

MEDIA RELEASE

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Pilot project delivers £850,000 worth of unclaimed benefit entitlement in east end of Glasgow

The Deep End Advice Worker pilot project which has embedded a financial advice worker from the Greater Easterhouse Money Advice Project (GEMAP) within two GP practices in Parkhead Health Centre has ensured patients received the financial assistance they are entitled to, and freed up GPs' time to focus on health.

The evaluation of the pilot, conducted by Building Connections and published by the Glasgow Centre for Population Health today, reveals that between December 2015 and May 2017, 276 referrals were made to the advice worker based in the two GP practices. Of these patients, 165 engaged with the advice service resulting in almost £850,000 worth of financial gain through income maximisation – equating to, for successful applicants, a median amount of almost £7,000 financial gain per person, per year.

The project also significantly reduced costs for some patients through the identification and management of £156,000 worth of debt by providing advice on different forms of cost reduction support such as fuel costs, securing free bus passes and supporting people to use less expensive forms of credit. Around half of the people engaged with the service were also referred to additional forms of community support such as homelessness, mental health and carer support.

The referral rate of 276 referrals is significant – in the same period, the other 42 GP practices in north east Glasgow made 24 referrals (using an online system as opposed to having an embedded advice worker). Of those referred, 235 or 85% were new to GEMAP.

A fundamental component of the project was the intentional positioning of the advice as an in-house service. Through embedding the financial advisor into the everyday work of the GP practices, they became valued and trusted members of the practice teams. In turn, their trusted status underpinned the development of mutually beneficial working relationships between the advisor and practice staff.

A key attraction of the project for participating GPs was cited as the much needed financial support for their patients. This was mainly achieved through the collaborative production of supporting medical statements for social security applications, which the advice worker drafted through access to patients' medical records. The evaluation found that this reduced the amount of time that GPs spent on patients' non-clinical issues, freeing up their time to focus on vital clinical work.

Reflecting on the specific components of the project that potentially led to these successes, Dr Ronnie Burns, one of the GPs involved in the project said: *"This project is a really good example of collaborative working, it had the fluidity to adapt to the emerging challenges inherent within projects of this nature and has restored my confidence in collaborative working. The financial figures speak for themselves, but also, the patients I have referred seem to have reduced their consultation rates."*

More broadly, Prof Graham Watt (GPs at the Deep End) commented on the potential impact of the project in relation to general practices and the new Scottish social security agency: *"A major challenge facing the new Scottish social security system will be to maximise uptake in areas of greatest need. This project shows how it can be done, engaging with general practices, building on trusted relationships with patients, generating new referrals to advice services and hugely benefiting large numbers of patients."*

Tony Quinn, GEMAP Chief Executive, also reinforced the value of embedding advice into general practice settings, stating *"Working in GP settings seems to provide an ideal environment for accessing clients who don't normally engage with advice provider and the supervised access to patient information seems to lead to better outcomes. Clients reported that the familiar nature of the general practice and the relationships they had with GPs contributed to their engagement with the service. It also appeared to underpin their willingness to discuss issues they traditionally might be reluctant to talk about."*

Jamie Sinclair, Building Connections Programme Manager and author of the report said *“This small scale project demonstrates the importance of people and their relationships with one another in delivering collaborative projects. Our emphasis on embedding the advice worker into the everyday practice through normalising their presence in the practices clearly paid dividends and resulted in significant engagement from the practices. This, in conjunction with the perception of general practices as a trusted and neutral community venue contributed to high levels of people accessing GEMAPs services for the first time and ultimately, significant economic gain for local community members engaging with the support.”*

Partners involved in the original pilot phase of the project are currently testing the scalability of this particular approach to delivering advice. Focusing exclusively upon the east end of Glasgow, advice services are being delivered from an additional seven GP practices (resulting in a total of nine practices with an embedded advice worker). Building on the learning secured by the Deep End Advice Worker project, this phase of the work intends to further develop the methodology underpinning the impact of the initial work at the two practices.

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Notes:

1. The full report '*The Deep End Advice Worker Project: embedding an advice worker in general practice settings*' is available at www.gcph.co.uk from 13th September 2017.
2. This project is part of an initiative between the Wheatley Group, GPs at the Deep End, Greater Easterhouse Money Advice Project Scotland Ltd (GEMAP), the NHS North East Health Improvement Team, Glasgow Centre for Population Health (GCPH) and Building Connections, to test approaches to delivering financial advice in GP settings.
3. The Building Connections programme is funded by the Joseph Rowntree Foundation and supported by Glasgow Kelvin College, the NHS North East Health Improvement Team, GCPH, What Works Scotland and the Scottish Government Leading Improvement Team.
4. The two GP practices involved in this project, the McKenzie & Burns practice, and the Lafferty, Macphee, Dames & Smith practice, serve the fifth and eleventh most deprived practice populations in Scotland, based on the proportion of patients living in the 15% most deprived Scottish datazones, as measured by the Scottish Index of Multiple Deprivation (SIMD). Across the two practices, six GPs support a combined population of 7,903 patients.
5. The roll-out of the advice service to the additional seven GP practices is being co-ordinated by the North East Health Improvement Team and funded by [the Improvement Hub \(ihub\)](#).

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