

Health For Work

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Background

- ▶ Scottish Government Employability Innovation and Integration Fund
- ▶ Identified need for more support for people with mild to moderate health conditions
- ▶ How can we help people navigate through a confusing network of support?
- ▶ New and changing ways of working / Integration / Reduced Funding

Need for Staff to Drive New Ways of Working

- ▶ We have 3 project leads -

Dawn Leslie -HSCP - Community Justice and Substance Misuse Service

Annette Johnston - Tackling Poverty and Inequality Co ordinator

Gillian Robertson - Commissioning and Performance Manager Alcohol and Drug Partnership Support Team

- ▶ Things don't always go to initial plan - need strength and partnership to not give up but find alternative solutions e.g. We failed to recruit key personnel for important part of project so new ways of addressing this being piloted

Target Audience

- ▶ The project has been in operation since January 2018 and has provided additional resources to support unemployed people who have mild to moderate health conditions including
 - ▶ heart and circulatory conditions,
 - ▶ respiratory disorders,
 - ▶ mental health problems such as depression and stress,
 - ▶ drug and /or alcohol use,
 - ▶ Musco-skeletal conditions such as arthritic complaints, back and neck problems

Delivery Model

- ▶ The overarching emphasis of the project however is improving integrated working and providing services at key points where people already attend e.g. GP surgeries, Court. This is not a signposting service as this project offers

- immediate access

- clear identification of need and key a worker

- support through each transition

- An integrated holistic approach

- Efficiencies by people accessing the right service quickly addressing underlying needs

- Warm Handover supporting effective transition or addressing any areas of concern

- Clear customer pathway preventing blockages and / or dependencies on services

Importance of where services delivered from and how they link

- ▶ Priority of the project is to deliver services from where people already go. In our area we have keyworkers in the following locations
 - ▶ Peterhead GP Surgery - 18,336 people
 - ▶ Here for You Centre Fraserburgh average monthly footfall 660
 - ▶ Aberdeen Foyer - average monthly footfall of 500
 - ▶ Peterhead Court - New post waiting footfall numbers
 - ▶ In addition to this we are providing some Steps to Excellence courses as well as trying some new ways of engaging with people who are wanting to try new activities to improve their health such as exercise.

KEY TO ALL OF THIS IS THE WARM HANDOVER THAT TAKES PLACE WITH PARTICIPANTS AND EACH OF THE SERVICES.

Housing cases seen by Adviser in GP surgery

- ▶ Housing issues - these have been very varies from a few links to physical health conditions due to the condition of the property to patient's feeling their landlords aren't listening to them; arrears and threatened eviction, (Patient's can become so consumed by this that their mental health is affected and they can neither deal with it nor move on from it). Unsuitable house for medical reasons. Relationship breakdowns etc. Dealing with public and private sector landlords the experience has been very positive with public and private sector landlords happy to engage with me, obviously with patient consent; to strengthen these relationships can only be a positive thing for all involved

Welfare Advisor in GP Surgery

- ▶ Works well, GPs delighted, seeing frequent fliers less, analysis of these patients before and after will be done to demonstrate time savings to GP practice
- ▶ The GP's are at a disadvantage as they only have 10 minutes per person; with working in partnership and with patient consent, the information provided by the patient at the appointment is recorded so the GP can see what is happening in their patient's life and can act accordingly
- ▶ Feedback - from GP's through the Monthly Practice meeting - they said they were presently surprised as to how this has worked really well, they feel that they are able to offer a better service to their patients and the patient is happier and being dealt with for all of their issues that affect their health - not just medical
- ▶ Feedback from the patients had been overwhelming, they feel that they are being listened to and action taken, sometimes it is not what they want, i.e. going back on to benefit, ultimately they understand and feel secure in the journey they are following - i.e. sorting out their debt; undergoing training courses for work; working on their confidences and looking to the future
- ▶ Part of the feedback form asks about their mental wellbeing and asks if the project has assisted, overwhelmingly they feel that it has, someone has listened to them; their GP is fully aware of their true circumstances.
- ▶ Lastly the patient was asked on the feedback form why they haven't attended CAB or any other help/advice centre. Overwhelmingly the answer was that they couldn't face going elsewhere, when the GP offered the Welfare Rights Officer's service some were very dubious but because the GP had asked them they attended and ultimately they felt valued, supported, listened to and would definitely return to the service if needs be in the future.

Outcomes / Outputs

- ▶ 185 clients have engaged with the project and have been allocated a keyworker.
- ▶ 114 clients have accessed the advice service in the Peterhead Medical Centre
- ▶ over £175,000 financial gain secured for participants working with the advice service
- ▶ all clients have reported an improvement in their health & wellbeing (evaluation feedback gathered)
- ▶ 43 clients with complex needs have been supported to participate in volunteering which has enhanced their employability.
- ▶ Reduction in fail to attend and repeat appointments which equates to savings in time
- ▶ Reduced pressure on GPs re stress related appointments

Lessons learned to date

- ▶ Accessing IT systems was convoluted and time consuming but sorted eventually and hopefully will not be so long next time
- ▶ Get secondment or contract of employment in place long before Welfare Rights Adviser starts working
- ▶ Have a plan 2 if recruitment fails
- ▶ Share information on project with senior management to avoid doubt and potential development of similar projects
- ▶ Partnership, Partnership, Partnership - ensure that key partners such as housing are part of developments

Next Steps

- ▶ We have presented at the IJB Senior management group and going back
- ▶ Have identified someone from our improvement team to support evaluation
- ▶ Identify existing resources that can be redirected to deliver in this way
- ▶ Speaking with national improvement service re support to expand and fund start up costs (not wages)
- ▶ Roll out further what is working well
- ▶ Film being made of impact on participants - Here for you centre
- ▶ How can housing have this as part of service more formalised approach to meet needs housing identifying improved engagement for tenants

► Questions???