as a social work assistant the job involved really supporting professional qualified workers. However I was given my own so-called caseload to work with so that job involved meeting people, assessing their needs as we used to say in the jargon, getting to understand them as people, what their aspirations were, what they wanted to achieve with their lives and supporting them to do those things either through our own services or through other people's services. Developing relationships with people, getting to know them and understand them. Yeah. Is that okay?

Q1: Yeah, sorry to interject again. I'll stop talking now.

CD: No it's all right.

Q1: Could you explain what the relationship between what you were doing in that role and when you first encountered the Independent Living Scheme was?

PL: After working as a social work assistant for some time, probably three or four years, I decided I wanted to qualify as a professional social worker. So I took myself off and did a course, a two year course which you could do in those days because I had a previous relevant degree. So after two years I came back and was lucky enough to get another job within Kingston working as a professional social worker within the Disability Team so specialising in supporting people with a physical impairment or health condition. And at that time two disabled people came on the scene, you've heard of them already but their names were Ann Macfarlane and Jane Campbell who approached the Council and said--, made a proposition really. They didn't want services from the Council, they wanted money to organise their own care and support 'cause they felt they could do it better and they would be more in control of their support and it would help them to become more empowered and independent. So luckily the Director of Social Services and the Assistant at that time were very receptive to this, they were very clued up and switched on with the disability movement and those kinds of principles and they said 'Great, this is a great idea. Let's go for it, let's try this out'. So we set up an experiment, a trial if you like not really an experiment but a trial, to see how it could work and volunteers were asked for and I put my name forward to help develop this new scheme, this new way of working. And that's how I came to be first involved with Kingston Association of Disabled People as KCIL was called then. Do you want me to talk a bit about that or--,

CD: Yes please.

PL: Yeah. At the time it was unlawful to give people, service users, disabled people in the community, money directly from the Council. So to avoid that law but still enable us to provide the kind of support people wanted we, I suppose effectively laundered the money through Kingston Association of Disabled People. It was lawful to do that, so you could pass the money on to a third party, an organisation, and they would pass the money on to those individuals who were part of this we called it an Independent Living Scheme. So it was Jane and Ann initially and then a few more people joined and because we had to set this up in a very proper and transparent way, we had to set up some systems so that people--, we could show, you know, the audit trail of money, where the money was coming from, who it was going to, how it was used. So if anyone asked us we could demonstrate that we were using the money properly, correctly. So I was involved in setting up that, those kinds of financial systems but probably more importantly supporting people to become a good employer, you know, to recruit personal assistants, to manage them, to train them. So I was involved in working alongside Ann and Jane setting up a system that would enable people to recruit people, personal assistants to support them. And we set up various training programmes and a peer support group so disabled people supporting other disabled people to become good employers.

CD: Okay. So aside from you, I know you've mentioned Jane and another colleague, but who else was involved in this scheme?

PL: Another colleague I think who you're going to interview is somebody called Renny Wodynska. So I worked side by side with Renny in the early days setting up this Independent Living Scheme. She was a social worker in the Disability Team at the time so she was very instrumental in this pioneering work. She eventually moved on and I took over running the Scheme myself in the end.

CD: So when you took over then obviously your role changed so what was your role then?

PL: During that time I was seconded to Kingston Association of Disabled People so I was working for this organisation, now called KCIL, and my role really was to develop all the systems and processes and support that people needed to be--, to use these direct payments well for themselves.

CD: Sorry Phil, just to backtrack a bit. About the interviewing process for the people to get personal assistants, do you want to talk us through how the process went and who was involved and, you know, just the interviewing process and the criteria that was used to pick the personal assistants?

PL: Well I offered to support new people on the Scheme to recruit personal assistants because some people felt they were able to do that themselves, felt very confident about doing that and some of them had skills in recruitment and interviewing so they didn't really want any help. But other people, this was a very new role a new thing to do for them so they were very scared about it and needed lots of support. So my role, my job really was to help them devise a job description, just a list of tasks that they wanted that person to do for them, and also a person spec as we called it then, just a profile of the kind of person they wanted to recruit. So I would help them to do that. I would--, working with a disabled person we would devise a little advert together and then I would arrange to put the advert in different places, sometimes in the newspaper, sometimes in shop windows or at the university and if the person wanted I would also sit with the person while--, and support them interviewing candidates for the job. And once they were appointed I would support the person to train them in the job itself but also in a kind of disability etiquette about how to communicate well with disabled people in a respectful and empowering way, how to get the best out of personal assistants, to be a good employer, those kind of tasks really. So this was just an offer, not everyone wanted the full range of support but some did and so I would be involved in varying degrees depending on people's needs and preferences really.

