

Financial inclusion / Welfare advice

With Jamie Sinclair

Background

Austerity measures and benefit reform have resulted in people losing £1.1 billion from 2010-2015 and a further projected £1 billion loss up to the year 2021. In Glasgow in particular this has resulted in a loss of £167 million/year and each working person being £400/year worse off since these measures were introduced. The losses come from a combination of loss of top-ups in Universal Credit, cuts to tax credits, change from ESA to PIP, benefit caps and the 'bedroom tax'. **Austerity hits poorest areas hardest.**

Building Connections

Building Connections was started in 2014 with funding from the Scottish Government, GCHP, NHS and What Works Scotland. It is now mostly funded by the Joseph Rowntree Foundation with help from the aforementioned funders and Glasgow Kelvin College. Its objectives were to highlight local services and support organisations to work together. It initially began working from Parkhead Job Centre with involvement from the following agencies: Greater Easterhouse Money Advice Project (GEMAP); Princes Trust; Glasgow Association for Mental Health; One Parent Families Scotland; Skills Development Scotland; Glasgow Kelvin College and Addaction.

Its successes were improving financial gain, debt identification, improved financial planning/management, improving employability, onward referrals to other agencies and improving people's confidence and well-being.

After this it was rolled out to Springburn Job Centre with a focus on migrant health and subsequently began working within the Deep End Project.

The Deep End Project started with providing an Advice Worker based within 2 GP Practices in Parkhead with the advice worker getting referrals directly from the GP or other members of the practice team. The aims of this project were to:

- Improve health outcomes by focussing on social determinants of health
- Reduce time pressures on GPs
- Generate knowledge
- Contribute to the evidence base for attached advice workers

Despite GEMAP running in both practices for the past 15 years, 76% of patients who were referred via this service during the pilot had never used this before.

In the first year of this pilot project, 167 referrals were received from both practices with 108 people engaging with the service. Over this period there has been >£250,000 financial gain for the patients engaged, and help with >£90,000 worth of debt.

The project is currently funded until March 2017 and the next steps are to disseminate this data and foster broader discussions regarding welfare advice based in a primary care setting.

Improvement science

Jamie also spent some time discussing improvement science and some of the methods they have incorporated into the Parkhead work.

There is no agreed definition of improvement science (see, for instance, Skela-Savic et al. The Development of a consensus Definition for Healthcare Improvement Science (HIS) in seven European countries: a consensus methods approach)

Deming and Shewhart have been leaders in the field, emphasising the importance of context and variation in data over time respectively - <https://www.ncbi.nlm.nih.gov/pubmed/23807130>

The focus is on problem solving in real world contexts:

- What are we trying to achieve?
- How will we know that a change is an improvement?
- What changes can we make that will result in improvement?

Examples of 'tests of change' used in the Parkhead project included different methods of practice feedback: 1) simple handout, 2) involvement of staff, 3) staff developing their own poster.

A further key element of any service development project such as this is maintaining momentum and ensuring sustainability. These were also discussed amongst the group.