

## **16. EMPLOYABILITY, FINANCIAL INCLUSION AND RESPONDING TO THE RECESSION POLICY FRAMEWORK**

### **16.1 Analysis of Local Position**

16.1.1 Strategic responsibility for employability and financial inclusion in Renfrewshire is firmly embedded in Community Planning through the Wealthier and Fairer Renfrewshire Group. In 2008, Renfrewshire Council made available £150k in addition to existing resources to support financial inclusion initiatives, particularly in response to the recession. The more effective of these initiatives have been continued into 2010/11.

16.1.2 Renfrewshire CHP is directly involved in four employability and financial inclusion services:

- a. Renfrewshire Workforce Plus (RWf+) has brought together over 100 staff from 13 partner organisations delivering 23 components of employability, including health. The health components are delivered via Open Futures; REMPLOY and RCHP
- b. Pathways Advisory Service (PAS)  
Some GP surgeries have a personal Job Centre Plus adviser and patients on health-related sickness benefits are referred for benefit eligibility checks, discussion about a return to work and the advisor has access to the Condition Management Programme.
- c. Condition Management Programme (CMP)  
Referrals are via the PAS adviser and GPs. A CBT approach is used to assist clients to look at ways of managing their health conditions with a view to returning to work. CMP staff participates in GP registrar training and are the newly appointed hosts to deliver the Governments 'fit for work service' locally.
- d. Advice in Primary Care  
A new initiative commenced in February 2009, funded by Renfrewshire Council and the CHP, to make money advice services more accessible through primary care. Two advisors recruited through the Citizens' Advice Bureau work in Health Centres and practices across Renfrewshire.

We also take advantage of financial inclusion training opportunities and use the Directory for Services.

16.1.3 In 2008, we carried out a scoping exercise to assess employability activity across the CHP. The results showed that a minority of CHP staff include employment and aspirations to work as part of a holistic assessment. A large number of the 100 frontline staff surveyed did not feel confident in asking clients about their employment status. However, in general, health staff reported they would do more if there were adequate structures in place and their capacity increased to do this.

Following on from this work, a two year programme was established, funded by FSF, European and CHP monies, employing three members of staff within the CHP to work as part of RWf+.

### **16.2 Numeric Analysis**

16.2.1 The unemployment figure in Renfrewshire recorded in March 2010 was 5,2734 (5% of the working population). This represents an increase of 644 (14%) from April 2009. However, the unemployment figure only records those in receipt of Job

Seekers Allowance (JSA) and a more representative figure of the levels of individuals out of work would be the 'economically inactive' figure which stands at 21,400, an increase of 1,700 individuals (9%) from September 2008. Variations within Renfrewshire follow similar trends to other inequalities in health with St James having the highest unemployment rate at 10.3% whilst Houston and Langbank had 1.42%. Disability Living Allowance (DLA), a health-related benefit, saw an increase of 1.2%, (150 claimants) in the period April to June 2009, and Carers' Allowance increased by 1.4% (20 claimants). The health condition with the highest number of claims (45.83%) is 'mental and behavioural disorders', the second highest, 'diseases of the musculoskeletal system and connective tissue' a much lower 12.8%.

- 16.2.2 The Financial Advice in Primary Care Initiative described in 1.2(d) above has achieved the following outcomes:

	<b>Feb–Dec 2009</b>
<b>Outcome</b>	
Income Generated from Benefit Claims and Tax Credits	£21,846
Value of Debt Under Management	£308,057
Number of Debt Repayment Plans	17
Other Client Financial Gain (inc. debt written off)	£91,215
Number of clients	95

- 16.2.3 The Renfrewshire Workforce Plus Initiative described in 1.2(a) has achieved the following outcomes:

	<b>Jun 2008 – Dec 2009</b>
<b>Outcome</b>	
Number of clients referred	211
Male clients	112
Female clients	99
Clients stating mental health as a barrier to work	102
Clients stating addictions as a barrier to work	15
Number of clients living in 15% datazones	80