CD: Do you want to talk us through how the Independent Living Scheme worked for a disabled person within Kingston?

PL: How it worked?

CD: Hmm.

PL: Do you mean the kind of operation of it, the mechanics of it or how it benefitted--,

CD: How it benefitted the individuals.

PL: Right. I think the main benefit of the Independent Living Scheme was that the disabled person was in control of their care and support arrangements so they decided who they wanted to support them, they chose the person, the PA. They decided how they wanted to be supported, you know, where and when and what times and they had that kind of authority really. This direct payment--, the Independent Living Scheme gave them that authority to take control and make their own decisions really. Whereas before if you were receiving a service from the Council it's a much more passive thing, you're just receiving but as a user of direct payments you're actually having a really strong say in how things are managed and how they're arranged and you're the boss basically [laughs].

CD: Well I know earlier you said that there were some volunteers that came in to help with the interviewing process, I just wanted to find out if the community was interested in the Scheme from the outset when it was founded. Were they forthcoming?

PL: In the early days it was a very new way of working so it wasn't very well known particularly in Kingston or across Britain. There were other schemes in Britain driven by other disabled people but in Kingston we tried to find different ways to promote this Scheme, to spread the good news about a new way of working where people could have more control over their lives. So we used to have events, there'd be--, we'd design some leaflets and posters, we'd work with social workers because they're the ones who would come into contact first with people looking for help, to promote this

Scheme. A bit later on we invited some TV companies and they did some filming of people using the Scheme and how it benefitted them, they just showed people just enjoying their lives through having this personal assistant to help to support them.

CD: Thank you. Well you did say it was a new scheme within the Borough so did you encounter any difficulties in implementing the Scheme?

PL: Difficulties.... There were some difficulties. Just to focus on the positives for a minute first, it was really good that the Director of Social Services at the time and the Assistant Director were very positive about this. They were very receptive to this idea. If it hadn't been for those two, I think it would have been a big big struggle because even though Ann and Jane started it all off here, if you hadn't had the willingness of the Council to give it a go it would have been much more difficult. As it was, having that Council support made it easier but there were still people within the Council people like finance people, accountants, who were saying 'oh what's going to happen to the money? Can we trust these people?' [laughs]. They were very conservative with a small c, they were very cautious, very apprehensive about what would happen to the money 'what if people just spent it unwisely and didn't use it in a way it was supposed to be spent'. So they were kind of difficulties, they were barriers that we had to overcome. Some of the politicians, the local politicians, were not that positive towards this innovative way of working. Others were so we had to work with those that were and try and persuade those that were less so. They were the kind of difficulties really that we encountered. I say we, I'm kind of using that collectively because I was working with disabled people at Kingston Association of Disabled People at the time so it's the kind of 'royal we' really not me, me, me kind of thing [laughs], it's a collective approach.

CD: Yeah. You've already stated that the Scheme was a success because the founders and the willingness of the Council that undertook the Scheme. So how do you feel the work that was done then has impacted the services today?

PL: Well of course I think once Kingston and to be fair other local authorities, although they were few and far between across the country, demonstrated that this could work very well and it was safe and people were able to gain much more independence through it in Kingston, then that kind of good news spreads and more and more local authorities decided to try this out. And at the time there were very big national campaigns across the country led by the disability movement to have direct payments made lawful. Sorry, I may have gone off the question a bit but [laughs]--, so the success evolved over the years with campaigns, with good publicity, obviously mostly led by disabled people locally and nationally.

CD: You've already touched on the Kingston Association of Disabled People so could you just kindly please explain to us how the direct payments scheme worked?

