



The case for stopping charges for the debt and mental health evidence form

People in debt crisis who have mental health problems are being charged by their doctors for medical evidence they need to send to their creditors. This needs to stop.

If you have a mental health problem that affects your ability to pay your bills, your creditors will often ask for medical proof. The creditor industry and advice providers like Citizens Advice have agreed a single form - called the Debt and Mental Health Evidence Form - which people can ask their doctor or another mental health professional to fill out. Once creditors have received this form, they often offer easier payment terms, cancel charges or interest, or may even write some debts off altogether.

But new research by Money and Mental Health reveals up to a **third** of people who need this doctor's note to send to creditors are being charged for it - even though they are in serious financial difficulty. And without the completed form, creditors often press on with enforcement and a debt problem spirals into a crisis.

Money and Mental Health is campaigning to stop charges for the Debt and Mental Health Evidence Form.

The evidence:

Money and Mental Health conducted a survey of nearly 5,500 people with mental health problems in spring 2016. Respondents told us that:

- **Three in ten (30%)** of those who were asked to provide evidence of their mental

health problem who had seen a healthcare professional in the last 24 months **were charged by them to provide this evidence.**

- **Almost all of those charged for evidence (94%)** believe their financial situation made their mental health problems worse. It's likely charges by medical professionals therefore caused further mental distress.
- The vast majority of those charged had incomes of less than £300 per week; **4 in 10 had incomes of less than £200 per week.**

Further research conducted in summer 2016 with those who have been charged revealed:

- The amount charged was as high as £150 in some cases.
- Respondents from across almost all regions of the UK reported being charged for this form, suggesting it is not an issue localised to one particular region or number of NHS trusts.
- Respondents also told us this often unexpected charge had several impacts on their finances and emotional wellbeing including:

1. Making it harder to buy essentials,
2. Having to borrow money to pay the charge,
3. The unexpected cost causing further financial difficulty, debt, depletion of savings and 'financial distress'.

“I was on basic ESA, waiting for a benefits assessment to find out if they thought I was fit to work, so I was on really low benefits.

Paying £20 for the doctor's note had a really big impact, it was a big chunk of the money I had left that week. I didn't expect them to charge me. I was going to go to the shop after my appointment to get food, but after the doctor's I didn't have any money left.

Until my benefits came in I couldn't afford fresh food, so had to live on dry pasta and the things in the cupboard.”

Ian, member of Money and Mental Health's Research Panel

Why this matters:

The link between debt and mental health problems is profound. Half of those in problem debt have a mental health problem and a quarter of those with a mental health problem are in debt or financial difficulties¹. Mental health problems can make it harder to earn or manage your money, while debt can be stressful and have a profound impact on people's mental health.

When someone in financial difficulty needs forbearance from their creditors, the Debt and Mental Health Evidence Form can help. Initially introduced in 2008, and updated in 2011, the form was developed by the Money Advice Liaison Group and the Royal College of Psychiatrists and is recognised by the Lending Standards Board². In an evaluation published in November 2011 the Royal College of Psychiatrists reports that, in one example creditor organisation:

“About two-fifths of DMHEF forms submitted ... led to the debt being written off. About a third ... led to a temporary hold in collections and a fifth led to a repayment arrangement being agreed.”³

Supporting mental health recovery:

Debt and financial difficulty have been shown to dramatically reduce the chances of recovery from common mental disorders.

Clinicians working to support recovery of those with mental health problems should make every effort to help remove social and environmental triggers of poor mental health, including financial difficulty. Completing a DMHEF could help resolve someone's debts and improve their mental health.

By contrast, charging for completing the form could worsen debts and cause mental distress. If the charges are high, many people with mental health problems will be unable to pay, and their debts could go unresolved. This could reduce the chances of recovery from the mental health condition.

What needs to happen:

The credit industry are trying to reduce the suffering caused by the toxic combination of debt and mental health problems by offering debt relief to people with mental health problems. Now we need GPs to make sure patients in this very difficult situation can access the help they need.

GPs already provide a range of forms free of charge to patients who need them, including fit notes for time spent off work when ill and certificates which ensure those with serious conditions receive free prescriptions. GPs have the right to charge a fee for non-NHS forms like the Debt and Mental Health Evidence Form, but many already choose not to do so. Guidance from the Royal College of GPs also urges individual doctors to think carefully about the decision to charge for this form.

We recognise that GPs are under pressure. But this form isn't like holiday vaccinations or insurance claims. It's only used by desperate people who are struggling with both a debt crisis and a mental health problem. Charging a fee in

¹ Jenkins R, Bhugra D, Bebbington P, et al. Debt, income and mental disorder in the general population. *Psychological Medicine* 2008; 38: 1485-1494

² Lending Standards Board, *The LSB's Information for Practitioners*, September 2016

³ Ryan Davey and Chris Fitch, *Debt collection and mental health: an evaluation of the Debt and Mental Health Evidence Form*, November 2011.

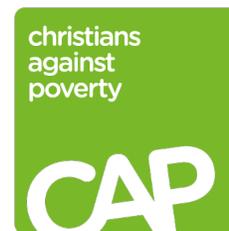
this situation risks making mental health problems worse.

We want to work with GPs and government across the UK to find a practical solution so nobody with a mental health problem has to go without essentials or get into further debt in order to get the relief they need. We believe GPs have a duty of care to help patients with mental health problems to receive this help.

Practical steps:

- Individual GPs can make an enormous difference to people experiencing debt and mental health problems by waiving their right to charge patients in these particularly difficult circumstances, as many already do.
- Local Medical Committees, made up of GPs and other practice staff, could also offer strong leadership and encourage GP practices in their locality to provide debt and mental health evidence free of charge.
- The Royal College of General Practitioners should strengthen its guidance, urging their members to provide debt and mental health notes for free.
- The Scottish Government should engage urgently with this campaign and ensure that evidence of mental health conditions for creditors is included in the list of certificates which are free for patients in the new GP contract currently under negotiation.
- Debt and mental health doctor's notes should be added to the list of fee-free forms when revisions are made to the contract for GPs in Wales next year.
- Primary legislation should be put forward in England to oblige GPs to provide evidence of mental health problems to creditors for free.

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