



NHSGGC Welfare Reform Priorities 2016-18

Rationale

This paper outlines how NHSGGC will address key priorities on welfare reform. Progress tracking will be assessed through NHSGGC's overall financial inclusion plan and via NHSGGC financial inclusion group. The work has built on a report from the Joseph Rowntree Foundation highlighted what the NHS can do to tackle poverty. The plan was last reviewed in June 2016.

Background

In 2013, NHSGGC developed a plan to mitigate the effects of welfare reform. ¼ of all people negatively affected by welfare reform are in the NHSGGC area. This plan was benchmarked against the National NHS plan on welfare reform and key priorities for action have been identified in light of increasing negative health effects of welfare reform. In addition, it is important to consider that universal credit is being rolled out in the West of Scotland.

Historical developments not covered in the priorities from the overall welfare reform plan include:

- Information on DLA to PIP; Universal Credit on SOLUS screens
- Standard GGC welfare reform presentation being updated
- Universal Credit roll out in GGC areas from Mar – Nov 2015, SOLUS screen message completed
- NHSGGC PIP social marketing campaign, which is being adapted nationally for other Health Boards
- Acute services approach incorporating routine enquiry money worries at point of diagnosis / trigger points also linked to fuel and good poverty interventions
- Christians Against Poverty – financial advice and debt management services information was circulated with specific engagement work in Acute
- National data on DLA to PIP datazones changes disseminated for use in HSCPs
- Testing of an NHSGGC sanctions public awareness campaign & routine enquiry sanctions
- Assessing impact on NHS services via a staff survey monkey on welfare reform
- Regular advertising of financial inclusion services & Credit Unions on SOLUS screens

NHSGGC priorities welfare reform

a) NHSGGC role as a service provider

Issue	Responsibility	Monitoring
Enhance NHS routine enquiry & referral approach across GGC / ensuring those most in need get a service	FI leads to link with care groups	Small tests of change using GGC template if routine enquiry not recorded electronically. (Red) Joint mtg between FI & GBV leads on shared work / opportunities March 2016. (Follow-up in Aug 2016)
Increase emphasis on patients with a new diagnosis & trigger points in patient journeys	Noreen Shields & FI Leads to collate scoping exercise for AMH Operational Group on Mental Health Services approach	Improvement plans in place (Green – update due Aug 2016)
Increased information for Universal Credit for patients	FI Leads	Sharing resources that develop (e.g. Renfrewshire Universal Credit resources) (Green)
Communications	2015-17 plan for regular FI tweets including WR messages	Wider communications work (Green)
Fuel poverty	Action plan with Home Energy Scotland	Action plan there reviewed in Nov, Mar & Jun 16 (Green)
Public awareness of benefit cap exceptions (e.g. PIP / DLA)	HI Leads to identify what have in place including a generic briefing	NS to gather information from HI Leads
Sanctions action	Ascertain from HI leads what areas do on challenging sanctions including appetite for a briefing sheet for NHSGGC staff Explore marketing of sanctions interventions for young people with HI Leads	NS to contact HI Leads

Assess new developments on welfare reform, including the new social security powers for Scotland, new research and the review of the national logic model (July 2016) to decide further actions for NHSGGC.	FI Strategic Group	Develop monitoring as required for new actions.
Staff Attitudes Survey on Employability and Financial Inclusion	Alex Connor, Employment and Health Team	Benchmarking of staff attitudes in July 2016 will help to create action plans to upskill staff on the FI issue and thus increase their interaction with patients and clients on the issue of FI. Final report due Autumn 2016.

b) NHSGGC role as an employer

Money Advice Service Bid for staff with money worries / financial capability issues	Develop bid	NS to liaise on NHSGGC bids
Tax credit changes that may affect NHSGGC staff	Develop staff news article	NS will develop
Staff financial issues – prevalence	Angela Ingram, Employment and Health Team	Employment and Health Team to add questions into the HWL Employee Wellbeing Survey which is carried out every 3 years as part of the award criteria. Due by Dec 2016
Procurement – increase social impact of NHSGGCs economic leverage	GGC Employment and Health Strategic Group. Healthy Working Lives Team.	GB, AmcP, DS, JE and LB exploring Living Wage Commitment with Poverty Alliance. JE presenting at National Planning Forum on NHSGGC approach- opportunities and challenges (April 2016- complete).

		<p>NHSGGC HWL team new performance areas of the team will be into work/employability. It has been agreed that one staff member will focus on Procurement, and will work with the procurement team to look at realising Community benefits clauses in the Board's mid-price contracts</p> <p>Debbie Nelson (Employment & Health Team) has been appointed to work with Procurement Dept on releasing community benefits from NHSGGC suppliers. New legislation means Public Bodies have a duty to demonstrate Community Benefits for any contracts £4m and over. Debbie will work to create governance structure and monitoring template; she will also advise colleagues and suppliers on appropriate Community Benefits clauses on employability and health improvement.</p>
		<p>New legislation has introduced Living Wage as mandatory to employers for age 25 and over.</p>
		<p>NHSGGC assessing adoption of Scottish Living Wage (Anne MacPherson, Gordon Beattie and HWL's team).</p> <p>Health Improvement & inequalities group (HIIG) agreed that the Employment and Health Strategic Group will now report to them. A paper is being prepared to inform Chief officers of this intention.</p>

	Deliver actions agreed from GGC Low Pay seminar work. (EHSB)	A template is being used to track any updates as a result of the Low Pay Seminar.
<p>In house money advice for NHS staff</p> <p>Scope an approach to identify staff who may be at risk (e.g. requests for more hours, early pay, flexible working)</p> <p>Could there be / is there a module that is appropriate for all staff, not just patient-facing staff, and to be about own finances / employment</p> <p>More emphasis as FI as a strategic golden thread in the GGC Public Health function and increase with HWL function</p>	<p>NHSGGC endowments bid for staff money advice service not funded – Glasgow HSCP – North East pilot in Lightburn Hospital Jackie will take to HR group (e.g. if on extra hours for more than 6 months guidance extra A/L etc)</p> <p>Noreen to raise Donna Burnett national materials there from SG</p> <p>End of year report & regular updates to HIIG</p>	<p>Assess learning. Relunched pilot</p> <p>Long term work which Jackie will link in with re HR portal (Green)</p> <p>Health Scotland have agreed to review the national resources & develop a dissemination plan</p> <p>http://www.staffgovernance.scot.nhs.uk/improving-employee-experience/working-well/financial-capability/ (Green)</p> <p>FI Group will become a subgroup of HIIG – assess status when this develops. Prepare a short report for HIIG including reference to the Board paper (Report date TBC)</p>