

UCL Centre for Access to Justice

The Health Justice Landscape in England & Wales

Social welfare legal services in health settings

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The
Legal
Education
Foundation



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ACCESS TO JUSTICE

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Foreword

Research on unmet legal need and understanding of the causes of health inequalities point separately, but consistently, to the link between law and health. Two decades of research at UCL and internationally has established the health-harming effects of unresolved legal problems that contribute to health inequalities. Individuals with poor mental and/or physical health and those who are living on a low income are at increased risk of social welfare problems. They are also more likely to have difficulty accessing support and advice for such issues. Since the reductions in public funding for community legal services, there is evidence that complex socio-legal issues are over-spilling into NHS General Practice, as GPs become the last source of free professional advice in the community.

Against this background there is a growing interest in how the legal and health systems can be better joined together in support of improved population health and reduced health inequality. One practical response is the development of partnerships between doctors and lawyers to integrate social welfare legal services into healthcare settings. In the UK, examples of such health justice partnerships have been in place for more than 20 years and in 2015 the Low Commission mapping of social welfare legal services in healthcare settings demonstrated considerable activity and a varied range of services.

In January 2016 the UCL Centre for Access to Justice established a small health justice partnership in East London, involving a student advice clinic located within a GP surgery. As part of their strategic focus on health justice, The Legal Education Foundation funded us to research the impact of this integrated service on the health and well-being of patients using the service and the value of the service to GPs. The results of that research will be available early in 2019.

Following on from this work, The Legal Education Foundation asked us to scope the feasibility and potential value of establishing a national health justice strategy. The purpose of such a strategy would be to catalyse policy interest in developing integrated health and social welfare legal services, support the work of existing and new partnerships, and develop a robust evidence base.

The first step in the feasibility study was to map, as far as possible, the range of existing services and to describe the work that is being done. This mapping study is the result of that exercise. It also sets out the sources and sustainability of funding for such services. This is the most comprehensive mapping of social welfare legal services in healthcare settings in England and Wales to date and will be an invaluable resource for the further development of the field and future policy discussions.

We are most grateful to all those services who generously gave their time to contribute to this important piece of work and hope that you will find it of interest and value.

Professor Dame Hazel Genn
Executive Director, UCL Centre
for Access to Justice

The Legal Education Foundation

The Legal Education Foundation is a grant making trust that helps people better understand and use the law. We operate across three strategic objectives: increasing public understanding of the law; improving the skills and knowledge of lawyers; and increasing access to employment in the profession. We do this so that those working in the law can be well equipped to meet legal needs and so that individuals and organisations can learn about how to use the law to secure rights, fair treatment and protection. Since our launch five years ago, we have distributed £21million through 370 grants. In 2018/19, we will distribute around £5million. We place a particular emphasis on being evidence-led and on the role of digital technology.

The Foundation is interested in the role that resolving legal need plays in bringing about a range of wider positive outcomes outside law. Amongst these is the contribution that addressing, for example, issues around welfare benefits, debt, housing, employment and other areas can make to improved health and wellbeing. This is both about harnessing the role of the law to make a positive contribution to people's lives, and about helping those delivering legal services to demonstrate that what they do is important to a range of other institutions.

Work on integrating law and health has been the focus of a cluster of themed grants by the Foundation. Central to this cluster has been a series of grants to UCL Centre for Access to Justice for work led by Professor Dame Hazel Genn, including the mapping study reported here. This work has revealed a considerable field of service delivery reflecting a combination of long-standing good practice in the UK and internationally and areas that offer great potential to expand and to increase impact. This is happening at a time when health services recognise the urgency of shifting budgets and services towards prevention and to tackling the causes of ill health, not just the symptoms.

There is a strong case for integrating and embedding social welfare legal services in the health sphere, providing these services where people most need them and at the earliest opportunity. The Foundation is committed to exploring this further to find effective strategies and service models that work for clinicians and others in health services, for legal specialists and, most of all, for the people using the health system.

The UCL Centre for Access to Justice

Located within the UCL Faculty of Laws, the Centre for Access to Justice combines the unique advantages of clinical legal education with the provision of pro bono legal advice to vulnerable communities, predominately in the areas of social welfare, housing, community care, education and employment law. UCL is unique in its incorporation of casework and social justice awareness into the law degree programmes we offer. Working in partnership with charity organisations and legal professionals, the Centre provides legal assistance to members of the local community while giving students an opportunity to gain hands on experience in meeting legal needs.

UCL iLAC has achieved many positive outcomes for members of the local community

The UCL integrated Legal Advice Clinic

The UCL integrated Legal Advice Clinic (iLAC) launched in January 2016 at the Sir Ludwig Guttman Health and Wellbeing Centre in Newham, one of England's most deprived boroughs. It provides advice, casework and representation across a range of legal issues, with specialisms in welfare benefits, housing, community care and education law. The clinic receives referrals from GPs in the Liberty Bridge Road General Practice, as well as drop-ins from patients attending other clinics at the health centre, other GP practices and the wider local community. The UCL iLAC is staffed by UCL law students working under the supervision of experienced, qualified lawyers and advisers. Since its launch it has achieved many positive outcomes for members of the local community. Research is being undertaken at the UCL iLAC, investigating the health impact of legal assistance and the role and value of partnership between health and legal services. Since October 2018 iLAC has been located in dedicated premises in Stratford.



