

Financial Inclusion in Health and Social Care Settings

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‘I cannot address medical issues as I have to deal with the patient’s agenda first, which is getting money to feed her family and heat her home.’

(GP’s at the Deep End, 2012)

Low income impact on health

- Material
- Psychosocial
- Behavioural
- Reverse causation

Welfare rights advice in health & social care settings

- Familiarity
- Accessible
- Referral
- Partnership working

NHS Lothian Activity and Investment

- 22 health & social care settings
- 4,576 cases
- £2,606,907 income gained
- £802,024 presenting debt renegotiated
- £186,883 invested in the service
- Service Level Agreement

Services Provided

- Benefits and Tax Credits
- Problem Indebtedness
- Housing
- Income Maximisation
- Employability

Getting Started

- Links with health services validates service and provides context
- Housekeeping
 - Access to appropriate interview space
 - Access to equipment
 - Referral mechanisms (keep it simple)
 - Timing of service
 - Booking Appointments / Drop-in

Making it Work



- Co-location / Outreach
 - Access to Systems and Records
 - Welfare Rights Adviser Part of Team (sharing information / integration / nights out)
 - Use Experienced Advisers
 - Identify and Fix Problems Early
 - Partnership Working
 - Team Meetings / Training

Quote



‘The impact on our general practices has been huge and some of our group have felt it to be crippling, with the increased workload diverting us from essential clinical care. Increasing numbers of consultations are being taken up either focusing on the practical support of patients through the appeals procedure or, more disturbingly, trying to help patients cope with the mental ill health effects of the process.’

Lothian Deprived Interest Group

Case Study

Client is ex-forces. Discharged from army suffering from mental health problems. Became homeless / sleeping rough. Client wouldn't fully engage with health services as preoccupied with getting his benefit and housing problems resolved.

GP referred to WRA who ensured all benefits due were paid (PIP & ESA SG and backdates = £200 p/w), secure accommodation achieved / furnished with payments from charitable grants and referred for ongoing support.

Client now fully engaged with health services and other support services – addressing his mental health issues and attending courses to increase his employability.

Thank you

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