## Banking on it

PEOPLE MOVING OUT OF LONGSTAY HOSPITALS FACE MANY CHALLENGES IN ADJUSTING TO LIFE 'OUTSIDE'. PERSONAL FINANCIAL MANAGEMENT IS ONE OF THE MOST CRUCIAL AREAS OF NEW RESPONSIBILITY EX-PATIENTS TAKE ON. PETER BATES INVESTIGATES HOW BANKS AND BUILDING SOCIETIES ARE RESPONDING TO THEIR NEW CLIENTS

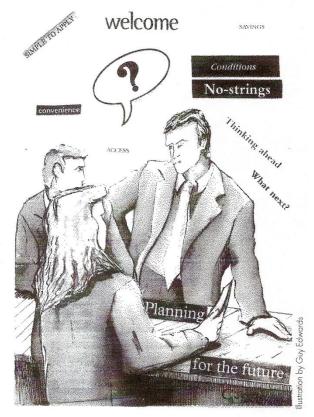
ooking after your own financial affairs, be it shopping, paying bills or saving, is one of the key markers of 'responsible adulthood' in today's society. Holding a bank or building society account brings with it a certain respect, and in the world of automated bills and credit companies it can be very difficult to be accepted as an independent adult without one. People who are refused an account can be not only inconvenienced but disenfranchised.

Professional carers in the mental health field spend a good deal of time helping those moving out of longstay institutions to learn or relearn the skills needed to handle their own money. But how do the banks and building societies themselves respond? Several clients in contact with our community care service have told stories of unwelcoming responses from counter staff when they have tried to open an account. The demands for forms of personal identification, or ID, seemed to be a real sticking point.

When I contacted 18 high street banks and building societies seeking clarification of the matter, I received a response from only seven. I assume that the others either lacked a clear policy or were unwilling to disclose it. (It seems that, for security reasons, some banks and building societies are unwilling to publicize which forms of ID they will accept.) However, the responses I did get raised a number of important issues.

Most of the seven respondents required two forms of identification, at least one with the applicant's current address on it. Passports, council tax bills and driving licences were the most frequently cited acceptable ID. Each of these may pose a problem - the driving licence in particular, as many clients do not have the funds to own a vehicle or are prohibited from driving due to restrictions accompanying medication. One bank would set up an account only on production of a passport and driving licence, with no alternatives. One bank, in catch-22 style, would accept a credit card or cheque guarantee card from another bank.

One of the building societies would accept a signed letter from an employer, but the difficulties many community care clients experience in finding employment make this a



fairly unhelpful option. Bills which gave a name and address were acceptable to one bank - but clients who live in staffed or shared accommodation may not have access to these. Two institutions would accept a reference on NHS headed paper - immediately making the client out as different. Some of the banks and building societies seemed uncertain themselves about what constituted acceptable ID, and the experience of some people I spoke to was that rules were not always adhered to at the counter. It seems that community care clients are likely to receive a very unpredictable response.

The Midland, Halifax and Lloyds were the most responsive. The Halifax Building Society was willing to check the electoral register and accept this as a form of identification, and Lloyds Bank accepted a reference from a friend of twelve months' standing.

The Disability Discrimination Act 1995 makes it unlawful for service providers, including financial institutions, to discriminate against people on grounds of disability. When I spoke to Julie Fisher, Equal Opportunities Manager (Disability) at the Midland Bank, she said that since the 1995 Act they had issued new instructions to all their branches which refer to the need to treat people with disabilities fairly, and make particular reference to people with mental health difficulties being rehabilitated into independent living. Let's hope they work, and that other financial institutions follow suit.

Peter Bates is a directorate manager for Nottingham Rehabilitation and Community Care Services