

***Addressing Child Poverty in Scotland
Financial Inclusion Pathways Event***

22 February 2017: Event Summary



Contents

- Section 1: Event Background
- Section 2: Event Programme & presentations
- Section 3: Facilitated Discussion Themes
- Section 4: Attendances, Evaluation results and learning from the event
- Section 5: Next Steps for event partners

Section 1: Event Background

The development of financial inclusion referral pathways between NHS services and advice services in parts of Scotland are resulting in positive outcomes for children and families in helping to mitigate the impact of child poverty. The ***Addressing Child Poverty in Scotland Financial Inclusion Pathways Event*** was organised to stimulate discussion on how to progress the development of financial inclusion pathways in early years, children and families services in Scotland. [NHS Health Scotland](#) worked in partnership with [Child Poverty Action Group Scotland](#) and [The Improvement Service](#) for Local Government to plan, and deliver, the event.

The event aimed to:

- share evidence from a national perspective,
- exchange examples of existing financial inclusion referral pathways and,
- harness information and resources to support the development of local partnerships and pathways.

NHS Health Scotland has produced a '[Financial Inclusion Referral Pathway Toolkit](#)' to provide practical support to those developing or improving work between early years services and financial inclusion organisations. The event was also an opportunity to further promote this resource.

Section 2:

Event Programme

- Welcome and Introductions
Chair: Kerry McKenzie, NHS Health Scotland
- *What is the child poverty challenge in Scotland?*
Hanna McCulloch, CPAG Scotland
- *Children and Young People – research, evaluation frameworks and good practice referrals*
Allison Barnes, Money Advice Service and Sandra Sankey, Improvement Service
- Project Showcase and Q&A
- Table discussions:
 - What's happening in your area?
 - What needs to happen?
 - How can this be achieved/what's required to achieve this?
 - Local and national actions?
- Feedback from table discussions
- Actions to take forward
- Closing remarks from the Chair

Event Presentations

Presentations from speakers are available on the [Health Scotland website](#).

Section 3: Facilitated Discussion Themes

Group discussions allowed for the exchange of learning between existing projects and referral pathways, from the perspective of event attendees. Facilitators posed the following questions and generated the following responses (in summary) from delegates on the day:

Q1. What's happening in your area in terms of financial inclusion pathways between health and advice?

<ul style="list-style-type: none"> - Midwifery Team referral pathway - Health Visiting referral pathway - Early Education (nursery) - Dunfermline Food Bank - Trussell Trust - McMillan Improving Cancer Journey Team - West Lothian – Prevention and Intervention Money Advice Project - Borders – Housing Support Team - Renfrewshire Advice Works - NHS Lothian - Drug Rehabilitation Services Partnership Pathway (COSLA) East Ayrshire - Money Advice Partnership website: https://eamoney.co.uk/ - East Ayrshire HSCP – Community Connectors: http://www.cvoea.co.uk/community-connectors/ 	<ul style="list-style-type: none"> - North East- Primary Care – Money Advisors - North Lanarkshire – Scottish Welfare Fund - Dundee - 14/15 organisations providing advice and support - South Lanarkshire - Community Links Project - Greater Glasgow & Clyde- Nursing Admissions Pro-Forma - routine enquiry and referral - West Lothian GP Surgery Co-Location Model - Employability Services - Telephone Advice Line (test of change) - Community Mental Health Surgeries - Grampian - Cash in Your Pocket (umbrella organisation) - Grampian - Smoking Cessation Service Pathway
--	--

Q 2 & 3:

What needs to happen to further build on and support these projects, or enable them to start up in other areas? And what's required on local and national levels to support the projects?

Referral pathways: Referral pathways need to become part of universal services and be supported by staff who have a basic level understanding of why they are important, and who have confidence in referring to advice services.

Advice pathways could be strengthened with foodbanks. These should be a last resort once everything else is exhausted e.g. Scottish Welfare Fund and hardship appeals.

Measurement standards: More meaningful data collection and consistent reporting is required. The introduction of measurement standards would feed into a national performance framework, helping to build the evidence base and identify the longer term impact to encourage a more sustainable model (also as part of a solution to longer term funding investment). We should also consider and share evidence of outcomes for each pathway partner e.g. health (midwifery, health visiting, primary care teams), advice providers and of course the benefit (financial gain and other) to individual children and families.

Funding of advice: A strategic review of advice provision funding is underway, this needs to support financial inclusion pathways between NHS and advice services. The review may identify that there are multiple projects being funded to do the same activity – it is important to avoid duplication and to use funding more creatively, joining up approaches particularly in the tight economic climate. But, partnership bids can signal a reduction in budgets.

Social return on investment studies can provide the demonstration of impact based on funding received.

What happens when services cease to exist? Are there exit strategies in place and what is the impact of the removal of the service?

Capacity: Capacity building is required across the system. Good quality advice is required, which is supported by training & development and not just initiative-based. Examples are noted where training sessions have been offered but poorly attended despite request (no backfill or budget to support).

Local Leadership: There is a need for local leadership and champion(s) for each area. Their responsibility should be dedicated to promoting, developing and supporting partnership working, and they should be dedicated to addressing child poverty. The partnership would help build and strengthen more robust referral pathways between health, children and families and financial inclusion services.

