

Law Society Education Podcast

May 2021 Transcript

00:02 Eman Hassan

Hello listeners and welcome to our May edition of the Law Society Education podcast. I am your host Eman Hassan and I am a solicitor at Fieldfisher. In this month's episode, we will be introducing two different chapters.

00:12 Eman Hassan

In our first chapter, I will be speaking with two panellists from the Law Society's Mental Health and Disability Committee: Sheree Green, and Jennifer Nwachukwu. Sheree and Jennifer will talk about the evolution of mental health law in the UK, including concerns about the limitations of the Mental Health Act 1983 and the recent developments around the release of the Government's White Paper.

00:33 Eman Hassan

In our second chapter, Tracey Alexander, the Learning and Career Development Coordinator at the Law Society, will be speaking to Ngozi Adi, who is a "back to law" ambassador. Ngozi will talk about her experience while trying to return to the profession following a career break.

00:52 Eman Hassan

We are very honoured to have with us today two fantastic panellists who will be joining us for a very insightful conversation. I'd firstly like to introduce Sheree Green, who is a director at Greenchurch Legal Services and is also a mental health solicitor. She is also a professional Court of Protection Deputy for those who do not have capacity to manage their own financial affairs.

Hi Sheree, thank you for joining us today.

01:17 Sheree Green

It's a pleasure to be with you, Eman.

01:19 Eman Hassan

Thank you, thank you I. Next, I would like to introduce Jennifer Nwachukwu, who is a Senior Solicitor at Bevan Brittan, who specialises in health and social care law and regulations.

Hello, Jennifer!

01:30 Jennifer Nwachukwu

Hi, thank you.

01:33 Eman Hassan

Thank you for joining.

01:35 Eman Hassan

I would like you guys to start off, please, just by introducing yourselves but more on giving a bit more of your background to our listeners. Sheree, can I please start with you?

01:42 Sheree Green

At certainly yes. I, like Jennifer, am a member of the Law Society's Mental Health and Disability Committee. For my own private practice, I've represented patients who are detained under the Mental Health Act now for many years, probably far too many to actually start to count. I also work with people who have impaired capacity.

02:06 Eman Hassan

Brilliant. Thank you, Sheree.

02:08 Eman Hassan

Jennifer, can you provide our listeners with some background on you please?

02:12 Jennifer Nwachukwu

Yes, sure, thank you. So, I'm a Senior Solicitor at Bevan Brittan but prime I specialise in healthcare regulator, also representing trusts and CCG, so many organisations. But, prior to working for that firm, I was a patient lawyer. I am specialising in mental health and mental capacity law for quite a few years. I'm also an assessor for the Mental Health Accreditation scheme as well.

02:36 Eman Hassan

That's fantastic. Thank you both.

02:38 Eman Hassan

So let's kick start our conversation off, if that's okay. Sheree, can you give our listeners a brief overview of mental health and what it covers when we talk about it from a legal perspective, particularly in contrast to mental capacity?

02:52 Sheree Green

When we have a physical health condition, we're often very happy to seek out treatment. If we have a mental health condition, again, very often we're happy to seek out and received treatment. Most people will agree with the doctors in relation to a physical health course of treatment. When it comes to mental health, it's fair to say that there are some people find that they are believed by medical professionals to be experiencing mental ill health, but maybe they don't agree with that assessment or they don't agree with a mental illness diagnosis given to them by the mental health professionals. Again, it's fine to disagree. It's fine for people to have different views. But there are occasions when the medical professionals believe a person is mentally unwell, that they need treatment and - most importantly - if they don't get that treatment, then either that person's health or their safety will be seriously compromised. Or, more rarely, others may be placed at risk.

