

Money Worries – In Sickness and in Health

A guide for Health Care Professionals dealing with
patient money worries





“Health should be considered in the widest possible sense. It is not just about medical interventions and treating your wallet is part of providing high quality health care.”
(GP)

Money worries can have a profound effect on health and wellbeing. Debt, benefit problems and low income can all worsen or cause physical and mental health problems. Many health care professionals say that they are prevented from effectively doing their jobs because patients find it hard to engage when they are preoccupied with worries about money - but you have enough to do already, without also becoming an expert welfare benefits and debt.

Ensuring that patients with money worries get the right help and support is essential so that health care professionals can concentrate on doing their jobs. Helping patients with money worries is straightforward if you **C.A.R.E.**

Consider money worries as an underlying cause in poor health, both mental and physical.

Ask simple questions about money worries; people may be too embarrassed to discuss their financial difficulties. Ask questions about money worries as part of your routine practice and care planning; emphasise the value of money and welfare advice – early intervention can prevent a crisis.

Refer to an appropriate money/welfare adviser; know which free and independent advice services are available and refer patients to these services as appropriate; consider your role in establishing the patient’s relationship with the adviser - your patients trust you and are more likely to engage with an adviser on your recommendation.

Engage with the adviser providing access to medical records, with the patients consent, so they can prepare reports for you to check. Reassuring the patient about the advice process and supporting them will produce better results.

1. LOOK FOR SIGNS

A combination of factors may trigger financial difficulties or worsen existing ones. Looking out for common signs can help prevent a crisis.

Major life changes. These include job loss, relationship breakdown, bereavement, or any 'big' disruption in circumstances where individuals borrow money, or stop paying bills, to cope.

Onset of illness. Mental and physical illness can trigger debt, both for people with mental health problems and carers. Incomes may drop (e.g. resultant job loss), and expenditure can also rise (e.g. travel costs to health services).

Low incomes. Individuals on lower than average annual incomes are more likely to have money worries.

Income disruption. Benefit disruption is a common form of this, as well as not claiming all the benefits an individual is entitled to.

'Low-income grind'. Living on a low-income for long periods worsen financial difficulties until the patient is no longer able to cope.

Ignored paperwork. When someone's money worries become overwhelming, they often ignore important paperwork because the stress is so great.

"I felt I could trust the adviser because I was referred by my GP." (Patient)



2. TALK ABOUT MONEY WORRIES

You may not be aware of a patient's financial difficulties until a crisis happens. Talking about money with patients can help prevent this.

How to get talking

- Building questions about money/debt into ongoing assessments can get clients used to these discussions.

- Look out for any ‘money worry signs’. These can signal that money worries may be part of the patient’s concerns.
- Help patients to voice any fears they have. Concerns about struggling financially will stop a patient from fully concentrating, unless you deal with these issues first.
- Be aware that patients with money worries often have feelings of hopelessness.



3. ASK THE RIGHT QUESTIONS

Openers

- ✓ *“What money worries do you have?”*
- ✓ *“What are you living on/what income do you have?”*
- ✓ *“With other patients, we’ve found they sometimes find it difficult paying all their bills. How are you finding it?”*
- ✓ *“You said you have been feeling very low lately, do you have any money worries that might be causing this?”*
- ✓ *“Are you aware of anything that might be causing this anxiety? Any family problems? Money worries?”*

“Seeing an adviser was invaluable. I wasn’t claiming benefits I should be claiming. I was brought up to feel that being on benefits is wrong - there is a stigma attached to it. The advisor was not judgemental and understood what I needed.” (Patient)

Going deeper

- ✓ *“So, you’re finding it difficult. Many people do. Will you let me see if I can do anything to help?”*
- ✓ *“You’re finding it hard to make ends meet. I’m not surprised. Could you tell me a bit more?”*
- ✓ *“Do you have enough to buy food each week? How about your electric and gas bills - have you been able to pay them? Do you pay council tax?”*
- ✓ *“You’re not opening the letters in case they’re bills. That must be worrying. Would you like help to go through them?”*

Getting specific

- ✓ *“Have you claimed all the benefits you are entitled to?”*
- ✓ *“Have you received letters about your benefits that you’re having difficulty with?”*
- ✓ *“Do you struggle to find the money to pay your bills on time?”*

4. KNOW THE OPTIONS

Your patient has told you there’s a problem. Now, what are the options?

Identifying that a client might be in financial difficulties, and then getting them to talk about it, is a major achievement. Now, what are the options?



“I only accessed the advice service because my GP referred me. It broke down a lot of barriers.” (Patient)



“Before this service was introduced, 50% of my workload was taken up by the socioeconomic problems of patients.” (GP)

5. MONEY AND WELFARE ADVICE

An adviser is trained in providing money and welfare advice and support. They can:

- Help patients claim all the benefits they're entitled to
- Act on the patient's behalf when dealing with the Department for Work and Pensions, Local Authorities and other statutory organisations
- Act on the patient's behalf when there is a dispute about entitlement to benefits
- Represent patient's at appeal tribunals and other courts
- Help patients manage their debt
- Negotiate with creditors to establish an acceptable repayment schedule
- Advise clients on other sources of help or options.

Advice should be free, confidential and independent.

6. WELFARE ADVICE AND HEALTH PARTNERSHIPS (WAHP)

Welfare Advice and Health Partnerships (WAHP) are the integration of advisers in NHS Scotland settings.

They provide regulated and accredited Social Welfare Advice on income maximisation, welfare benefits / social security, debt resolution, housing issues, employability rights as well as representation at tribunals. They also link patients to other sources of support. In Scotland there are WAHP in general practice, midwifery & health visiting, secondary care, community mental health and drug & alcohol service. WAHPs have been shown to benefit Health Care Professionals and patients by:

- Reducing consultations and enhancing clinical care
- Improving patient health and wellbeing
- Tackling health inequalities and poverty
- Increasing household income
- Linking patients with other sources of support

There may be an adviser already working within your organisation through a Welfare Advice and Health Partnership.

7. MORE INFORMATION

Some patients will always want more information – either because they feel they might tackle the issue themselves, or as a delaying tactic. Try to have information to hand, or in a waiting room.

The patient doesn't want help

Some patients will want to resolve their own problems. However, they should still contact an advice service. Some services specialise in guiding individuals to work through their own problems. Furthermore, some options, like bankruptcy, require patients to have an adviser.

The patient wants your help

Patients will sometimes only want you to deal with their financial difficulties. Most health care professionals, however, will not have the resources to do this. Instead, making a commitment to working with the person alongside an adviser may reassure the patient, as well as being beneficial for the adviser.

"I don't have to spend time looking for information on welfare rights and money advice and can just refer patients to the advisers."
(Community Psychiatric Nurse)



For more information visit the Welfare Advice and Health Partnership website:

www.improvementservice.org.uk/welfare-advice-and-health-partnerships

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