

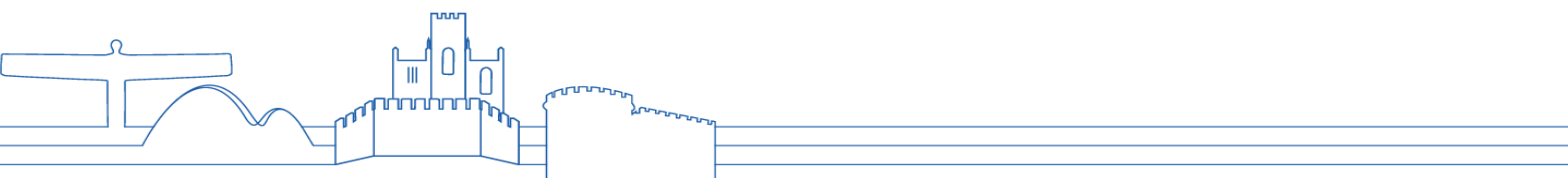


**North East and
North Cumbria**

Money and mental health financial tool feedback report

**To inform the pilot project: Maximising finances
through improved financial support for people in
the mental health system across North East
North Cumbria Integrated Care System**

October 2022





This report was produced by Involve North East on behalf of North East and North Cumbria Integrated Care Board. We are an independent organisation who specialises in involvement and engagement. We work with integrity, ensuring people's voices influence the design of services they receive.

We have vast experience and expertise in gathering the views and opinions of patients, carers and the general public in relation to health services. For example:

- service evaluations
- changes to care pathways
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- Questionnaires – paper-based and online
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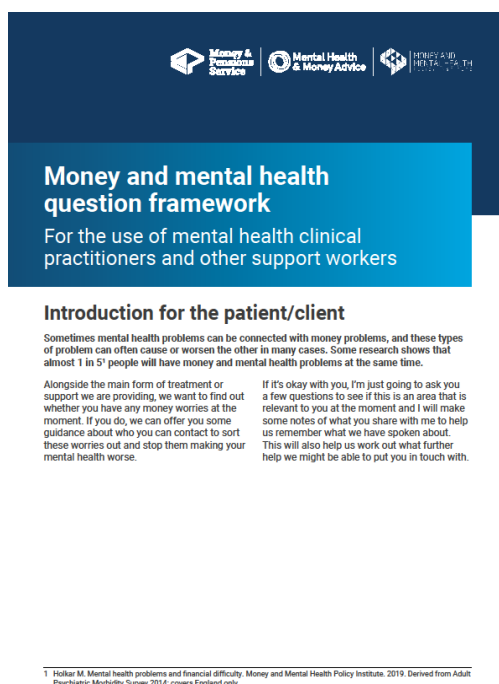
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Introduction

One of North East and North Cumbria Integrated Care System's (NENC ICS) key priority areas is to improve access and standards of mental healthcare, to support people with mental illness and in turn reduce health inequalities. Evidence indicates that there is a significant link between financial stability and mental health and wellbeing. Helping people with mental illness to maximise finances and income levels could have a significant impact on individuals and their families, improving their mental health, wellbeing, and quality of life. In order to help maximise their finances, it was felt that improvements could be made as to how that financial support was offered to people.

NENC ICS worked collaboratively with the Money and Pensions Service (MaPS) in conjunction with Rethink Mental Illness, the Mental Health Policy Institute, Public Health England and Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust's (CNTW) Individual Placement Support (IPS) Employment Service to develop a financial tool for mental health support workers/practitioners to use when engaging with their patients/clients. Once developed, the tool was tested by South Tyneside and Sunderland NHS Foundation Trust (STSFT) Life Cycle Service and Tyneside and Northumberland MIND.