So, we have at the moment the Mental Health Act 1983 and that's the legal mechanism currently in place to manage that situation, and there are strict legal procedures for professionals to follow. If a person is very mentally unwell, they need treatment, usually in hospital, and they are not wanting to work with that, engage with that, they are refusing at to be admitted to hospital; it's a process whereby that person can be detained in hospital or we call it being sectioned in hospital. And, in that situation, people can be treated in hospital for mental illness even if they don't consent either to being there or consent to having the treatment. So, the same Mental Health Act 1983 also gives people a mechanism of procedure to appeal against being detained in a psychiatric hospital and to be resourced and be supported to do that.

So, we've got this act which is taking away a person's liberty on the one hand, allowing doctors to impose treatment without their consent, which can be a very distressing process and experience, but it may mean, on the other hand, that the person is restored to good mental health.

05:25 Sheree Green

So, mental capacity is about being able to make decisions for yourself, understanding information, weighing up that information, and coming to a conclusion. It is all about understanding. If we look at physical health issues again, if a person's got mental capacity to make their own physical health decisions, they make their own physical health decisions. So, if I have capacity to decide for myself and I don't want a particular form of treatment for a physical illness, then that's it. It's my decision to make.

Under the Mental Health Act, though, even if I have capacity - understanding - in relation to our mental health needs, if am detained under the Mental Health Act, I can still be given the treatment that I don't want. So, you know, we've got an act that's 40 years old almost... many developments in psychiatry since it was actually implemented, and so we are right now for change, we need to shift the dial, we need to move legislation forward, so that much greater respect for patients' dignity and patients' ability to choose for themselves and ensure nobody is detained in hospital for treatment unless it truly is the last resort.

06:43 Eman Hassan

That's very helpful, thank you. Just in your view, what why does the law have an important role to play then, when we talk about mental health in this way?

06:51 Sheree Green

Because it's important that people are not arbitrarily detained and deprived of their liberty. There has to be a lawful process to actually comply with the Convention on Human Rights. But again, it has to also have protections within it, and the law provides the protections for detained patients because, you know, I can appeal to a tribunal, I will get free legal aid, second opinion doctors. It's a very clear legal framework which can then be followed by medical practitioners and provide options and real rights of appeal for patients as well.

07:32 Eman Hassan

Absolutely. That's really helpful, Sheree. Thank you so much for that.

Jennifer, if I could pass on to you now... in your opinion, what is the role of mental health solicitors in safeguarding and supporting vulnerable people?

07:43 Jennifer Nwachukwu

It's my view that a mental health solicitors play a vital role in safeguarding and supporting vulnerable people. I'll just talk you through some of them. So, solicitors help in reviewing whether the patient is lawfully detained. So, dissection papers are essentially the statutory forms which need to be completed and processed correctly

to ensure that patient is detained lawfully. Again, as a solicitor, make sure you're reviewing that and making sure that they are lawfully detained, and if they're not, then if there is an error, seeing if it can be rectified; and if it can't be rectified, then you possibly have an action regards to that patient being unlawfully detained, and then you would have to take appropriate action in regard to that.

Another safeguard is that - I think Sheree mentioned it - about device until about the rights to appeal, about tribunals as well. So, is that solicitors can ensure that the continued grounds for the detention are reviewed - appropriately reviewed - so, and that's why a representation at the Tribunal or at the hospital managers hearing and just making sure that criteria is appropriately reviewed and put in submissions and asking relevant questions as well to the professionals who are normally involved in that case. And in regards to tribunals, so, a tribunal is essentially a court, and until Covid, it was held in hospital. It consists of a panel, which is essentially a legal person - so senior lawyer or the judge - and then you have a doctor as well, and then you have a lay person who has adequate experience in that area. So, they hear evidence from professionals involved in the case. So, those professionals will generally be a care coordinator or social worker - so that's the patient care coordinator or social worker - and it would also be there consultant as well. And also if they are detained in hospital then it would be a nurse as well. The panel would hear evidence from those professionals and would also hear evidence from the patient - if the patient wishes to give evidence as well. And then they will decide whether that patient should be discharged. So, the importance of having representation is that: 1) this is non-means tested, so you are entitled to non-means tested legal aid - so everyone can get that representation regardless of their financial circumstances - and solicitors (they) are present to make sure they're asking appropriate questions to make sure that they're - you know - putting the clients concerns to the panel.