PL: How it worked in the early days? Okay, well as I say at the time back in the mid '80s I think, it was unlawful to give money directly to service users, people using services, and so the Council would give some money to Kingston Association of Disabled People and the amount of money was based on people's assessed needs for support which was--, that assessment was carried out by a social worker. So the money would be passed from the Council to Kingston Association of Disabled People and they would pass the money on to those disabled individuals who qualified to join the Scheme. That's how it would work.

Q2: So then you had to go through that process but now is it still dispersed in the same way? Do they still have to go through--, before getting to all or is it more direct now?

PL: It's more direct now.

Q2: Okay.

PL: Because it's lawful to do that. It's direct so I'm sure other people will explain this to you but KCIL (Kingston Centre for Independent Living) will support people in the same old ways, to recruit and manage their personal assistants but the money is paid directly to the individual, the same person.

Q1: Where does that funding come from?

PL: Sorry?

Q1: Where does the funding come from? Is it solely from Council--,

PL: It's Council money, well it's public money really but--, and of course this is always, this is a choice people have, they don't have to have a direct payment, they don't have to take control of their care and support because some people perhaps are not--, haven't got the capacity or capability to do that for themselves or they don't want to do that for themselves and then the Council will continue to provide them with services but they would manage all those services on behalf of the person.

Q1: What would the typical needs be of a person who did feel that they wanted to live independently? Was there sort of a--, was it very varied in terms of the types of needs that people had or was there sort of a set--,

PL: I think in the early days it started off with people with a physical disability who--, those people typically would need help with day to day tasks like getting up, getting out of bed, getting dressed, getting ready for work, those kind of activities. But then it's grown over the years to include people with mental health needs, people with learning disabilities, so it's not--, Personal assistants could be involved now more typically with people with mental health needs just helping them get socially connected 'cause lots of people with mental health needs are very socially isolated, so that personal assistant their job might be to support that person with mental health needs to join a club or get involved with a community activity of some sort or help them to get a job or volunteering. It's the same with people with learning disabilities, they might have physical support needs but they might also need help with managing their money for example, understanding information, helping them make decisions in their lives. So it's moved from where it started with supporting people with physical support needs to a more comprehensive, inclusive needs. But that journey continues, I think there is still a challenge around encouraging and supporting people with learning disabilities, mental health issues today. It's improved, it's grown, it's progressed but there's still work to be done to bring that kind of support to those groups of people.

CD: Now that you've mentioned you also reach out for mental health service users, as far as the funding is concerned do you do appointeeship like where someone can receive the funding on behalf of the service user? Do you offer that service 'cause you say that it's more direct.

PL: Yes I mean some people are not able to manage some aspects of running direct payments for themselves so they can choose to have someone in their lives that they know and trust who help them manage those things. It could be their husband, their wife, their partner, their brother, their sister, their uncle, their auntie or friend to help them do that so they may not have all the capabilities to do everything but they can still make decisions and know what they want but they need help from someone close to them to actually manage the operation of the Scheme.

CD: Sorry Phil, so what criteria is used if someone was to appoint an appointee for their funds? What criteria is used to pick them? 'Cause obviously there's issues of--, concerning vulnerability and--,

PL: Social workers would make that decision working with those individuals and they would need to reassure themselves that this person has the capacity to make decisions to choose whoever they've chosen to support them and that the person they've nominated is willing and able to do that. So there would be a process. There are checks around all that, yes.

CD: Okay. So now that you've left Kingston Association of Disabled People what have you done since?

PL: Well I left--, my secondment ended after about 18 months/two years I think and that was back in the '80s/'90s so I left that role and went back into the Council so to continue working as a regular social worker but with that experience I've moved on from day to day social work practice and I've gone into more, I don't know how you'd describe it really, more kind of service development, community engagement, communications role while I was at the Council.

Q1: Do you mind talking us through that career progression between where you are now and that point? I know it was quite a long time....

PL: It is, it is a long time [both laugh]. Long time ago and--, erm, I'm just trying to think what I can say that would be interesting or relevant, erm...

Q1: All of it.

PL: Huh?

Q1: All of it is [laughs].

PL: [laughs].

Q1: Or just maybe what those different job roles were and then what you were doing towards the end of your career I suppose, with the Council.