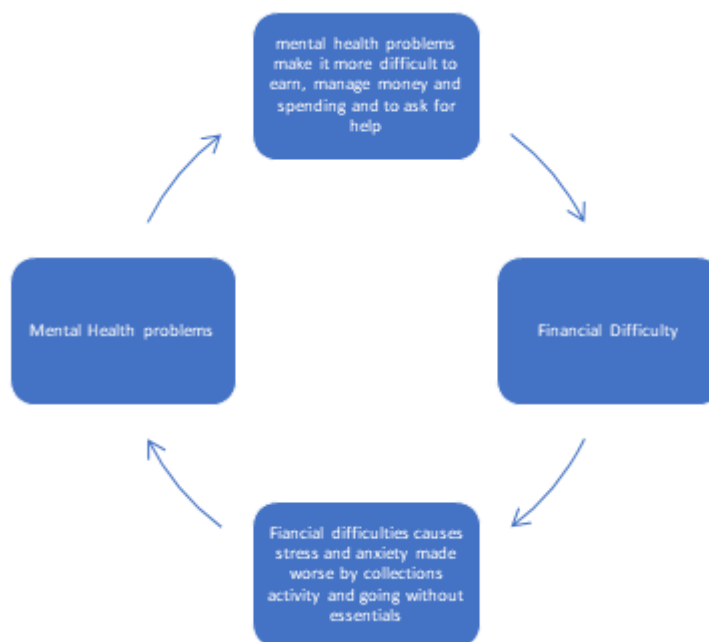
The tool is in the form of a question framework and signposting resource (double click on the images below to view).



The tool was piloted with mental health practitioners and patients/clients from South Tyneside and Sunderland and this report summarizes the findings of the pilot and other feedback from stakeholders. It should be viewed in conjunction with the overall project report.

Context

There is a vast amount of evidence highlighting the link between mental health and a person's financial situation as illustrated in the Cycle of Money and Mental Health problems below.



Source: Money and Mental Health Policy Institute 2019

Moreover, the Money and Mental Health Policy Institute (quoted in PHE webinar Supporting money, debt and mental health during and after Covid 19 Nov 2020) found that:

- On average, incomes for people with experience of common mental disorders is £8,400 lower than for people without those conditions.
- People who've experienced mental health problems would be three times more likely to run out of money within a week if they lost their main source of income.
- Common symptoms of mental health problems can make it harder to engage with support. Three in four people who have experienced mental health problems have serious difficulties engaging with at least one common communication channel. It is therefore crucial to employ a range of engagement methods for people with mental health problems.

The Money and Pensions Service conducted a UK-wide Adult Financial Wellbeing Survey in 2021 and found:

- 66% of the population were not satisfied with their finances, this increased to:
 - o 78% when people had experienced mental health problems in past 3 years
 - o 71% when people have a longstanding physical or mental impairment, illness or disability
- 45% of the UK population were not confident managing their finances, this increased to:
 - o 63% when people had experienced mental health problems in past 3 years
 - o 50% when people have a longstanding physical or mental impairment, illness or disability

Unsurprisingly the Covid 19 pandemic has also had an impact on people's finances and mental health. A North East regional Covid-19 Mental Health Impact Assessment conducted by the North East Public Mental Health Network found that being in financial difficulty was one of the highlighted concerns from across the region with significant impact on the mental wellbeing of the population.

A recent Citizens Advice survey supported these findings (Hammersmith and Fulham Citizens Advice as reported in PHE webinar Supporting money, debt and mental health during and after Covid 19 Nov 2020). They reported:

- Seeing increased numbers of the more capable demographic accessing help about debts for the first time and feeling ashamed, embarrassed, anxious
- The most disadvantaged were likely to become even more disadvantaged
- ‘Head in the sand’ syndrome – a lack of awareness about how debt recovery action is delayed not removed
- High housing costs was the single biggest problem for all demographics
- An increase in demand for benefits advice and a rising number of claims for Universal Credit
- Demand on food banks rising as people struggled to balance bills
- Clients were walking a fine line on the ‘social safety net’
- Agencies should expect a tsunami of demand for debt advice once restrictive measures have been lifted

Methodology

The tool was piloted during September and October 2022 with an NHS South Tyneside and Sunderland Foundation Trust Primary Care Mental Health Worker, who carried out interviews using the question framework and signposting tool with patients/clients of the South Tyneside and Sunderland Lifecycle Primary Care Mental Health Service.

