

Frequently Asked Questions

1. Application Process

I am unable to complete an MHCBS application as the patient has no Care Coordinator. How do I go about it?

As an Approved Mental Health Professional (AMHP), you can take on the role of the nominated point of contact (NPOC). This isn't ideal if you are not involved in the ongoing care of the individual though. If there is no one on the team who is looking after the individual who holds either a care co-ordinator or mental health nurse role, first consider whether the person is still receiving crisis treatment. If it is crisis treatment, but just the structure of the team doesn't include one of those roles, then if you were willing, you can liaise with them each time you get the interval check, having put yourself as the NPOC to check if the individual is still receiving that care and then confirm via our portal.

Alternatively, you could list yourself as the NPOC and use the next 20-30 days to find someone who could take over the NPOC role from you. This way, the individual receives the protection of the scheme immediately rather than waiting for you to find someone to take on the role. One thing to be aware of if you do this is that, if you are unable to find someone and you cannot continue the role of NPOC after 30 days from being entered into the scheme, then the individual will be exited from the scheme with immediate effect, as they would have had their 30 days already. They can apply again if this happens.

Is the AMHP the only person who can refer to Breathing Space?

The AMHP is the only person who can attest the receipt of MH Crisis treatment. The referral can be done by a number of other persons, including the client, but it would only be valid if signed by an AMHP.

As an AMHP, should I get written consent from the patient?

Before you submit an application, you should gain consent from the patient (or their authorised representative) to share their information with us. We rely on the completed form to have the consent to be able to contact them. When/if we get to debt advice for the patient, we do ask for further consent.

If the patient lacks the mental capacity to consent to a referral, and there is no one in place to make such decisions on their behalf, how much involvement are AMHPs expected to have with regard to any Best Interests decision to proceed with the scheme?

As per the Mental Capacity Act (2005), it asks you to act in the person's best interests. Hopefully, you will be able to speak to the person or a family member to support this decision. If not, this will be up to you to progress and maybe even discuss with your team/manager for the best course of action. If you do, do this in the person's best interests, then maybe list it in section 4 of the form so that it is captured and documented.



How do we get hold of an appropriate AMHP to confirm crisis treatment and sign the referral form?

You need to contact the local AMHP services in your area. This might be using a duty email address or phone number. But you will need the name of a specific individual to be able to complete the form.

When signing the referral form, AMHPs must insert their first and last name. What can we put if we are entering an AMHP team's email address?

We ask that you still include your first and last name, as we may need to contact you if anything is missing from the form or if further details are required. It is a requirement of the regulations that the name is provided, to have a record of who the authoring AMHP is. (Clause 29.3.b).

If a patient is long-term and admitted under the CMHT, will this affect an MHCBS application?

If the individual is receiving crisis treatment and they have a qualifying debt, then they will be eligible for the service. It is the definition of receiving crisis treatment that is crucial for the application to be processed. Clause 28 of the regulations provides the definition as it stands.

If MHCBS comes to an end, can it be reinstated automatically, or will the entire process have to be redone?

Under the debt respite regulations, unfortunately, we require a new application to be submitted.

Do you hold data on how many MHCBS applications have been accepted in each region?

Yes, however, we will need to check if we are allowed to share this openly. If we can, we will include this in our future webinars, so keep an eye out for the next one.

2. Eligibility and Scheme Details

Can someone be under the MHCBS scheme for years if they are in hospital for a long time, then discharged under a community team?

Any individual who is still receiving crisis treatment can remain in the scheme as long as that treatment is being given to the individual. This could be whilst being treated as an inpatient or under the home crisis treatment team.

It is the NPOC's responsibility to understand whether the person is still receiving crisis treatment, as an in-patient, if they have been in hospital for a lengthy period. There are occasions when the person remains in hospital, due to waiting for accommodation or social care, long-term support and is potentially stable in the mental health care and treatment whilst on the ward.



Are there any tools available to aid the AMHP in determining whether the treatment qualifies as crisis treatment?