PL: Hmm. Okay. So with my experience of working--, helping to set up this direct payments scheme I didn't really want to go back to traditional social work, just working with single individuals. However important that work is I felt I wanted to work on a more community basis, more strategically, so I was involved with various jobs across the Council doing consultation engagement work with groups of individuals and communities about how we could develop services to make them more relevant and useful to particular groups of people. Erm... I'm trying to give you some examples but they've left me at the moment. So lots of community engagement type work. Working with not just service users but members of the public and working with other organisations, trying to work more strategically together and in a joined up way because health and social care services are quite fragmented. So that was some of the big issues that were coming forward whenever we asked people about their experience of using health and social care services, was how disjointed it was and how difficult the pathways and journeys were. So I got more involved in service redesign and development and that was really I think rooted in my experience of working with disabled people and direct payments because when you're more in control of things, your own life and services, then you can have a better experience really, it's more fulfilling and I think this is what people were saying when they were coming to us for services that, you know, it wasn't a very satisfying experience 'cause although some people got some of the needs they had met, they had to go to different places for

different types of support. So at the moment and whilst I was at the Council I was trying to find, we were trying to find ways of actually bringing all these different services together and having a single, it's a bit jargonistic, a single point of access for people so they could all come into the same way and get a more holistic approach to their needs as people, not just body parts or, you know.... [laughs].

CD: So would you say that was achieved then, the galvanising of the many fragmented--,

PL: Yeah and I think it all stems from this, you've probably heard it before, this social model disability about looking at the person in their community and how the traditional medical model is about looking at people--, bits of their body and their bodily functions whereas disabled people and other people know that it's not just about their health conditional disability but it's how the environment disables people, how it or the barriers that people face is the issue just as much as their health condition or disability. It's the social world that disempowers people and how things are organised really. So that--, this more recent work I've been involved in, it stems from that approach really about looking at the whole person in their community.

CD: That's brilliant. So would you say then how has that been impactful, the holistic look, when you're looking at an individual as a person other than their condition, so how would you say, you know, when you're weighing out the two, how would you say that it has impacted the individual that--,

PL: It's quite a difficult way of working because the way we are, the way we're organised, health and social care services are organised in very separate camps and we've each got our own organisational cultures and processes and systems so it's really hard to get past that and just think about the individual. And that's going to take some years to achieve I think. But the essence of it is really understanding the person and their--, what they want to do with their lives, what their aspirations are. Not just saying 'do you need help to get up in the morning', you know, 'do you need help to wash and dress'. What is that about? What do people really want support with? What are they trying to achieve and maybe getting up in the morning is part of a step along the way but it's not--, people don't live and exist just to get up in the morning do they so it's--, we need to change our vision and that's what's happening now I think across health and social services.

CD: And quickly Phil, just to backtrack to the community based care that you were later involved in 'cause it's a scheme that the government is trying to go into especially with mental health, so where the services are better catered for within the community before they come into the services so how would you say--, would you say that is--, has that improved, the quality of care to the individuals involved that you're working with?

PL: I think health and social care in Kingston and elsewhere are trying to change the way they do things, change the way they approach things, looking at--, again looking at people in their communities and what they need to stay healthy and well and independent. Not wait until they get ill or they need lots of help but actually how do you support people, how do you prevent people getting unwell or sick or homeless? So the focus is moving way down the river really towards where issues start and problems start in the community, in society. So that's, certainly in Kingston, that's the new approach really is to try and redistribute resources towards the community prevention end of the spectrum and not--, try and avoid people getting unwell and needing a lot of support in the first place or actually delaying that time when they need help. And when they do need to come to the Council or to the NHS for services they have a really good experience and it's easy for them to get the right kind of care straight away. But it's really changing the balance towards prevention, supporting people to stay independent.

CD: You seem to have done quite a lot within the Kingston Borough and I would love to thank you and applaud you for your contribution within Kingston but quickly what would you say has been the proudest achievement from the work that you've done within the Borough?

PL: Oh gosh. Erm, I think helping set up the Independent Living Scheme all those years ago back in the '80s, I think that was erm--, [coughs] even now you can hear it in my voice I'm really emotional, I'm really passionate about it because it was such a good thing to do and it was the right thing to do and erm--, I'm going to have to take a moment.... [laughs]. I think a lot of good things have stemmed from it. So that's, that's--, yeah, that's my proudest involvement I think, just being involved with that [laughs].