Following the interview patients/clients were asked if they would be happy to complete a questionnaire about their experience. A questionnaire was chosen as it offered an anonymous way of feeding back and a paper and online format supported accessibility. They were asked:

- How they felt about being asked about their financial situation
- How honestly, they felt able to answer
- Whether they would have liked advance notice the interview would be taking place
- What they thought of the questions themselves and the length of the interview
- The accessibility of the signposting information
- Their understanding of what would happen next
- Anything they thought could improve the interview or was missing
- The impact of the interview

Nine patients/clients provided feedback having taken part in an interview using the tool. See Appendix 1 for a profile of all patient/service user respondents.

Feedback was also gleaned from the Mental Health Worker who carried out the interviews. They were offered a telephone interview or online questionnaire to complete and chose the latter. In their feedback they were asked to consider:

- What they thought of training they received in advance of using the tool
- How they felt about asking patients/clients about their financial situation and whether it was the right situation in which to be asking about financial worries
- The questions and the length of the interview
- How the signposting tool works as a digital tool, how useful it is and any suggested improvements
- Anything they thought could improve the interview or was missing
- The value of the tool for patients/service users
- Whether the tool should be rolled out further/mainstreamed

In addition to gathering experiences of patients/clients and workers who had used the tool, it was felt that feedback from potential future users of the tool would also be valuable. Although not suitable to pilot with Tyneside and Northumberland Mind's Safe Space clients due to the group setting, it was agreed that the three groups and their workers could provide feedback on the concept of the tool.

Three focus groups took place to gather feedback from clients who were informed of the tool and its aim and were shown copies of the question framework. Focus groups provided the opportunity for the tool to be fully explained and enabled a greater depth of information to be gathered. Clients discussed the idea of the tool and how they would feel if they were asked to take part in a conversation with a worker about their financial situation. To ensure consistency the questions mirrored those of the patient/client group who had taken part in an interview with the exception of the questions around the signposting tool and the impact of the interview. Twelve clients gave their views.

Six practitioners from Tyneside and Northumberland Mind's Safe Space groups also provided feedback on the concept of the tool and how they felt it would work in their setting, with their client group.

Limitations

Responses from patients/clients who had been interviewed using the tool or had consider the idea of the tool, showed consistency and as such, it was felt that saturation had been reached in terms of emerging themes.

However, responses from the worker who had administered interviews differed from those discussing the concept of the tool in several areas. It is therefore suggested that further research could be carried out with workers using the tool to test these views.

What have we learned?

There is support for the concept of the financial tool

The vast majority of patients/clients who had completed the question framework and had been signposted to further help were happy that they had been asked about their financial worries and answered the questions honestly and openly. This was also true of the majority of patients/clients who discussed the idea of the tool. However, some requested prior notice that the conversation would take place, transparency around who would see the information recorded about them, and that they would be speaking with someone with whom they already had a trusted relationship. They felt that support workers would not have the financial knowledge to help them.

The MIND team who considered the idea of using the tool were pleased that the conversation around finances and struggles had been brought to their support groups, resulting in Citizens Advice workers now attending their sessions to offer advice and support. However, they believed that the concept of the tool felt a little judgemental and that care would need to be taken in how they approached the conversation to ensure that people did not feel that they were assumed to be unable to manage their financial situation due to their mental health issues. They felt that a one-off conversation would not be enough and that there would be a need to hold regular check-ins with people.

The NHS South Tyneside and Sunderland Foundation Trust Primary Care Mental Health Worker who used the tool felt it was valuable, especially for people who are in debt and supported a national rollout.

Clarification is needed on who the tool should be used with

It was suggested by the STSFT staff member that there should be clear criteria around who the tool should be used with, as well as guidance on when in their treatment should it be implemented.

Advance notification of the conversation is required

The vast majority of respondents would have liked to, or would like to, know in advance about the conversation and would want to know they were not going to be asked to share personal financial information. This would give them time to prepare themselves for the conversation, bring any paperwork they wanted to discuss and consider questions they wanted answered.