Yes, there is guidance for mental health professionals which you can find here: [Debt respite scheme \(breathing space\): Guidance on mental health crisis breathing space - GOV.UK.](#)

Please see 2.3. For these purposes, “receiving mental health crisis treatment” means that the individual:

- has been detained in hospital for assessment or treatment (including under part 3 of the Mental Health Act 1983);
- has been removed to a place of safety by a police constable; or
- is receiving any other crisis, emergency or acute care or treatment in hospital or in the community from a specialist mental health service in relation to a mental disorder of a serious nature. Such a disorder should be of equivalent severity to a mental disorder requiring the individual’s detention in hospital under the Mental Health Act 1983 or their removal by the police to a place of safety, but where the treatment can be provided without the debtor being assessed, removed or detained without their consent (*Kaye v Lees* [2023] EWHC 152). When confirming a client’s eligibility, the AMHP must be satisfied that the statutory definition of mental health crisis treatment is met and is informed on the basis of the availability of supporting evidence (e.g. this could include the most recent assessment and care plan documentation and/or associated records). An assessment under the Mental Health Act 1983 is not required for the AMHP to decide whether the individual’s mental disorder meets the required level of severity.

How long does MHCBS last?

MHCBS lasts for the duration of the mental health crisis treatment plus an additional 30 days (often referred to as the cooling-off period). A person can enter MHCBS multiple times.

What are the odds of an MHCBS being declined? I've supported someone who was told they don't have eligible debts. However, a different person with similar debts was accepted.

Without at least one eligible debt, the client does not qualify for MHCBS.

For a list of eligible debts and excluded debts please see 4.11 and 4.12 here: [Debt Respite Scheme \(Breathing Space\) guidance for money advisers - GOV.UK](#)

Since the debt advice is delivered by a London-based organisation, is it available to clients nationally?

The MHCBS and optional debt advice is available to residents in England and Wales.



Is MHCBS being used consistently across the country, or are some Local Authorities submitting a notably higher number?

It is sporadic across England, but we believe the awareness of the service is required, which is why we are running the webinars. We would say right now, that some Trust locations are using it more than others. We think there is more work to be done on this to get those in crisis the support they need.

3. Nominated Point of Contact (NPOC)

How can we change a Nominated Point of Contact (NPOC)?

Simply drop us an email to support@mhcbs.co.uk, including the details of the new NPOC, and our support team will pick up and process the request. When sending the details, we will require the following:

- Full name of the new NPOC
- Job title
- Email address
- Contact number (if available)

Please note that the NPOC must occupy one of the following positions to allow the switch to happen:

- Approved Mental Health Professional
- Mental Health Nurse
- Care Coordinator

Is the onus on the Nominated Point of Contact (NPOC) to contact MHCBS to provide interval checks, or does MHCBS remind the NPOC that they need to provide an update?

We will send the reminders. NPOCs will receive at least 3 reminders when the interval check is due. An NPOC can log into the Portal to update the Interval Check or reply back to our email and our team will update accordingly.

4. Debt Advice and Support

What support do people get during MHCBS to deal with their debts?

Once the client is in Mental Health Crisis Breathing Space, they are able to ask for support with their debts. We have qualified debt advisors who can support the individual and review their case on a one-to-one basis to provide tailored support.

Does the MHCBS include council tax and rent arrears?

Yes, MHCBS includes council tax arrears and rent arrears accrued up to the point of entering the scheme. Including the name of the Local Authority where council tax arrears are owed and the name and address of the Landlord for rent arrears in Section 4 of the referral form will help expedite the process.

For other credit debts, we run two credit reports for each client. However, Council tax arrears and rent arrears do not appear on credit reports.



Does MHCBS cover business debts?

It really depends on the type of debt, so we would need to review them on application. Normally, where the Client is personally responsible/liable for the business debts, then they may be included.

Can MHCBS cause bank accounts to be frozen?

Yes, it is possible. It depends on the bank's internal policies. We have to include all eligible debts and bank overdrafts are eligible. We also provide advice on opening a safe bank account to ensure the client's income is protected.

Once MHCBS is in place, should a patient then be in a position to make some payments to reduce their debts whilst in treatment (and the MHCBS remains in force)?

Whilst in MHCBS, the client should make ongoing payments towards their bills. If they can afford to make the contractual payments or reduce payments towards their debts, they can do so. MHCBS is not a payment holiday. It protects from enforcement actions for the arrears (of eligible debts) accrued up to the point of entry. If arrears are accrued during MHCBS, they can be enforced.

More Information

You can learn more about MHCBS through:

- Webinars on [13th February 2026](#) and [14th March 2026](#)
- wearegroup.com/mhcbs
- Email: support@mhcbs.co.uk
- Official guidance on [GOV.UK](https://www.gov.uk)

Join our Questions and Answers Session

Date: Friday, February 6th from 12 pm to 1 pm

Join: <https://teams.microsoft.com/meet/31298560828217?p=cbterpgGIPjPQysMdV>

Meeting ID: 312 985 608 282 17

Passcode: Tb2Fq6EA