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Acknowledgements

We thank the organisations who have supported this work by providing us with information and circulating our calls for evidence. Our thanks to the Advice Services Alliance, Advice UK, Association of Palliative Care Social Workers, Citizens Advice, Macmillan Cancer Support, Maggie's Centres, Money and Mental Health, National Association of Welfare Rights Advisers, Norfolk Community Advice Network, Shelter, Social Action for Health and Youth Access. We also thank the local Health and Wellbeing Boards across England and Wales who provided information on relevant services in their local areas.

We would like to give special thanks to the professionals working in services who contributed their knowledge and professional expertise to the information in this report. We are grateful to all those who completed the survey or took part in conversations with our researcher.

Our thanks also to the Low Commission and Consilium Research and Consultancy Ltd who gave their support for this project and provided insight and expertise in guiding the work.

Summary

Background

Social welfare legal problems are significant underlying causes of illness and have a substantial impact on health. They include issues relating to housing, benefits, debt, employment and family law. These problems can be addressed and resolved through specialist legal advice and assistance. Provision of legal assistance services in healthcare settings can both improve access to advice and support health services to manage non-clinical demand. Collaborations between health and social welfare legal services exist across the country, but little is known about these partnerships and their activities. This study builds on previous work to update knowledge of current services.

Methods

We sought to map services providing social welfare legal advice and assistance in healthcare settings across England and Wales. Information was obtained by requesting input from organisations across health and advice sectors, distributing a call for evidence through professional mailing lists and searching information resources. An online survey was circulated and sent to the identified services to gather data on key aspects of their work, such as the types of advice provided and the nature of their connections with healthcare. A number of services were contacted to provide more in-depth information, in order to better understand their activities and explore their experiences of partnership working.

Results

More than 380 services were identified through the search. The types of organisations providing advice included national and local charities, local authorities, health services, independent organisations and partnerships of providers. The most common advice organisations working with health services were Citizens Advice and Macmillan Cancer Support.

The findings point to an active landscape of services working to provide assistance on social welfare law to patients and healthcare services

The nature of connections between advice and health services varied. While some partnerships worked according to a model that was replicated across the country, most were unique arrangements built independently through local relationships. The majority of social welfare legal services were physically located in healthcare settings (66%) and were most often connected to health services through a referral-based system (86%). The most common healthcare settings that social welfare legal services partnered with were GP practices (49%), followed by mental health services (34%) and hospitals (34%); a wide range of other settings were also represented, including hospices, care homes and other community health centres.

Advice was most often provided for welfare benefits issues (93%), followed by housing (64%) and debt (64%). Support included help filling in application forms for benefits, representing people at tribunals and taking direct action on behalf of individuals. The social welfare legal services had a broad range of health-related aims, including to improve mental and physical health, reduce pressure on health services, manage non-clinical needs, support recovery and independence, improve integration of support, and alleviate poverty and its impact on health, among others. Funding was mostly short term, with almost 40% of services having funding for less than a year. Financial support came mostly from charities and local authorities; less commonly, funding was also received from

local CCGs and other NHS sources. Since the last mapping study in 2015, there has been both change and loss of social welfare legal services connected with healthcare.

Professionals delivering social welfare legal services highlighted both challenges of working in healthcare settings and enablers for developing successful partnerships. The challenges included resource constraints, difficulties engaging with healthcare professionals and developing shared working practices, low levels of understanding of the role of legal advice in health, and the need to demonstrate hard outcomes. Facilitating factors included building strong local relationships, developing shared goals and understanding, maintaining ongoing engagement and communication, having commitment from both partner services (advice and health) and having local champions. Being physically co-located and commissioned by local NHS partnerships also helped social welfare legal services to integrate and become part of accepted ways of working, as it demonstrated recognition of the strategic role that social welfare legal services play in health systems. When effective partnerships were established, they were found to be highly valued by healthcare professionals.

Discussion

This study is the most comprehensive mapping exercise of social welfare legal services in healthcare settings in recent years. It provides an indication of current activity across England and Wales, though may not have identified all the relevant services operating.

The findings of this report point to an active landscape of services working to provide assistance on social welfare law to patients and healthcare services. The development of these health-linked legal services has been bottom-up, leading to diverse and innovative examples. This lends itself to further study of service models and good practice in this area, and also prompts various issues at a nationwide strategic level. For example, there is currently no overarching strategy for provision of social welfare legal assistance in healthcare, uncoordinated services and patchy coverage, fragile funding arrangements and a lack of collective approaches to evaluation.