I know my experience is that patients do get discharged from tribunals or sometimes recommendations are made as well. Also, on occasions where the patients are not discharged from the tribunal, they feel that their voices are being heard. I would often have patients - when I was representing patients at the time - and he would dress up for the occasion, they would have had many meetings before going through the imports, going through the evidence... and to them is important because they have been deprived of their liberty, this is an opportunity for an independent panel to consider whether they should be discharged, so is an important light, and it's important that they have that representation. So that's why I said that's that is an important safeguard.

Hospital managers is very similar to tribunal is only that it's less informal and is instead of having a panel that consists of you know, a layperson, a doctor and a lawyer, it is generally just managers from the hospital and they can discharge a patient as well. In my experience, they're less likely to, but it does happen and again, it's an important safeguard.

Well, another safeguard that I found is just that, when you do meet a patient, often they would have other issues as well. When I would see a patient, this might be the

first mental solicitor that they've instructed, and then on those occasions, when I've taken their instructions, then it might come to light that they might have maybe a family legal matter, or maybe a criminal legal matter, an immigration legal matter... so, again, it's important that, on those occasions, I would refer them to relevant firms or relevant information. So, again, that's an important safeguard as well.

12:11 Eman Hassan

That's great, thank you so much, Jennifer.

Sheree, I'm gonna come onto you, if that's okay now. So firstly, can you tell our listeners a little bit about the white paper, if that's okay now.

12:24 Sheree Green

Yes, certainly. So, the government has been committed to reviewing our mental health legislation for a number of years. And an independent study was set up, chaired by Doctor Simon Wesley to take soundings from patients, patients' families, medical professionals, judiciary representative, charities, all sorts of organisations who support people who may experience mental ill health. That report came out and it made well over 100 recommendations for change. But then earlier this year, the government issued a white paper called "Reforming the Mental Health Act", which any of the listeners can download from the Internet. And that is the government's response to this detailed independent review. And it's fair to say that many of the recommendations made by the independent review are picked up in the White Paper, which is good news, but a lot of work needs to be done to make sure that the new act that we eventually do receive is fit for purpose, fit for our modern age and treats people fairly and equally.

13:48 Eman Hassan

That's great. Can you just tell listeners how the attitude towards learning disabilities and autism has changed overtime and how is this addressed in the White Paper?

13:59 Sheree Green

At the moment, learning disability and autism are both within a very long and non-exhaustive list of mental disorders, along with things that people will be aware of: depression, eating disorders, schizophrenia, et cetera actually within the 1983 Mental Health Act. Currently, there's a little bit of an adjustment for people who just have a learning disability. At the moment, they can only be detained under the Mental Health Act if that learning disability is associated with what the Act describes as "unusually or abnormally aggressive or seriously irresponsible conduct". The problem is, of course, is that learning disability and autism are lifelong conditions.

They're not illnesses that can be removed through treatment. Of course, many people have another mental ill-health problem as well. They may have a learning disability and depression, and there may be being treated for depression, which is a standalone mental illness.

I think the important thing though is that many people with learning disabilities have spent a long time detained in hospitals for not just no obvious benefit, but in many cases, real detriment. People may remember the Winterbourne View scandal, which uncovered abuse in a registered hospital with people with learning disabilities. That was over ten years ago now. And people with learning disabilities are still finding themselves as long-stay patients in hospital. So, in a way, the Mental Health Act has been used really because the right support was not available in the Community. And so, this has happened and a hospital bed seems the only option in that crisis. So, going forward, what's really important is the need for good quality support, excellent services being available to people with learning disabilities, with autism, right where they live; so that this crisis situation does not arise and they don't find themselves in a psychiatric hospital bed.