Privacy is important

Several patients/clients who discussed the tool were concerned about who else would see the information that had been recorded about them and whether their information would be passed on to support organisations. They also wanted the conversation to be with a worker with whom they already had had a trusted relationship.

Support workers who discussed the concept of the framework echoed some of these views, believing data sharing would be an issue for some patients/clients. They felt that if personal information was to be passed on to other services or agencies this should be highlighted at the outset of the conversation and agreed by patients/clients.

The question framework works but could benefit from some adjustments

All patients/clients felt the questions were easy to understand although one requested a prompt sheet to help them answer a question. Support workers who discussed the concept of the framework felt the

questions were quite vague and that more direct questioning would be better. They also felt that there were too many questions asking the same thing but in a slightly different way and that this might make clients feel they were being tricked in some way.

The majority of patients/clients felt that the conversation length or number of questions was about right and this was also true of the STSFT Primary Care Mental Health Worker. However, two people who had completed the question framework felt it was too long and that questions were repetitive. This was echoed by one group who discussed the idea of the tool; they cautioned that people will only stay engaged for a short period of time and felt that the support provided at the end of the conversation should be mentioned earlier. Support workers mirrored the views of some patients/clients believing the questions to be too long to hold people's attention. One respondent suggested the framework could be streamlined into three key questions.

Patients/clients who had completed the framework questions were asked how appropriate they felt the questions were. The vast majority felt they were appropriate but one felt that they did not fit with their situation – they have no debt but still have money worries.

Signposting to other services needs consideration

Patients/clients who had completed the framework questions, and were identified as needing support, were provided with signposting information. All but one were happy to view this information on screen. Information on paper was the preference of the other patient/client. Half accepted information sheets to take away, reporting that they offered the right amount of information. All stated that they understood what would happen after their conversation.

All respondents exploring the concept of the tool said that if it had been identified that they needed support around their financial situation they would have expected to receive some form of help immediately. The STSFT worker also cautioned that the questions led service users to expect to receive support and advice directly from the staff member and that they were disappointed when this was not the case. It was suggested that it is made clear at the outset that the tool is there to guide service users to access further additional support they would benefit from.

Patients/clients exploring the idea of the tool requested that if help was to be provided by outside agencies, they should be given the option to do this themselves or have help from the support worker who held the conversation with them. They cited barriers to liaising themselves - people struggle to use phones and many do not have access to the internet or the skills to go online, their mental health at the time. Support workers discussing the useability of the tool echoed the need to consider barriers to further support and added that many people have literacy and numeracy problems, meaning they struggle to fill in forms. This was reiterated by the STSFT staff member who reported that a major barrier for patients/clients was having no access to the internet. They suggested that signposting could also be delivered face-to-face at a local support service.

MIND support workers felt that they do not have the knowledge to support clients who are identified as needing help with their financial situation – they commented that they would need training and support around this.

Support for people who are not in debt is needed

Four patients/clients who had completed the framework questions highlighted a need for support for people like them who were not in debt but had persistent worries about their financial situation. This was also echoed by the STSFT Primary Care Mental Health Worker.

The tool has had a positive impact

Although the vast majority of people were aware that they had worries about their financial situation ahead of taking part in the conversation, one did not. Furthermore, people reported that the conversation had changed how they felt about their money worries. Over half said that that they felt more supported and no longer alone and one stated they felt good. For one person however, nothing had changed.

Patient/client views

The findings below represent the feedback from 9 patients/clients, all of whom completed the money and mental health question framework and a further 12 who explored the concept of the tool.

How did you feel about being asked about your financial situation?

The majority of respondents were positive about being asked about their financial situation. Those who had completed the tool felt happy or comfortable with the situation and one person was indifferent, stating that the therapist was, “just doing their job.”