Information on the provision of social welfare legal services in healthcare is not widely recorded and there is currently no resource to identify local examples. A platform to generate and share information could accelerate progress in this area, and assist those wishing to plan and implement services, share learnings and practice, build collaborations and undertake research.

The current move towards integrated care and social prescribing in the NHS presents an opportunity for wider development of partnerships between social welfare legal services and healthcare services, facilitating access to justice and improved wellbeing for individuals.

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Background

Introduction

Social welfare legal problems are matters of everyday life that can be addressed through specialist legal advice and assistance; for example, issues relating to housing and homelessness, welfare benefits, debt, employment and family issues, among others. Social welfare legal problems are known to have a significant reciprocal relationship with both physical health and mental wellbeing. Health impacts can occur as direct consequences of social welfare legal problems (for example, as a result of poor living conditions), or through the many detrimental impacts of stress and poverty¹ via behavioural and psychosocial pathways. Research has shown correlations between increasing numbers of social welfare legal problems and increasing likelihood of poor health, particularly mental wellbeing.^{2,3} People vulnerable to social exclusion and those in ill health are also more likely to develop such problems.⁴ As social welfare problems are closely linked, one will often lead to another and individuals can develop multiple problems in their lives;⁵ therefore, early access to advice is essential in preventing a downward trajectory that can have a strong effect on health over time.

Collaboration between healthcare services and social welfare legal services is one approach to improving access to advice, reaching the people most in need and addressing the underlying causes of ill health and inequalities. Legal aid cuts and reduced local authority resources have severely affected access to social welfare legal assistance^{6,7,8} and GPs have seen increasing numbers of patients presenting with unaddressed social welfare issues,⁹ leading to rising workload.¹⁰ Health professionals are ideally placed to identify individuals experiencing hardship, but are not equipped to provide patients with the necessary legal support.¹¹ Therefore, integrated social welfare legal services have the potential to save

time and reduce pressure on healthcare services. Research also suggests that delivering social welfare legal services co-located with healthcare can improve access for people who may not otherwise seek advice.^{13,14}

Providing social welfare legal assistance creates opportunities for people to improve their circumstances and make positive changes in their lives, enabling them to take better care of their own health and wellbeing. Growing evidence suggests that social welfare legal services can have beneficial health impacts, through improving financial health and housing stability and reducing stress and anxiety.¹⁵ A recent quasi-experimental study showed that individuals accessing welfare advice in primary care had greater improvements in common mental disorders and wellbeing over time, and a corresponding reduction in financial strain.¹⁶ Earlier research also suggested a range of other potential beneficial health impacts, including improvements in health behaviour, better sleeping patterns, reduced blood pressure, reduced medication use and reduced contact with primary care teams.¹⁷

The importance of partnership between healthcare services and providers of social welfare legal services is recognised internationally. In 2006 the US National Center for Medical Legal Partnership was founded, an organisation that champions the provision of legal expertise in healthcare settings to address communities' health-related social needs.¹⁸ Health Justice Australia has recently been established and is working to create health justice partnerships across the country that will facilitate better health and justice outcomes for the population.¹⁹ In the UK, there is a growing movement towards 'social prescribing', whereby healthcare professionals refer patients to a range of non-clinical services in order to support wellbeing more holistically.²⁰ Referrals are most often triaged by a social prescribing 'link worker'

who connects individuals referred by medical professionals to the local support services. Within current discourse around social prescribing there is no recognition of a hierarchy of need: the services offered could range from exercise and opportunities for social interaction to self-help, arts and healthy living advice. However, without the basic foundations for a reasonable quality of life, such as income and housing, other support services are likely to have limited effectiveness in improving health.^{21,22} It is arguable that social welfare legal services should form a core component of social prescribing initiatives to address the most pressing needs and empower individuals to improve their circumstances.

Services exist across the country providing social welfare legal services in healthcare settings, but little is known about the scale of this activity, the nature of services currently operating and the kind of work being undertaken. This information is needed for a variety of purposes, including to support new and existing services to share practice and learnings, contribute to policy development in the field, develop collaborations for research and advance understanding of the value of these partnerships. Building on an initial mapping study carried out during an evidence review in 2015,¹⁵ we sought to undertake a comprehensive search to identify relevant services across England and Wales and to describe their work. This research was commissioned by The Legal Education Foundation.

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Objectives

- To update current knowledge of services across England and Wales providing social welfare legal services in healthcare settings.
- To describe the nature of the partnerships, including the types of social welfare legal services involved, the health services they connect with, and the ways they work together.

Definition of social welfare legal services

A broad set of inclusion criteria was adopted (Table 1). This was to enable the study to capture all the relevant activity and describe the full range and diversity of service models, providing the strongest basis for future work in this area. The study sought to identify social welfare legal services that had working connections with healthcare services.