### **16.3 Health Gaps and Key Issues:**

- 16.3.1 The first year of the Advice in Primary Care Initiative has demonstrated that this initiative has been able to engage with people who have complex needs and do not easily engage with alternative advice services. Evaluation is ongoing but there are early indications that this engagement is due to immediate access and to referral through primary care workers. One advisor will be funded for another year through Fairer Scotland Fund and the second post will continue but focus on working in Boots Pharmacy at Braehead. This is being funded through the Walk-In Pharmacy Project. In this second year, we will seek to embed good practice in mainstream and financial and advice services.
- 16.3.2 We need to support families better in accessing benefits and financial advice. The implementation of Healthier, Wealthier Children will both establish a service for this group and seek to improve pathways in the longer term.
- 16.3.3 We will address the low level of staff inclined to speak to clients/patients regarding employment, thereby seeking to maximise opportunities for directing people to the appropriate advice/service.

16.3.4 The health component within Renfrewshire Workforce Plus identified a gap in service provision for people at risk of losing their job when experiencing mental health difficulties either at work or impacting on their work as funding criteria was aimed at those 'not in work'.

## 16.4 Outcomes Table

### Employability, Financial Inclusion and Responding to the Recession

Outcome	Actions/Activity Required 2010/11	Change/Progress/Performance indicators
<b>Employability to tackle poverty and income inequality</b>		
Our patients have been given the opportunity to maximise their employability aspirations.	<ul style="list-style-type: none"> <li>- Entities have a plan in place to assess employability aspirations of patients and ensure the majority of NHS staff have raised awareness and capacity and know why, when, where and how to refer patients for employability advice.</li> <li>- Partnerships and acute have engaged with employability advice providers to build clear pathways to support.</li> <li>- We will learn from the long term conditions work and the core standards being developed.</li> </ul>	<ul style="list-style-type: none"> <li>- Number of frontline CHP staff attending Employability Awareness training</li> <li>- Number of patients referred to employability advice and outcomes.</li> <li>- Number of referrals resulting in a positive outcome.</li> <li>- Increase in awareness in the staff attitudes survey.</li> </ul>
We have supported people claiming unemployment and disability benefits into NHS jobs.	<ul style="list-style-type: none"> <li>- RCHP has a plan to support those who are most disadvantaged to access work placements.</li> <li>- RCHP has implemented the Work Placement Policy and the Volunteering Policy to support employability.</li> </ul>	<ul style="list-style-type: none"> <li>- Numbers of work placements.</li> <li>- Volunteer numbers and destinations.</li> </ul>
We have increased NHSGGC staff retention for people who are at risk of losing their job as a result of social circumstances or illness.	<ul style="list-style-type: none"> <li>- HR policies support the employability agenda, improve retention and support career development opportunities.</li> <li>- Establish an Employment Advisor Pilot (EAP).</li> </ul>	<ul style="list-style-type: none"> <li>- Monitor staff retention rates for people at risk of losing job.</li> <li>- Monitoring of career development.</li> <li>- Monitor NHS Renfrewshire staff referrals to EAP pathway.</li> </ul>
We have improved the health of our staff and actioned the requirements of Health Works.	<ul style="list-style-type: none"> <li>- Health Works is embedded into core business to deliver the national requirements.</li> <li>- Work towards achieving Healthy Working Lives Silver Award by March 2011.</li> </ul>	<ul style="list-style-type: none"> <li>- Progress monitoring and reporting on national requirements.</li> <li>- Number of local employers working towards HWLA.</li> <li>- HWL Silver Award achieved.</li> </ul>