Of those exploring the concept of the tool, the majority felt that having a conversation with a worker about their financial situation was a good idea and thought it would be therapeutic. They agreed that there is a link between mental health and money worries with some citing personal experiences. They felt they would appreciate the opportunity to share their worries, be listened to and receive help. They also felt the support would be timely given the current cost of living crisis. Several cautioned however:

- They would want prior notice that the conversation was going to take place.
- They would need to trust the person with whom they were speaking.
- They would prefer to be asked plainly.
- Some, exploring the concept, felt that people would worry that the conversation would get too personal.
- They thought people with paranoia could be concerned about who else would see the information recorded about them, and that there needed to be transparency around this at the start of the conversation.

How honestly did you feel you were able to answer the questions you were asked?

The majority of respondents did or would answer honestly. Eight of the nine people completing the tool stated that they answered the questions honestly and of those exploring the concept of the tool, most felt that they would answer honestly. One respondent however cautioned that it would depend on the extent to which they were struggling as they might “bury their head in the sand.” For others it would depend on who was holding the conversation as they would need to have a trusting relationship with the person already. On the other hand however, they felt they would need to know that they were getting accurate advice and support from a knowledgeable person and were concerned that if someone from a counselling background was conducting the conversation, they would not have the expertise to help and would require training.

Would you have liked to know in advance that you were going to be asked about your financial situation?

The vast majority of respondents would have liked to, or would like to, know in advance about the conversation. Seven of nine people completing the tool would want advance warning and of those exploring the concept of the tool all would want to know in advance because:

- They would not want it to be “sprung on them.”
- They would want time to prepare any paperwork to bring with them.
- They would want time to prepare any questions they would like answered.
- They would want to know they were not going to be asked to share personal financial information.

Did you find the questions easy or difficult to understand?

Respondents felt that the questions were easy to understand. All nine respondents who had completed the tool found them easy to understand and all 12 respondents exploring the tool thought the questions were easy to understand, flowed well and were “plain and simple.” However, one felt that they should be given a prompt sheet when being asked how they felt their money situation is affecting their mental health (Q2e. In what ways do you think your money situation is affecting your mental health?).

How appropriate do you think the questions you were asked about your financial situation were?

Only patients who had completed the framework questions were asked this, with 8 out of 9 providing a response. Seven respondents felt they were appropriate whilst one felt that the questions did not fit their situation as they were not in debt but did have money worries.

Was the conversation too long, too short or about right?

The majority of respondents felt that the conversation length or number of questions was about right. Seven who had completed the tool felt the conversation was about right. However two felt it was too long and one person stated that the questions were repetitive.

All respondents exploring the concept of the tool discussed the number of questions they could potentially be asked. Two groups felt that the number of questions was about right and one group felt that there were too many, cautioning that people will only stay engaged for a short period of time and that the key message: “We can help you”, should be highlighted much sooner in the conversation.

How did you feel about looking at the information on a screen?

Only patients who had completed the framework questions answered this question and eight respondents found it easy to read; one would have preferred information on paper.

Did you receive any information leaflets or sheets to keep?

Again only patients who had completed the framework questions answered this question. Five respondents received information leaflets or sheets and four received nothing.

If you received information leaflets/sheets, do you feel this was too much information, too little or about the right amount?

All five respondents who had received leaflets or sheets felt it was the right amount of information.

After your conversation about money worries today, do you understand what will happen next?

All nine respondents who had completed the tool stated that they knew what to expect after the conversation.

Respondents exploring the concept of the tool said that if it had been identified that they needed support around their financial situation they would expect to receive some form of help, “there and then” and would not want to be passed on to someone else. Some would want the support worker to liaise with services that could help them on their behalf and cautioned that people struggle to use

phones and many do not have access to the internet or the skills to go online. They also felt that their mental health at the time might be a barrier to them doing things for themselves.

However, others would be happy to be signposted to other information and contact services themselves. It was suggested that people should be given the option to do it themselves or have the worker do it for them.

Is there anything you could suggest that might improve the conversation about your financial situation?

Only those who had completed the tool suggested improvements:

- Four people stated that there needed to be support for those who were not in debt but have money worries.
- Four people said they were unsure.
- Another person felt the questions were repetitive.

Is there anything else we should have asked related to your financial situation?