Table 1: Inclusion and exclusion criteria

	Inclusion criteria	Exclusion criteria
Social welfare legal problem	Consumer / General contract Debt Elder law Employment Family Health and community care Housing Immigration / Nationality Welfare benefits	Non-social welfare law
Type of assistance	First line advice Form filling and letter writing Casework Tribunal representation	Information only (not advice or casework)
Links with health service	Defined link with health service, for example: Located in a healthcare setting Receiving referrals from healthcare services Part of a social prescribing scheme Serving a particular patient group or healthcare service	Signposting only

Methods

Survey development

In preparation for the mapping study, a short online questionnaire was developed in order to collect data on the key features of relevant services. Feedback was sought from professionals working in social welfare legal services and public health fields in order to refine the topics and questions. The final survey included questions on the following topics: service details, legal advice, health service connections, funding, research and evaluation, and further information (Appendix 2).

Data collection

Three types of information were sought during the mapping exercise: 1) identification of relevant services; 2) data on the key features of the identified services; and 3) experiences of services working on the ground.

1. Identification of services

Information on the existence of relevant services was gathered using a range of approaches:

i. Requesting information from network organisations:

Organisations across both social welfare legal advice and health sectors were approached asking for information on services they were aware of that fitted the description outlined in the study definition. The organisations approached are listed in Box A.

ii. Contacting services previously known:

The Low Commission published the results of a mapping study in 2015¹⁵. The services reported by this study were contacted again to find out whether they were still in operation.

iii. Searching available information resources:

Academic and grey literature was searched in order to find services referenced in publications. Websites were also searched to identify any services that could be located through relevant organisations.

iv. Using professional networks:

Information was gathered through professional networks, including by use of newsletters and other mailings, conferences and word-of-mouth.

v. Snowballing:

When services responded with information for the study, they were asked if they could provide details of any other social welfare advice services working in healthcare settings. This was to enable a wider reach and to find services that were not linked with network organisations.

2. Data on the key features of services

The bespoke questionnaire was circulated by email to gather data from services about various aspects of their work. When individual services were identified, a link to the online form was sent to them directly requesting their participation. The survey invitation was also circulated by membership organisations through their newsletter mailing lists. The questionnaire is presented in Appendix 2.

3. Experiences of services

A sample of respondents who worked delivering social welfare legal advice in healthcare settings was contacted to arrange a telephone interview to explore their work in more detail. This sample was chosen to reflect a range of different types of social welfare legal services and health settings. The interviews gathered more in-depth information about the services and explored professionals' learnings and insights from working in this kind of partnership.

Box A: Organisations approached to request information

Social welfare legal services sector

Advice Services Alliance
 Advice UK
 Citizens Advice
 Law Centres Network
 National Association of Welfare Rights Advisers
 Norfolk Community Advice Network
 Shelter
 Youth Access

Health sector

Age UK
 Association of Palliative Care Social Workers
 Disability Action Alliance
 Health and Wellbeing Boards
 Macmillan Cancer Support
 Maggie's Centres
 Mind
 Money and Mental Health
 Multiple Sclerosis Society
 Scope
 Social Action for Health
 Social Prescribing Network
 Pathway

Data analysis

1. A list was drawn up containing the services that had been identified through the search. This included services that had been notified to the researchers by network organisations and other professional links, those found through searching information resources and ones identified through responses to the online survey. The list was organised according to the main categories of advice providers.
2. Quantitative data from the online survey were analysed using simple descriptive statistics to illustrate the key features of the advice services and their links with healthcare. For each question, the proportion selecting each answer option was presented. Free-text comments from the survey were used to illustrate the responses to each question in more detail.
3. Notes from telephone conversations with service providers were explored: their experiences of partnership working were described according to the 'challenges' and 'enablers' discussed.

Results

Responses from organisations and services

Data were gathered during the 6-month period from October 2017 to March 2018.

Responses from organisations

Responses were received from a number of network organisations who held relevant records on their members (or services they connected with) that were delivering social welfare legal advice in healthcare settings; this included Citizens Advice, Macmillan Cancer Support, the National Association of Welfare Rights Advisers, Norfolk Community Advice Network, Money and Mental Health, Maggie's Centres and Social Action for Health. Other network organisations did not hold such records, but were able to circulate information on the mapping exercise to their members or inform of individual examples they were aware of; this included Advice UK, Age UK, Association of Palliative Care Social Workers, Shelter and Youth Access.

Nationwide, 151 Health and Wellbeing Boards were contacted to ask for information to contribute to this study. Responses were received from seven, who had compiled lists of relevant services in their area; these were Cambridge, Northamptonshire, Reading, South Gloucestershire, Southwark, Wandsworth and West Berkshire.

Responses were not received from the other organisations contacted (Box A). While the search aimed to have comprehensive coverage across relevant areas, some pertinent organisations may have been missed that were not known to the researchers.

With one exception, all organisations contributed to this exercise without charge.

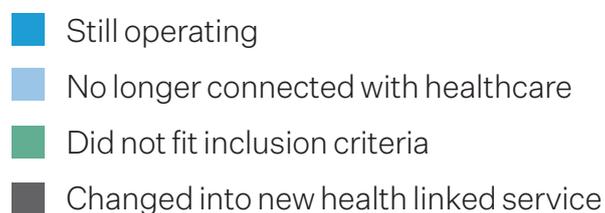
Responses from services

383 services were identified through the search. For several reasons, the total number of identified services should be treated as an approximation only (see Discussion). Of the services identified, 148 completed the online survey to contribute data on their activities. Of the 13 services approached to provide more in-depth information by telephone, 10 took part in an interview with the researcher.