## Employability, Financial Inclusion and Responding to the Recession

Outcome	Actions/Activity Required 2010/11	Change/Progress/Performance indicators
	<ul style="list-style-type: none"> <li>- Local employers are registered and working towards the Healthy Working Lives Award.</li> </ul>	
<p>We have maximised the organisation's contribution to economic regeneration to reduce poverty and income inequality.</p>	<ul style="list-style-type: none"> <li>- New capital investments contain social/community benefits clauses.</li> <li>- Procurement of goods and services meets NHSGGC's employability aspirations.</li> <li>- Commission services from the 3rd sector do so on a rolling or three year contract in order to develop sustainability in the sector.</li> <li>- Contribute to employability and financial inclusion partnerships through Community Planning and with the business sector.</li> </ul>	<ul style="list-style-type: none"> <li>- Proportion of 3rd sector commissioning on rolling 3 year contract.</li> <li>- Number of NHSGGC contractors engaged in Healthy Working Lives Award.</li> </ul>
<b>Financial Inclusion and reducing the impact of poverty</b>		
<p>We have alleviated the financial consequences of illness for patients and the impact of financial concerns on recovery.</p>	<ul style="list-style-type: none"> <li>- We will develop a plan to assess the financial inclusion needs of patients and ensure the majority of NHS staff know where and how to refer patients for financial inclusion advice.</li> <li>- We will use core standards and engage with financial inclusion advice providers to build clear pathways to support.</li> <li>- Renfrewshire CHP will be an active member of Wealthier and Fairer Renfrewshire.</li> </ul>	<ul style="list-style-type: none"> <li>- Number of patients referred for financial inclusion advice and outcomes.</li> <li>- Increase in awareness in the staff attitudes survey.</li> </ul>
<p>We have reduced the impact of poverty on early years and on those in greatest need.</p>	<ul style="list-style-type: none"> <li>- We will ensure that child poverty is a clear priority for Wealthier and Fairer Renfrewshire. We will disseminate the learning from Healthier Wealthier Children</li> <li>- We will learn from Keep Well as the lessons from other areas are disseminated.</li> <li>- Health improvement programmes consider</li> </ul>	<ul style="list-style-type: none"> <li>- Reductions in child poverty (DWP).</li> </ul>

### Employability, Financial Inclusion and Responding to the Recession

Outcome	Actions/Activity Required 2010/11	Change/Progress/Performance indicators
	financial poverty aspects.	
We have provided staff with support to deal with financial issues which might impact on their work situation.	<ul style="list-style-type: none"> <li>- Each entity takes a proactive approach to supporting staff with financial issues to increase staff retention.</li> </ul>	<ul style="list-style-type: none"> <li>- Increase awareness of support available to staff faced with financial issues.</li> <li>- Record and report number of staff in receipt of support.</li> </ul>
<b>Monitoring the impact of the recession on NHS services and health</b>		
We have taken a horizon scanning approach to the recession so that we can respond to changes in demand on services and alleviate the consequences on health in the longer term.	<ul style="list-style-type: none"> <li>- Indicators are established and monitored which relate to the impact of the recession on health to inform planning frameworks and development plans, particularly in relation to mental health.</li> <li>- NHSGGC makes a visible contribution to alleviating the impact of the recession, eg, Modern Apprenticeship placements and supporting those who are most disadvantaged to access work placements and NHS jobs.</li> </ul>	<ul style="list-style-type: none"> <li>- Reporting on indicators.</li> <li>- Numbers of Mas, workplaces and outcomes.</li> <li>- Number of placements in MA scheme and other training programmes.</li> <li>- Number of placements resulting in positive job opportunities.</li> </ul>

## **16.5 Finance and Workforce**

16.5.1 Much of our activity in the area of Financial Inclusion is funded on a temporary basis. This includes:

- CAB outreach workers (one in primary care and one in pharmacy) (to March 2011)
- Income maximisation and development officer for Healthier and Wealthier Children (to September 2011)

We need to use the next year (2010/2011) to build capacity and confidence in our wider workforce and to create clear pathways for patients/clients.

16.5.2 Our small team of Employability and Health staff are also partially funded on a short term basis. The CHP has contributed a Health Improvement Lead, but the Health & Employability Senior and Practitioner posts are funded from the Fairer Scotland Fund and European money which cease in March 2011. We will discuss this with Community Planning Partners.