But going forward, the question is "should people with learning disabilities and autism be taken out of the Mental Health Act all together"? Now, that's not the proposal put forward by government in the White paper. They are proposing changes, but not wholesale removal. So, for example, one of the changes being proposed is that a person with a learning disability or autism can be detained in circumstances where their behaviour is so distressed that there is a substantial risk of significant harm to them or to somebody else and a probable mental health cause. So, they're restricting the passageway into the Mental Health Act for people with learning disabilities or autism.

There are other changes as well proposed, but I think that the important thing to think about is that if we remove people with learning disabilities or autism out of the mental health legislation, that doesn't necessarily stop them still being detained in hospital. If a crisis occurs, it could mean that they are detained under another act, probably the Mental Capacity Act 2005. Some people with autism or learning disability may actually say that they would prefer that because people feel still that there is a huge stigma around being detained under the Mental Health Act.

17:56 Eman Hassan

Well, that's....

17:57 Sheree Green

But for my part, if it was me - and I can only speak for myself - is that I would prefer to be detained under the Mental Health Act rather than the Mental Capacity Act because I would want the safeguards that Jennifer's talked about at length. There are safeguards that come with detention under the Mental Health Act that are not available if you are detained under the Mental Capacity Act. Jennifer's talked about

tribunals and legal representation. You know, there's also the right to an independent specialist advocate, and there's the right to have your treatment reviewed by a second opinion Doctor. So, personally, I see the benefit in detention under the Mental Health Act.

I say there's going to be a lot of debate as people look at the white paper: what it was the right way forward for people with learning disabilities or autism, and you know it's going to be vital that we hear from people with learning disabilities and with autism, who had lived experience who can share their views, cuz that's what's a person with learning disability think about that.

But, overall, the good news is that the White paper shows that government is committed to reviewing how services are set up for people with learning disabilities and autism, committed to reviewing the commissioning process and health authorities and local authorities work together because I hope we would all agree that better community provision is going to be the key to the right outcomes for people in this particular situation.

19:39 Eman Hassan

Absolutely. That was brilliant. Thank you so much Sheree for that. I think it's going to give our listeners a lot to think about. I couldn't agree more with what you said, really, really interesting. Thank you.

Jennifer, the White Paper did confirm a racial disparity. In your sort view, what do you believe are the reasons behind this? And do you think they've been properly addressed?

19:59 Jennifer Nwachukwu

It's important to note that, according to the White paper, racial disparity is not just regarding Community treatment orders, but detention in general. And also there is a distinction between ethnic groups. So according to the white paper, adults of Black African Caribbean heritage are more likely than any other ethnic groups to be detained under the Mental Health Act. And there's quite a lot of data included in the White Paper. So, they have said black people are more than eight times more likely to be on a security treatment order and more than four times more likely to be detained than white people as well. So, the reason I just said that it's just that it's not just in regards to Community treatment. Although it's a lot wider, yeah.

20:42 Eman Hassan

It's a lot wider than that?

20:44 Jennifer Nwachukwu

I'm just in terms of whether "what do you think the reasons are behind?" I think it's really is very complex and the White Paper will also review which predates the White Paper really states that they have said that it is quite a complex matter. I know I agreed that one of the points they said is that there's a lot of inner qualities with regards to access mental health services well before the person is detained, and also a data shows that people of Black and Caribbean heritage are more likely than white British people to come into contact with mental health services through the criminal justice system rather than the GP referral than their white counterparts.

21:28 Jennifer Nwachukwu

But there's also cultural and religious factors as well. People from Black and Asian minority ethnic backgrounds may engage with services later, but this could be because of perceptions within their communities. For example, in recognising mental health problems early on, levels of associated stigma - and I know that's something that Sheree mentioned before - distrust in mental health services. I know I'm a few years ago I went to a conference on how the Church, particularly predominantly black churches, should address mental health issues. Those involved in the conference did recognise that in some cases the church can contribute to the stigma, but they recognise that they had to do better and encourage issues in regards to attending therapy and seeing professionals when needed to try and alleviate that stigma in regards to that.