Service turnover

Attempts were made to contact relevant services identified in previous mapping work.¹⁵ Successful contact was made with just over half these services: responses were received from 25 of the 44 contacted. There was a clear indication of change since 2015 among these services (Figure 1): a number reported having closed down or stopped working with healthcare in the intervening period; this was at least in part due to financial constraints, including withdrawal of funding, cuts to local services and introduction of charges for using NHS premises. Some services had been remodelled into new ones, including through mergers with other organisations and changes in the funding provider.

Figure 1: Status of services listed in previous mapping study (where responses obtained, n=25)



Services identified

Types of advice service providers

Social welfare legal services working in connection with healthcare were delivered by a wide range of different providers, including national and local charities, local authorities, health services and independent organisations. Services were also delivered by collaborative partnerships containing all of the above (Table 2).

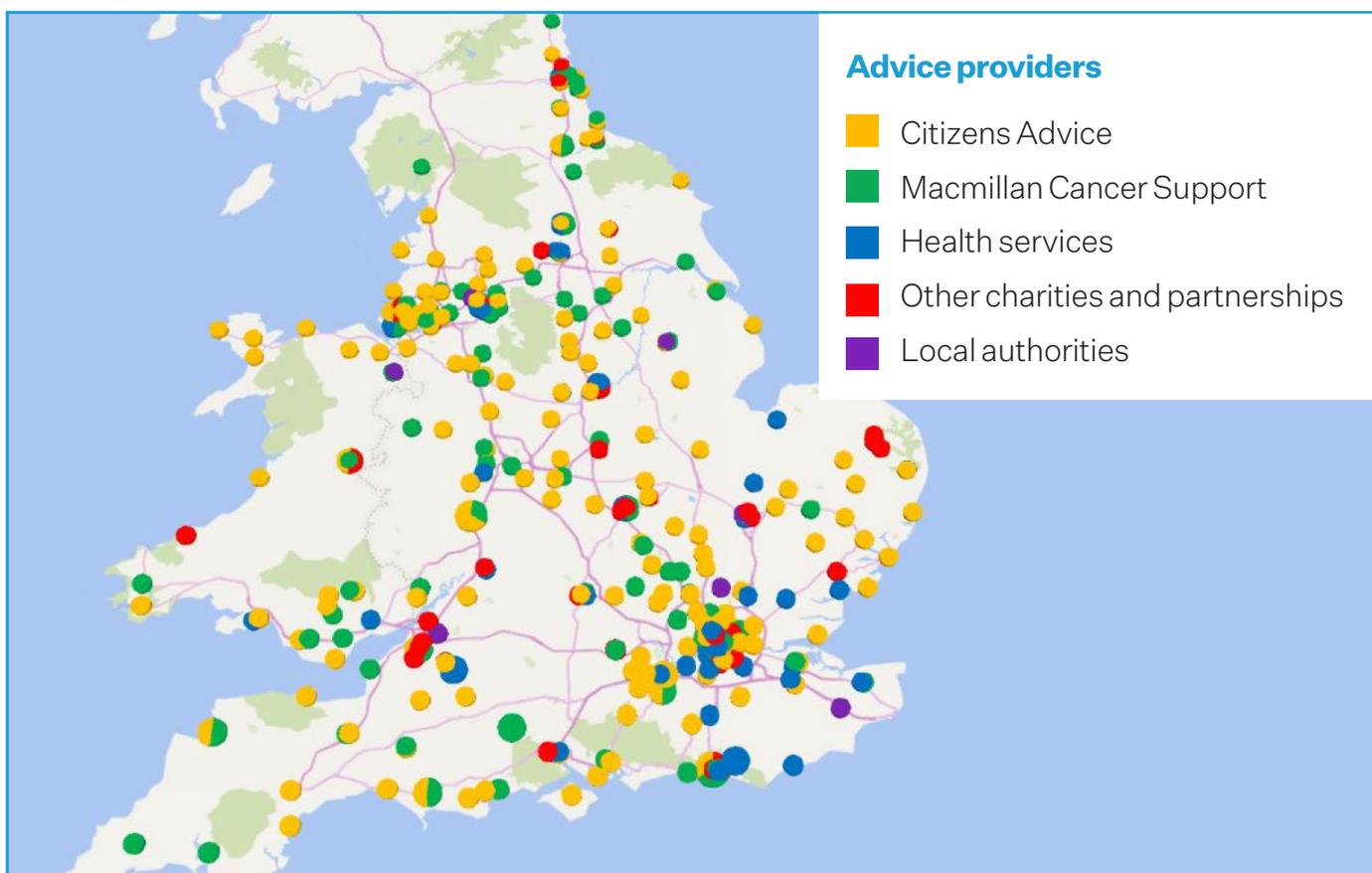
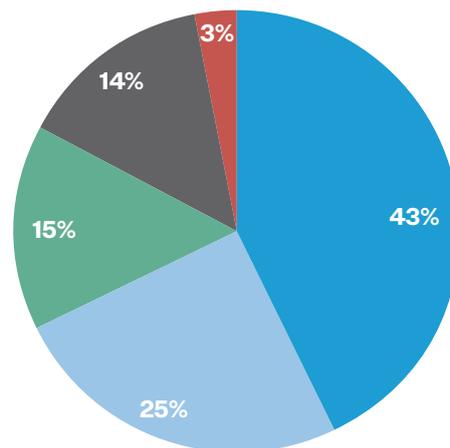
Of the services identified, local Citizens Advice were the most common advice providers working in healthcare settings, making up 43% of the services identified (Figure 2). Macmillan Cancer Support was the second most common provider (25% of services identified), followed by local health services (15%). Other charities and partnerships comprised 14% of those identified and were a highly diverse group: they included members of national organisations such as Age UK and Mind, Law Centres, independent services, networks and collaborations between a number of local providers. Local authorities were the smallest group of advice providers identified (3%).