Only those who had completed the tool commented with one person again mentioning help for people who had money worries but no debt. Another suggested a question should be asked around 'What factors have contributed to the situation that you are in?' or 'What are the main factors impacting on the situation you are in?'

Impact of the tool

Respondents who had completed the question framework were asked two questions to gauge the impact of the tool in helping their worries about their financial situation.

Before today did you realise you had worries about your financial situation?

Eight respondents said they already knew that they were worried about their financial situation but for one, the conversation and question framework had brought it to light.

Has this conversation changed how you feel about your money worries?

Five people felt more supported with three mentioning that it was good to know that they were not alone. Two people specifically mentioned their therapist and how they helped them understand their money worries which made them feel more supported. However for one person, nothing had changed.

"Yes, I feel as though there may be more help and found [Support worker] very helpful in explaining everything to me."

"Yes, I feel more able to talk about money worries and know I am not alone."

"Yes, [Support worker] has made me see that I am not the only one and there is help out there. She helped me understand that the only way to feel better about this is to tackle it and have difficult conversations so that I can get the help and support I need."

"Yes, it has made me realise I'm not the only one going through it."

Practitioner/support worker views

The findings below represent the feedback from seven practitioner/support workers, one of whom completed the money and mental health question framework with patients attending the South Tyneside and Sunderland Lifecycle Primary Care Mental Health Service and seven from Tyneside and Northumberland MIND who explored the concept of the tool and how they could use it with their clients.

Support around financial worries

The MIND team were pleased that the conversation around finances and struggles had been brought to the group. And as a result, each of the Safe Spaces groups are now going to ask Citizens Advice to attend their support sessions on a regular basis. They did, however, believe that the tool felt a little judgemental and felt they would need to be careful how they broached the conversation as it was felt that it could imply that everyone with mental health issues was unable to manage their financial situation.

The STSFT mental health worker found the tool to be valuable when supporting service users who were in debt and recommend that the framework should be rolled out nationally when asked.

Useability

The MIND team queried whether the question framework would work with clients who suffered from paranoia.

Data sharing

The MIND team felt that privacy might be an issue for some people and that their clients would want to know what was happening to the information that was being recorded about them – if it was to be passed on to other services/agencies they felt this should be highlighted at the outset of the conversation and agreed.

Questions

MIND respondents felt that the questions were quite vague at times and that more direct questioning would get the conversation started in a more comfortable way. They also did not like the wording of question 2b: 'Do you think your mental health affects your ability to deal with money matters?' They felt, overall, the question framework was too long and cautioned that respondents may have relatively short attention spans. They also felt that there were too many questions asking the same thing but in a different way and that this might make clients feel that they were being tricked in some way.

One respondent suggested the framework could be streamlined and only the following questions asked:

- 2d: 'Is your money situation affecting your mental health at the moment?'
- 5a: 'Is anyone helping you with your money or benefits at the moment?'
- 5c: 'What kind of support would make the biggest difference to your money worries right now?'

The STSFT practitioner however felt that the question framework was about the right length and the questions were appropriate and helpful. They did caution though that the questions gave the service user the impression that the mental health worker would support them regarding their financial situation, rather than the tool being used for additional support alongside their therapy. They also reported that the questions were appropriate for people who were in debt and that a few were helpful for those struggling for money for food. However, they felt that the questions were not as helpful for many of their clients who were not in debt but had worries about money and paying their bills in the future.

Guidance

The STSFT mental health worker stated it would be helpful if criteria were provided to define who the tool should be used to support, alongside guidance on when in the treatment process should it be completed with the service user.

Provision of financial support

The MIND team felt that the next stage of the process needed further consideration and the following taken into account:

- How accessible the information/signposting is as many people do not have computers or skills to go online so support needs to be in other formats too. There are lots of people with literacy and numeracy problems and people struggle to fill in forms.
- How frequent the support is – it was felt that there would be a need for frequent check-ins with people, not just a one-off conversation, especially given the current cost-of-living crisis.
- The team did not feel that they have the knowledge to support clients who are identified as needing help with their financial situation – they felt they would need training and support around this.