22:20 Jennifer Nwachukwu

Also another issue it in regards to what the reasons are is just that maybe people of black and Caribbean descent all are treated differently in regards to more reliance on medication. There's also been data that shows that black British people also experience poorer outcomes, so maybe restraint is used more as well.

22:45 Jennifer Nwachukwu

And I think the Third point up is just a whether the white paper addresses this. My answer to this is, in my view, I'm not sure. And I think it really has made efforts and I'll speak a bit in a bit more detail about some of the recommendations in regards to it. But I think some of these issues are very deep rooted as well. Some of the recommendations have been very helpful, so I think one of the recommendations is that ensuring that and the provision of culturally appropriate advocacy services. So, that includes independent mental health advocates - as I think Sheree mentioned - and so making sure that they're more from similar backgrounds, ethnic backgrounds as well. I think that's a good idea. I know in the past when I've represented patients, sometimes that's had been a concern of patients that "the people who are looking after me, the people who are supporting me do not maybe look like me" and that has been a concern. I think it is good to have to have, you know, advocates that are

more of ethnic minority backgrounds. It's a good idea, but it's also important that fit that sufficient funding is in place in regards to it.

23:53 Eman Hassan

Of course, yes, absolutely.

23:54 Jennifer Nwachukwu

And another one recommendation is that raising the bar for individuals to be detained under the Mental Health Act, as well as subject to Community treatment order. So, the purpose of that is that if you raise the bar in regards to that because - specifically black - but other ethnic minorities are overly represented in the mental health system, then it should then trickly down because the bar is higher and, as a result, there should be less people detained, including black and ethnic minorities as well. So, I do see the reasoning from that. But again, only time will tell, because it's that you're not sure whether it will just trickle down to another part of the mental health system.

24:36 Jennifer Nwachukwu

Then another recommendation is just seeking greater representation for ethnic minority background; so, making sure that it's more diverse and so again seeking representation in regards to that. And, as I mentioned before, I think that is, again useful and a sensible recommendation, but again funding is a huge issue in regards to that and also does it go far enough as well? I know that often people patients I have represented in the party maybe complained that the Tribunal, as I mentioned before, is not diverse enough then and that's not just in terms of colour, but maybe in terms of age and gender as well. Again, it probably needs to extend further than that, but in answer to your question, I know there was quite a few recommendations. I think it's a good start. Again, funding needs to be in place and I think time will tell. We'll see. We'll see if it will actually address these issues.

25:35 Eman Hassan

Absolutely. As you said, it's one of those things that only time will tell. It's such an interesting and wide topic to discuss that we can speak about this all day really and it was really, really good to hear from you both. And then just ask you both the same question - a final question, if that's okay.

Sheree, I'll start with you. What advice would you give to solicitors who are representing vulnerable clients who might be experiencing difficulties with their mental health in general?

26:06 Sheree Green

I think vulnerability is a funny word. Sometimes we think of vulnerability is talking about other people, it's an "otherness", but actually any of us can be vulnerable if the stars align in a particular way. And so, I think it's being sensitive to all your clients, but particularly your vulnerable clients. To make reasonable adjustments, to be aware of the fact that you know, they may find the lawyers way of working quite stressful, to be prepared to meet somebody in a venue where they feel comfortable at a time, when they feel able to, you know, to give of their best and actually not to be too prescriptive.

Obviously, you know, we're not doctors, we're lawyers; if we feel somebody is suffering mental ill health, then we can advise and direct them or suggest that they seek medical advice. I think it's difficult because we also have to respect confidentiality and respect people's autonomy. So, I think it's being sensitive, it's being open, it's being willing to engage, really. It's just trying to be a good human being as well as a solicitor.