CD: Thank you very much. What are your thoughts about the current state of disability support, the system now compared to then when it all started?

PL: I think it was always difficult, it was always a challenge to do things differently back in those days but at least we had more resources to do it. There were more ideological barriers then but now the issue of resources is quite--, is very very challenging and it has some positive results I think probably people are trying to do more with less to use the jargon, but that's really really hard. But I think the philosophy has changed a bit more now and it's more towards empowering people but we still need-, you know you still need social services, you still need health services because people still get sick and ill, they still have accidents, still find themselves out of work and not being able to afford housing, so they're kind of worrying times I think but there are opportunities there as always [laughs].

CD: So projecting into the future, obviously you've started a good thing so what would you hope to see, the future of supporting disabled people within the Borough?

PL: I think it's really all about just keep on focussing on the person, the whole person and just empowering them to live their lives the way they want to, supporting them to live the lives they want to. That doesn't mean abandoning people, the individuals, but really getting a good understanding of what all the individual and social forces at work within that individual's life to really bring them together so they can live a fulfilling life really, like we all want to live [laughs]. And that's the challenge and I think with the very limited resources we have to work with that's going to be really really hard, I think. Probably didn't answer your question did it?

CD: Yeah it did.

Q1: Would you mind just explaining where--, what your job was at the end of your time at the Council and what you're doing now as well, just so that we've got that.

PL: Yeah I can do but I don't know if it's going to be relevant to you. I mean, what--, there have been a number of changes, reorganisations within the Council and I was caught up in one of those big changes and I was taken from adult social care and put in this corporate communications team which I didn't really enjoy or was very good at so I managed to find my way back into adult social care and I supported this programme called the Kingston Co-ordinated Care Programme which--, and I think this relates to what I was talking about earlier to you about really bringing together health and social care services for people so it's much more joined up, easier and more satisfying for people. So that means reorganising services, changing people's belief systems, cultures, ways of working and that was a very big programme that will probably take years to fulfil its ambitions but that was the last programme I was involved in before I came here to KCIL to help them.

CD: So it's a programme that's currently running?

PL: It is currently running, yes.

CD: So now that you've left, who then has taken over?

PL: I wasn't doing it all myself [laughs], I don't want to create that impression [laughs]. There were obviously lots of people involved and other people have obviously stepped in and are supporting the programme but it's quite ambitious and it's quite difficult to achieve all these things and, you know, things get in the way like elections and budgets and it's really hard to keep on track. It doesn't tell you very much but how much of this is going to be used 'cause some of it, what I've said, is a bit controversial so--,

Q1: Anything that we use publicly, you will have approved first, if that's okay?

PL: Yeah, yeah.

Q1: So what is your current role here back here at KCIL?

PL: So I left the Council, I took voluntary redundancy because the alternative was not very nice, I didn't want it [laughs]. So I left and I think Lisa at KCIL found out I was available and approached me to see if I could fill a few gaps within the organisation, people having left, going on maternity leave. So I'm filling in a few gaps and supporting the organisation in the most helpful ways as I can really so probably around some of the work I used to do in the early days of the Independent Living Scheme, making sure people are getting the right support so maybe doing a bit of monitoring, quality assurance work, trying to publicise what the organisation is doing, improving its profile in the community although it's got a good profile but there's always scope to do more, make improvements I think. So that's how I'm going to help KCIL and I think my role will evolve, I'm just--, I think we're both testing the waters to find out how best I can help [laughs].

Q1: How does it feel now that you're back?

PL: Feels great yeah, feels really good. Yeah. It feels like going home in a way, you know that feeling, it's great [laughs]. I feel more comfortable working in this sort of setting. It was always a bit difficult in the Council because you're kind of--, there's almost a conflict of interest. You know, you're divided between--, you know, you're an employee of the Council but really my focus, my head, my heart is with the public and disabled people and often those ideals can clash and conflict so it can be a dilemma [laughs].

CD: Okay. So now we've pretty much got to the end of our interview but I just wanted to find out if there's anything else you would like to mention that maybe I didn't ask?

PL: I can't think of anything really [laughs]. I've probably said too much [laughs].

Q1: I think we're done then, thank you very much.

[END OF RECORDING – 0:51:32]