The STSFT mental health worker found service users expected them to give out financial advice and support. This led to them being disappointed by the outcome when they had to seek support themselves, especially for those who do not have access to the internet. They felt that a clearer explanation of the financial tool for service users is needed, as some did not understand how it would help them, especially with a large number not having access to the internet. They suggested that the interview would be better conducted by the clinician at the first point of contact as this would lessen service user expectations that the professional would be able to give them advice and support around their finances.

The STSFT practitioner said the signposting tool was helpful when their client had debt. However, they found when using the tool for clients who had money worries but no debt, it was not as useful.

There were some issues with the support resources which were inaccessible to STSFT clients who do not have internet access and it was suggested that the signposting tool could be run in a face-to-face format by local services, as this would not require individuals to have internet access.

Recommendations

The following recommendations are based on the combined responses from patients/clients and practitioners/support workers, who have used the financial tool or discussed how they would feel if they took part in the question framework. They should be considered ahead of any roll-out.

Introducing the conversation

Practitioners/workers were concerned that there was an implication that everyone with mental health issues have difficulties managing their financial situation.

- It is recommended that the introduction to the question framework is reviewed.

Patient/clients would like prior notice that they are going to be offered a conversation about financial worries so that they can prepare

- It is recommended that patients/clients are given at least one week's notice that the conversation will take place and given some pointers on what it will be about and anything they might like to think about in advance.

Patient/clients would want the conversation to be held with someone with whom they already had a trusted relationship.

- It is recommended that only support workers/practitioners who are familiar to the patient/client hold the conversation.

There were some concerns from patients/clients and staff that people may be worried or paranoid about what information was being captured about them, how that information would be used and who might have access to it.

- It is recommended that at the start of the conversation the process is clearly explained to patients and that at the end of the conversation, if additional support is needed, patients/clients consent to this via a signed document.

There was found to be an expectation from service users that the practitioners would be giving financial advice and support themselves, rather than signposting to the relevant support.

- It is recommended the introduction is amended to make it clear that the practitioner will only be signposting them to support services, not giving them the financial support themselves.

The question framework

A number of patients/clients and practitioners/workers felt that the question framework was too long and cautioned that people may not stay engaged until the end.

Staff felt that question 2b was not clear and could be reworded.

- It is recommended that the framework is reviewed to ensure that it is as concise as possible and that questions are clear and direct.

Staff stated that the questions were more appropriate for people who had debt, and less appropriate for those who had money worries but were not in debt

- It is recommended that the framework is reviewed to ensure it is inclusive of all individuals with financial worries.

It was stated by some staff that guidance on who the tool should be used for, and when in the treatment process should it be used would be helpful.

- It is recommended that criteria are provided on who the tool should be used with, along with guidance on when in the treatment process it should be used.

Signposting and support

Staff felt that they would not have the knowledge to be able to support people to access financial help.

- It is recommended that guidance is provided around what preparation is needed ahead of staff using the tool including them researching what local support is available, referral processes and eligibility criteria etc.

Staff and patients/clients cautioned that there are barriers to people accessing information and support such as being unable to use a phone, not having internet access or having problems with literacy and numeracy.

- It is recommended that any signposting resources are available in different accessible formats.