27:29 Eman Hassan

That's great, thank you. And Jennifer, what about you? What would your advice be?

27:33 Jennifer Nwachukwu

Hmm, very similar to Sheree. I think it's just important to care and just to do your research as well, I think it's just helpful. So, if the individual has particular vulnerabilities, maybe that's something that you could maybe... if you're able to find out before and as a result you can make suitable adjustments as well, so that could be: where we are able to see a clients that could be in terms of making sure the room is suitable for them, and making sure the light and just all those little things like that. But I think essentially the most important thing is just to just know your audience and just to care as well. Yes, you are there to do a professional job as well, but these people are vulnerable and it is important that you care and make sure you do the best for them.

28:19 Eman Hassan

No, thank you so much for being on here to both of you. You've been absolutely brilliant, so thank you. Thank you to our listeners as well and remember to be nice.

28:29 Eman Hassan

It's now time to introduce our next chapter which will be facilitated by Tracey Alexander from the Law Society.

28:37 Tracey Alexander

I'm Tracey Alexander and I'm the learning and career development coordinator at the Law Society .

28:42 Tracey Alexander

Today I'll be speaking to one of our back to ambassadors Ngozi Adi about her journey back into law after a career break.

Hi Ngozi can you give us an introduction and tell us a bit about yourself?

28:52 Ngozi Adi

First of all, I salute anyone listening to this podcast and I hope you will take something away from it. I qualified along time ago as a barrister and solicitor in a foreign jurisdiction and re-qualified here in the UK in the early 2000s. This was under the Qualified Lawyers Transfer Scheme known as the QLTS for short. This is a College of law BPP managed exam. In terms of what I do now. I am currently a non-practicing solicitor and I regularly attend online and offline events including diversity and inclusion events.

29:28 Ngozi Adi

As a strong advocate of diversity and inclusion in the profession, I would also do any administrative or legal work that come my way, but I must add that my return journey has been stalled by the impact of the pandemic. Just like you know, a lot of other people have been affected.

29:44 Ngozi Adi

Based on requalification, my level of PQE should be somewhere between entry level and 1st year senior level before my career break. I was a young lawyer in the jurisdiction where qualified and I worked in law firms. Where I assisted senior lawyers with casework on like debtor creditor issues land matters, assault and battery cases, amongst others.

30:08 Ngozi Adi

I took my career break to travel as a British citizen to the UK to work within the legal profession here.

30:15 Ngozi Adi

By taking the qualification exam as I mentioned earlier, I took the first practical step towards working in a profession in the UK. My career break has lasted up to 12 years or more.

30:27 Tracey Alexander

Excellent, thank you so much Ngozi for giving us that succinct introduction. I'm just going to ask you if you faced any hurdles when seeking employment when he was returning to law.

30:37 Ngozi Adi

I did. Some of the unwarranted hurdles I faced soon after qualification where, for instance, the fact that I was informed by a recruiter who was assisting me that she was experiencing problems with African degree certificates and what this meant was that employers were reluctant to consider such certificates for the purpose of employment. I mean some employers.

31:01 Ngozi Adi

Consequently, she was unable to assist me on that basis. I also notice whilst visiting Law firms and agencies that there were recruiters and managers in these entities who already had, in their minds a view of the type of people they wanted to employ.

31:18 Ngozi Adi

I believe I was rejected by such people because I did not fit the mould. For instance, I tried more than once to book an appointment with the managing partner of an established high street firm but failed to do so after I visited the firm more than once, the managing partner of the firm did not appreciate the fact that I am a professional colleague.

31:39 Ngozi Adi

No reason was given for the failure to book the appointment for me. Again, some people I met during networking sessions who appeared to be nice during those sessions and willing to help disappointed me when I eventually got in touch with them after those networking session.