Table 2: Types of advice providers identified

Type of organisations	Examples
National charities	Advice charities (e.g. Citizens Advice Bureaux, Youth Access) Health charities (e.g. Macmillan, Maggie's, Age UK) Mental health charities (e.g. Mind, Rethink)
Local authorities	Welfare rights advice teams
Health services	Welfare rights advice teams
Independent services	Local organisations, including charities Law centres Individuals
Partnerships	Collaborations of local providers

Figure 2: Breakdown of advice providers identified (n=383)

- Citizens Advice
- Macmillan Cancer Support
- Health services
- Other charities and partnerships
- Local authorities



Some of the social welfare legal services counted here are known to be operating in more than one health location, so the total count of individual health service connections is not possible to specify with accuracy and is likely to be greater than that presented.

There may also be a small amount of overlap in services counted, for example where Citizens Advice hold Macmillan contracts to deliver part of their welfare benefits advice; the overlap here is estimated to be less than 10 cases.

Models replicated nationally

Some national network organisations provided services with a similar model that was replicated across the country (Table 3). These services were usually designed to offer support for specific patient groups, such as those with vulnerabilities like homelessness, or particular illnesses like cancer. However, the local branches were largely still unique in their work and the nature of their connections with healthcare services, having developed collaborations alongside other local providers and grown organically in response to population needs.

Table 3: Examples of organisations providing similar services nationwide

Organisation	Details of service
Citizens Advice	Citizens Advice is a network of independent charities across England and Wales that provide free advice to local communities on a wide range of issues. There is no single model for how Citizens Advice work in connection with healthcare as each service operates independently, but a wide range of activities is undertaken: many Citizens Advice services offer appointments in primary care settings or run ‘advice on prescription’ projects with local GPs. Others work with hospitals and other specialist health clinics, receiving referrals from a wide range of healthcare teams.
Hospices: Family Support, Social Work Teams and Welfare Benefits Advisers	Many hospices have Patient and Family Support services, Social Work Teams and Welfare Benefits Advisers that work within them. They support patients, families and carers with a range of issues, and are referred to by clinical staff. Hospice advice workers ensure that patients and their families are informed about relevant welfare benefits, legal advice regarding wills and power of attorney, housing issues, debt, and continuing healthcare funding amongst other issues. Welfare benefits advisers are employed in some hospices specifically to address welfare issues at the end of life.
Macmillan Cancer Support	Macmillan Cancer Support is a charity providing a wide range of support to people with cancer, including information, advice and healthcare services. Macmillan funds the provision of welfare benefits and financial advice for cancer patients, much of which is delivered in acute hospital settings. Advice is provided on benefits and tax credits, as well as on other financial issues that may result from living with cancer. Some of the services operate according to a standardised best practice specification, while others vary locally in their activities. More detailed information is provided in Box B.
Maggie’s	Maggie’s is a charity offering practical, emotional and social support for people affected by cancer. Maggie’s Centres are located in or near hospital grounds and offer all their services under one roof. This includes comprehensive benefits advice, casework and other financial support alongside other services such as counselling and wellbeing support. Maggie’s Centres work closely with hospital clinical staff and receive referrals from them.
Pathway	Pathway is a homeless healthcare charity that has developed a model of integrated healthcare for homeless people and rough sleepers. The model operates in NHS acute hospitals and brings together multi-disciplinary teams to support homeless patients. This includes advice on housing, benefits and documentation as well as comprehensive medical support and referral.
Youth Information, Advice and Counselling Services (YIACS)	The Youth Information, Advice and Counselling Services model (coordinated by Youth Access) provides a one stop shop for young people’s health and social welfare needs. This approach brings together legal rights advice services with mental and physical health services under one roof, together with a range of other support. The advice can cover legal issues such as housing, welfare benefits, debt, employment and education difficulties. Young people can access multiple services as a joined up package, which are integrated and co-located to enable seamless and holistic support.