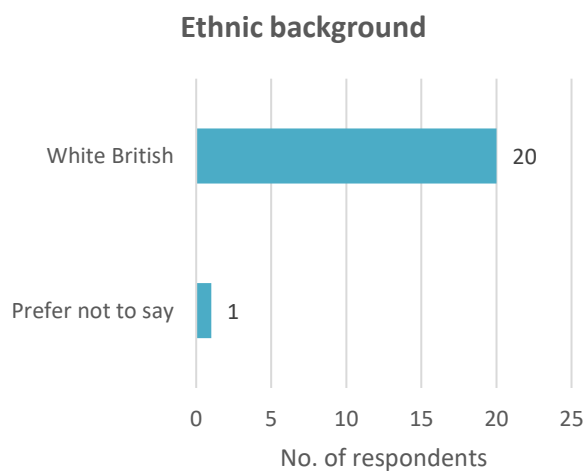
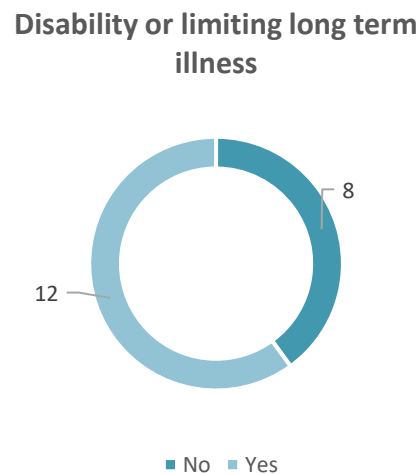
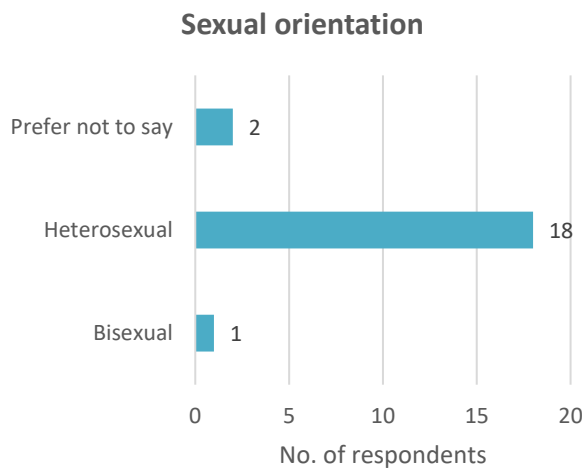
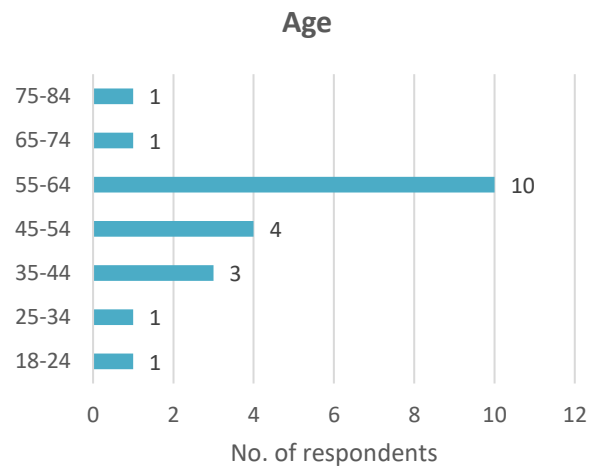
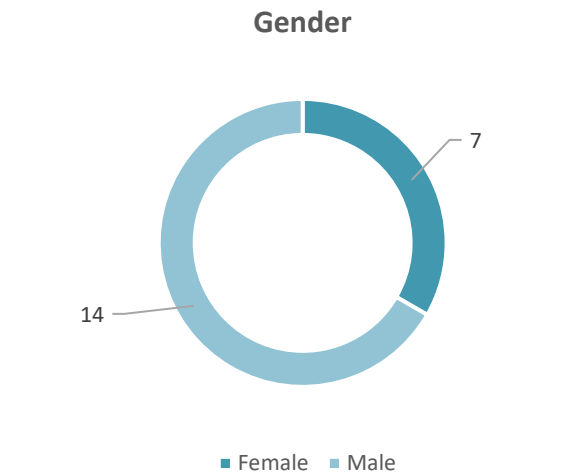
It was felt that the signposting tool does not take into consideration people who are not in debt but have money worries.

- It is suggested that the tool is adapted to offer support to these people.

Appendices

Appendix 1: Profile of patients/clients

Please note that not all respondents chose to complete these questions.



Acknowledgements

Many thanks to the following organisations without which this project would not have been possible:



**Money &
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**Northumberland,
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**MONEY AND
MENTAL HEALTH**
POLICY INSTITUTE



**Tyneside and
Northumberland**



South Tyneside and Sunderland
NHS Foundation Trust