



SCOTLAND-WIDE FREE BUS TRAVEL
CERTIFICATE OF ELIGIBILITY – MENTAL HEALTH
NCT002 Form

Mental Health (for the purpose of the concessionary travel scheme) covers mental illness or personality disorder. An applicant will qualify provided they meet criterion 1 and 2 below and are attending a recognised NHS/local authority funded establishment as part of an ongoing care, treatment or rehabilitation programme.

An authorised signatory for the purpose of this category is: Psychiatrist, Community Psychiatric Nurse, Mental Health Addiction Nurse, Community Learning Disability Nurse, Clinical Psychologist, Educational Psychologist, Head Teacher of a special Educational Needs School, Occupational Therapist, Mental Health Officer, Social Worker who specialises in mental health care and treatment, Support Services Manager, Day Service Manager.

Name of applicant: _____ Date of birth: ____ / ____ / ____

Address: _____ Postcode: _____

Telephone number: _____

Note 1: "YES" must be selected for both questions 1 and 2 for the applicant to be eligible for the concessionary travel scheme on the grounds of mental health.

Note 2: If applying on the grounds of alcohol or drug dependence, do NOT answer question 4

- 1) Confirmation that the applicant has had a diagnosis of and is receiving treatment for a mental health condition in terms of the Mental Health (Care and Treatment) Scotland Act 2003, which has persisted for more than a year.

Yes ☐

- 2) Confirmation that the applicants condition means that they need to travel regularly in order to keep health or social care appointments or participate in activities as part of a treatment, care, rehabilitation programme or an ongoing programme.

Yes ☐

- 3) Is the applicant attending a rehabilitation programme purely for alcohol or drug dependence as part of a treatment programme under the Mental Health (Care and Treatment) Scotland Act 2003? **(If yes, the applicant will be entitled to a 6-month pass only)**

Yes ☐ No ☐

- 4) How long do you envisage the applicant attending appointments? (This will determine the validity of their entitlement to free bus travel). ____ years ____ months (maximum of 3 years. **If yes has been selected for question 3, do not answer this question.**)

Signed _____

Please print name _____

Job title _____

Organisation _____

Date _____ Contact telephone number _____

Official Stamp or if
returning by email,
must be sent by the
authorised signatory
and from the
approved
organisations
address

To be completed by the applicant

I confirm that the above information is correct. If I no longer require concessionary travel to attend appointments and activities I will update my local authority.

Signed: _____ Date: _____

THIS CERTIFICATE SHOULD ONLY BE COMPLETED BY AN AUTHORISED SIGNATORY AND ONLY WHERE THE APPLICANT MEETS ALL OF THE CRITERIA BELOW. PLEASE REFER TO GUIDANCE NOTE FOR FURTHER INFORMATION

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CERTIFICATE OF ELIGIBILITY – MENTAL HEALTH
GUIDANCE NOTES FOR AUTHORISER

GUIDANCE FOR LOCAL AUTHORITIES/SPT ON LENGTH OF ENTITLEMENT

- The award length of entitlement will align with the information confirmed on page one by the authorised signatory on the length of time the applicant is expected to attend a treatment programme
- 6 month entitlement will be provided if you have confirmed on page one that the applicant is attending a rehabilitation programme purely for alcohol or drug dependence (question 3)

Free bus travel under the mental health category of eligibility is available to anyone who meets certain criteria. The purpose is to encourage those eligible to attend required medical appointments as part of a regular and ongoing treatment programme at a recognised NHS or Local Authority establishment.

The certificate of eligibility should be signed with the job title of the authorised signatory inserted alongside the official stamp of the organisation. By completing the certificate, you are confirming the following

- You are an authorised signatory of an organisation approved for this purpose by the Local Authority or SPT (if you are within the Strathclyde area). If your organisation has not been approved, please contact your Local Authority/SPT with information about your organisation and the services it provides to its users, including the name(s) and job title of those who will act as the authorised signatory
- The applicant has had a relevant diagnosis and is receiving treatment for a mental health condition in terms of the Mental Health (Care and Treatment) Scotland Act 2003.
- The applicant is resident in Scotland, aged 5 or over and their condition means they need to travel in order to keep health or social care appointments as part of a treatment, care or rehabilitation programme. If they fail to meet these criteria, even if covered in terms of the Mental Health (Care and Treatment) Scotland Act 2003, they are not eligible.

Please note that a person is NOT mentally disordered by reason ONLY of;

- Dependence on or of use of drugs or alcohol
- Behaviour that causes or is likely to cause harassment, alarm or distress to any other person or acting as no prudent person would act.

An eligible person is defined in the regulations as someone whose ability to travel is impaired by a mental disorder within the meaning of section 328 of the Mental Health (Care and Treatment) (Scotland) Act 2003 which has persisted for more than a year and who are required to travel to keep health or social care appointments or participate in activities as part of a treatment, care or rehabilitation programme.