Survey responses

How representative are the survey responses?

Survey responses from 148 services were analysed, after removing duplicates and ineligible responses. All these services are included in the total of 383 services that were identified through the search. Table 4 examines representativeness of survey responses in terms of the types of advice providers: compared to all the services identified, the survey responses

represent fewer Macmillan services and a greater number of local charities and partnerships.

This reflects the different ways in which services were identified: most Macmillan services were notified to the authors by Macmillan Cancer Support, while many independent services were found through circulation of the survey by Health and Wellbeing Boards and other network organisations.

In order to address the under-representation of Macmillan services in the survey responses, a more detailed overview of their benefits advice work is provided at the end of this section.

Table 4: Comparison of survey respondents with service providers identified

	Services identified		Survey responses	
	N	%	N	%
Citizens Advice	164	43%	66	45%
Macmillan Cancer Support	94	25%	9	6%
Local authorities	11	3%	9	6%
Health services	59	15%	28	19%
Other charities and partnerships	55	14%	36	24%
Total	383		148	

How are social welfare legal services connected with healthcare?

The survey gathered free-text comments requesting more details on the work of individual services. These highlighted a variety of different ways in which social welfare legal advice services were connected with healthcare. Table 5 presents categories by which this can be described, along with examples that are presented in Appendix 1. The closest partnerships were where advice and health services operated as an integrated service

to deliver care as part of multidisciplinary teams; this was also the rarest kind of arrangement. Others were more distinctly separate but connected via direct routes (such as referral or co-location), indirect routes (through an intermediate service such as a social prescribing 'link worker') or a combination of both. There were also examples of advice services performing the social prescribing 'link worker' function themselves. This model involved the advice service acting as the first point of contact for patients requiring non-clinical support. The advice service would address any immediate social welfare legal needs and additionally perform a triage

function, referring patients on to a wide network of partner organisations in the community. This service model allows the most fundamental social welfare legal needs to be addressed as a priority, while still linking patients to wider sources of social support.

Table 5: Examples of social welfare legal services' links with healthcare

Nature of connection	Description	Examples presented in Appendix 1
Integrated	Social welfare legal advisers working within healthcare teams, or single services providing both healthcare and advice.	<ul style="list-style-type: none"> ■ Newcastle Welfare Rights Service ■ Pathway ■ Southwark Law Centre ■ YMCA DownsLink Group
Connected by direct links	Social welfare legal services connecting with healthcare via a direct route (by referral, co-location or both): the most common form of partnership.	<ul style="list-style-type: none"> ■ Age UK Nottingham ■ Ask Us Wirral ■ Ceredigion Third Sector Community Resource Team ■ Citizens Advice Camden ■ Citizens Advice South Liverpool ■ Community Law Service Northampton and County ■ Legacare ■ Macmillan Cancer Support ■ Maggie's ■ Northumbria Healthcare NHS Foundation Trust ■ Oxfordshire Mind ■ Release ■ Salford City Council ■ Social Action for Health ■ Welsh Government
Connected by indirect links	Social welfare legal services connecting to healthcare via an intermediate service (a link worker, community navigator or similar model): the most common approach in social prescribing schemes which connect patients to a network of community services for non-clinical support.	<ul style="list-style-type: none"> ■ All social welfare legal services that are associate members of social prescribing schemes and other local partnership programmes. ■ Cheltenham & Tewkesbury Community Wellbeing Service ■ CommuniCare
Performing a 'social prescribing' function	Social welfare legal services receiving referrals directly from healthcare, and also acting as coordinators to refer patients on for wider sources of support in the community.	<ul style="list-style-type: none"> ■ Bromley Third Sector Enterprise CIC ■ Citizens Advice Felixstowe and District ■ Great Yarmouth and Waveney CCG

Example: Macmillan Benefits Advice Services

Macmillan Cancer Support is one of the leading UK charities, and provides a wide range of support for people living with cancer. This includes providing specialist information about cancer and all aspects of living with the disease. Macmillan runs a support line, produces information resources, operates drop-in centres, supports cancer nurses in hospitals and the community, and trains volunteers to offer practical and emotional support, among other things.

An important aspect of the support that Macmillan provides is help with financial issues that may occur as a result of developing cancer, for example due to reduced employment and increased living costs. Part of this support includes providing specialist welfare benefits advice services that support particular health

services or local populations. These services provide advice on welfare benefits and tax credits, and may also advise on accessing charitable grants and transport concessions, as well as with issues such as debt, employment and housing.

Macmillan funds benefits advice provision in partnership with external partner organisations, who employ Macmillan Professionals directly to deliver Macmillan branded (or cobranded) benefits advice projects for people affected by cancer. Currently, 94 of these services are operating across England and Wales. Historically, the arrangements with partner organisations have developed in an organic fashion, and as such the degree to which they operate closely in partnership with healthcare varies. They can be grouped under the broad definitions described in Box B below.