Scale Up: There is good opportunity to scale up what we know works. Sustainable funding is crucial, with a long-term funding commitment required. Most projects are currently short-term funded. Furthermore, financial inclusion referral pathways should not be a project, but instead a mainstream service. National accountability (leadership and communication), as a means of consolidation across the sector, would assist.

Good relationships and simple referral processes are key to securing buy-in from referrers for development and scale up.

Networking and learning exchange opportunities: there is an appetite for formalising more networking opportunities and information exchange (various formats) for the purposes of sharing examples on what works and to facilitate greater collaboration and connection across early years, children and families (including the Children & Young People's Collaborative). This would also strengthen advocacy for early intervention.

Knowledge exchange would help to avoid unnecessary duplication by allowing for the sharing of intelligence, whilst keeping local contexts in mind (as what works for one service may not work for another).

Training: training needs should be explicitly identified and supported for the wide range of professionals. Education should be ongoing, relating to the challenge that short-term funding presents in regard to staff turnover, especially within advice provision services. This should be coupled with improved demonstration of impact and more sustainable funding. A feedback loop for all pathway partners and practitioners is important.

The content of training must challenge assumptions and stigma, consider the use of language and consider how to treat all patients/clients with dignity.

It is important also, to consider the financial wellbeing of our own workforces.

Section 4:

Event Attendances

40 delegates attended the event on the day. Attendees can be categorised mainly as:

- Money Advice - 10
- Health – 6
- Local Authority - 17
- Other - 6 (including Scottish Government (Policy Lead), Scottish Legal Aid Board (Policy Development Officer), National Third Sector GIRFEC (Project Director))

Evaluation Results

53% (n=21) of event evaluations were completed. The average rating for '**overall satisfaction**' of the event was **9 out of 10** and delegates reported (in summary) to have found the following '**most useful**' about the event:

- *'Projections on child poverty & information on social security.'*

- *'Discussions about how to link advice services within health settings, particularly GP practices.'*
- *'Hearing about some quality practice to share wider.'*
- *'The networking and sharing of evidence & practice was excellent and incredibly helpful and useful.'*

Delegates reported that they **'mainly gained'**:

- New Ideas - 18 delegates
- Improved Knowledge - 17 delegates
- Increased awareness - 12 delegates
- Enjoyment - 13 delegates
- New contacts/networking - 13 delegates
- Nothing - 0 delegates

Delegates documented **key takeaway messages, final thoughts or perspectives** (in summary) as follows:

'It's not just me facing these issues.'

'We need universal recognition that health can be improved by linking people with money advice and that this can reduce the need for health interventions.'

'More needs to be done to raise awareness of the projected 50% increase in child poverty over the next 5yrs. Specifically to raise awareness of the responsibility for supporting families to access money advice services, potentially developing systems and the notion for a trusted intermediary to support families over longer periods of time.'

'I have a renewed energy to look at the interface between Community Planning Partnerships, planning and practice- partnership working is key.'

'National culture change is required. Promotion of work tackling poverty is everyone's job. There is an apparent consensus of the need to have commitment to sustained approach.'

'There are already good interventions being delivered. Their good work can be used to generate buy-in at my organisation!'

'How well informed are Education Services in identifying and supporting families to access money advice services?'

'What more midwives can do to engage through routine enquiry in regard to the universal pathway? Despite having tried many different ways, a real challenge remains.'

'What amazing work we are all doing in Scotland! There's a real need to co-ordinate/consider a sustained national roll out.'

Delegates documented how they will '**apply learning**' from the event (in summary) as below:

- Continue sharing practice, research and evidence of impact
- Follow up with network contacts established today and find out more about what's happening in my local area
- Propose team discussion to assess current work/activity, knowledge and skills on financial inclusion referral pathways. Explore development of work/partnerships to develop models of working
- Consider further events to keep contacts and ideas forming
- Progress new ideas for partnership working
- Share learning with our third sector network
- Streamline our planning process- need to end silo working – tackling poverty should underpin whole system
- Engage with the Child Poverty Bill consultation - make it the best it can be, push poverty up the political agenda
- Generate dialogue at a national level to take this work forward, explore more sustainable funding routes via Scottish Government
- Continue developing our new poverty strategy
- Use learning and information from today to support plans in Health and Social Care Partnership
- Engage with health professionals about next steps using quality improvement methodology

Learning from the event

An opportunity to participate in the recording of 'VoxPop' short video clips was offered to all event delegates. These captured their experiences and thoughts on learning and actions arising from the event.

Watch the [VoxPop recordings from the Improvement Service](#) to gain insight into the experience and learning on the day from participants.

Section 5:

Next Steps

We anticipate the following as next steps for the consideration of the event planning partners for this event:

- To scope the delivery of a larger scale event/future forum, bringing back event participants and exploring whether ideas have been implemented, as well as discuss what national action can be taken to further support their pathway development. The audience would be extended for this (potentially in both number and scope)
- To further consider how the learning from this event (& any follow-up session) can turn into development work, funding for services or help to build on the body of evidence
- To establish a mechanism for continued information exchange and a means to enable partners and those within the 'community of interest' to communicate and exchange information routinely
- To advocate for and/or develop a more co-ordinated national approach to this agenda
- To consider how we can achieve a tiered approach to support families and focus more on prevention by encouraging access to specialist support at a much earlier stage