

THE DEEP END ADVICE WORKER PROJECT

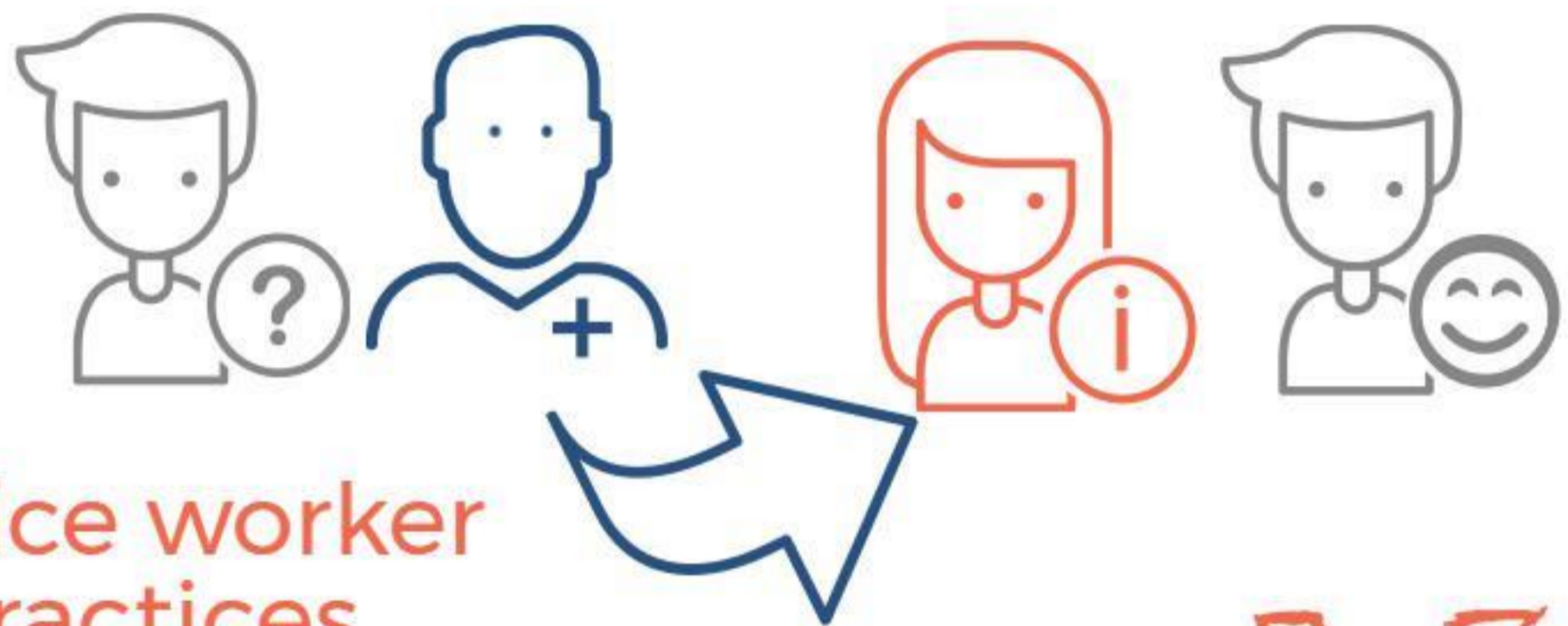
The Deep End Advice Worker project started in December 2015 and is ongoing. It tested approaches to delivering financial, social security, housing and debt advice in two general practices in Parkhead, Glasgow.



These practices serve deprived populations and 6 GPs support 7,903 patients across the two practices.

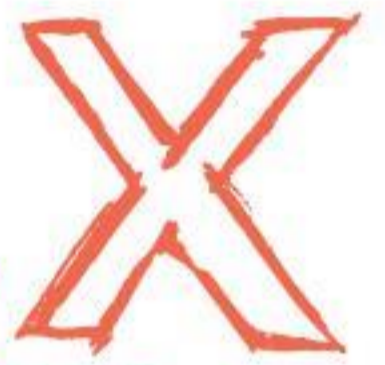


276 referrals



were made to an advice worker based in the two practices

85% of referrals had never previously accessed GEMAP's services (despite these services having been available in the area for 15 years.)



74% of referrals were made by a GP (this is a good rate of GP engagement for this type of project)



165 people (65% of referrals) engaged with the service

68% stated they had a mental health condition

58% self-reported a long-term health condition



2 in 3 were tenants of registered social landlords

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Our findings suggest the the Deep End Advice Worker is supporting people to access a range of social and economic support.

Of the 165 people which engaged with the service:

£850,000 worth of financial gain was secured through supporting people to access social security payments



Successful applicants received an annual average of just under

£7,000

The project identified and is now managing

£155,000 worth of debt



1 in 5 people referred were supported with a housing issue

Around half of people were referred to additional forms of community support such as mental health, fuel poverty and carers' support



Over 85 individual forms of cost reduction support were provided



This includes helping to reduce fuel costs and secure free bus passes

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The project intentionally sought to position the provision of advice as in an in-house service.

Through embedding the financial advisor into the everyday work of the GP surgeries, they become a valued and trusted member of the practice teams.



Access to medical records

With informed consent, the advice worker could access medical records of people accessing the service. This gave a better understanding of people's health circumstances and allowed better representation.

Access also allowed the advice worker to produce draft medical statements for social security applications, which were confirmed and signed off by GPs. This reduced the non-clinical work of GPs.



GP practices as a neutral and accessible venue

People accessing the service had familiarity with the building and long standing relationships with practice staff plus the trusted status of the GPs among the local community contributed to this perception.



Practitioner knowledge

Several small scale changes were made to the service as it developed, based on the feedback from practice staff and the advice worker. Practitioner knowledge was a fundamental component in the design, delivery and on-going development of the work.