31:56 Ngozi Adi

In other words, they ceased to be reachable as you could call it approachable. A good example arose from a Law Society annual general Meeting, which I attended shortly after re qualification. I stood on the podium and made my speech on recruitment problems I had been experiencing as QLTS solicitor to a room full of lawyers, some of whom I gathered did not at the time, know what the QLTS was all about. Thereafter a solicitor gave his card to someone I know in the audience to give. To me, he wanted me to contact his firm afterwards. However, when I did so subsequently by phone, several times, guess what?

I was not well received and I had to drop that contact. I did not get to the stage of submitting my CV so this was not based on my CV assessment of my CV at all. So there are more examples. However, the given examples may appear simplistic but when put together, you know over the years have been formidable. In contrast, I would say though, they would have been Employers who rejected my applications for legitimate reasons, such as lack of experience.

33:09 Tracey Alexander

Brilliant, thank you so much and I think many people listening to this will be able to relate to some of those sorts of challenges that you faced and were there any resources or networks you found helpful in aiding or return to the profession?

33:21 Ngozi Adi

I found and still find networking events to be extremely helpful to me for It was doing one of those sessions that I received the offer to become a back to law ambassador. The rest is history. I attended one of the law society's returner courses, with the support of the SBA, the Solicitors Benevolent Association and I would advise any returner to do the same. I also find webinars and seminars to be extremely useful to me. Like I mentioned earlier, it was during one of these kind of sessions that I became a back to law ambassador, but in terms of just the webinars and seminars, I also find them to be very useful with regards to law areas because I find them to be educative and through these events I gather materials for future use in different law areas such as contract employment, arbitration amongst others.

34:20 Tracey Alexander

That's great, did you face any challenges once you had returned to the profession, and if so, how did you overcome them?

34:25 Ngozi Adi

As I have indicated, I'm still on this journey of returning but for my limited experience I felt daunted at times, not by the work itself, but just being anxious about the protocols involved.

34:38 Ngozi Adi

What I can go along with, however, as soon as I became enmeshed in the tasks at hand, that ship never operated.

34:46 Tracey Alexander

Excellent. What do you wish that you knew then that you know now?

34:50 Ngozi Adi

With hindsight, I must, I must admit I wish that after I experienced employment hurdles soon after re qualification, but I remained fixed on looking for legal work continuously regardless.

35:04 Ngozi Adi

Rather, what I did was fall back on what I was doing in the administrative sector and became engrossed in my work in that sector.

35:13 Ngozi Adi

In effect, my search for legal work was largely done in the gaps in between my different administrative roles. I went back and forth looking for work in the legal sector over the years. and at some point also did an advanced legal course. My return journey as a result became elongated partially because of that reason it was only listen years that I became more focused on various aspects of my return journey whilst retaining administrative work alongside it where possible, but I must be clear that during those times that I focused on looking for legal work, I did so effectively.

35:51 Tracey Alexander

And finally, can you provide one last tip for those considering returning to law?

35:56 Ngozi Adi

Whilst I encourage people to attend networking events as well as to gain fresh knowledge and skills, my next big advice to any returner is to focus on looking for legal work continuously. Once they decide to return, do not be distracted by any work you are doing for economic sustenance or for any other reason. Ensure that you embark on your back to law journey.

36:24 Ngozi Adi

Alongside any other activity you have on hand. So, for instance, if you're raising a family and you decide to return to the profession, you need to strike a balance between doing what it takes to return and dealing with family commitments at the same time, I hope I've made some sense.

36:43 Tracey Alexander

That's great, thank you for your useful tips and insights Ngozi I'm sure that many people returning to law will find your tips helpful.

36:51 Ngozi Adi

Thank you for having me.

36:54 Eman Hassan

Thank you for listening to the Law Society Education podcast. Stay tuned for our next episode, which will cover another hot topic in the legal profession and legal education. Thank you.