Box B: Delivery to Macmillan welfare benefits advice services

Service type and number	Description
NHS provider (23)	This category indicates where Macmillan benefits advice provision is delivered through the NHS (CCG, Health Board or NHS trust) or similar (local hospices).
Redesign (13)	Macmillan has recently developed a redesign service specification, which introduces a core service specification across partner organisations, which focuses service delivery within hospital settings, and at the earliest pathway point (diagnosis and treatment). These providers are based within hospitals, and deliver the majority of their service through acute settings.
Outreach, existing portfolio (26)	Partner organisations delivering benefits advice range from Citizen's Advice, Local Authorities to cross-charity groups and NHS providers. Each service is unique in its service delivery. Services in this group are known to be delivering outreach into hospital settings.
Existing portfolio (32)	As above, however services in this group are not believed to be delivering outreach into hospital settings.

Statistics

The following data present the responses to the online survey, as completed by professionals delivering social welfare legal advice in healthcare settings. All answer options were ‘tick all that apply’ and are therefore not mutually exclusive.

What work is being done by the health-linked social welfare legal services?

The most common issue that services provided assistance on was welfare benefits (93%). Housing (64%), debt (64%), health and community care (52%) and employment (52%) followed this as the most common topics (Figure 3). Under ‘Other’, services also reported addressing end-of-life matters, equalities and care act, injunctions, energy and education.

Figure 3: Which areas of law does the service provide assistance on? (n=148)

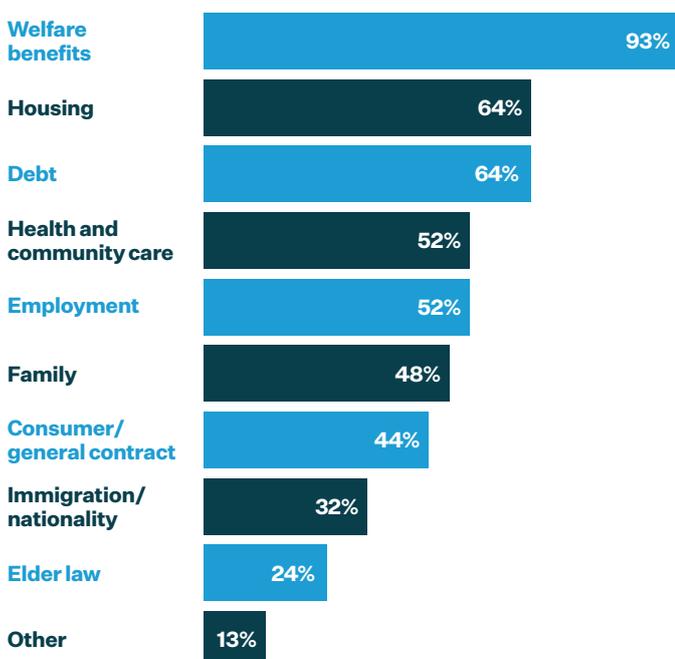
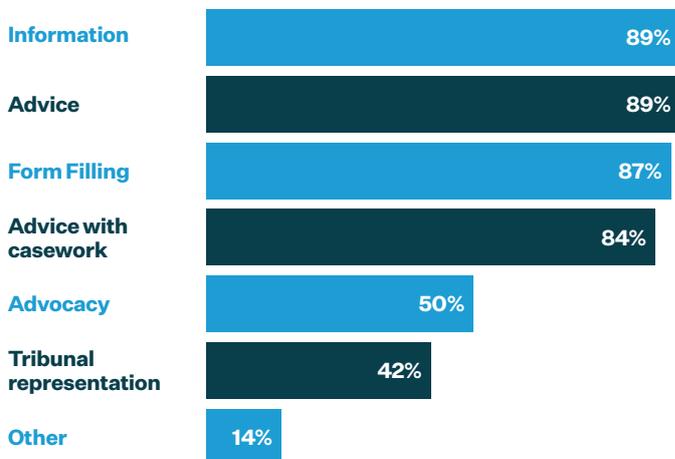


Figure 4: What kind of support does the service provide for its clients? (n=148)



The majority of services offered information (89%), advice (89%), form-filling (87%), and casework (84%) (Figure 4). Smaller numbers also offered advocacy (50%) and tribunal representation (42%). In comments, services described providing advice through face-to-face appointments as well as by telephone and email. Some reported providing ongoing assistance over time. In examples where funding was constrained, face-to-face appointments and tribunal representation were limited to the most vulnerable clients only.

In addition to the work described above, social welfare legal services also provided other forms of assistance to individuals and healthcare teams. This included providing training, information and consultancy services for healthcare staff in order to help them support patients with welfare issues; this work consisted of educating staff on current welfare law, advising them on courses of action and providing information to pass on to patients. Social welfare legal services would also triage clients’ needs, referring on to other sources of support where appropriate and offering assistance with navigating local services. Some reported running community support groups and other activities.

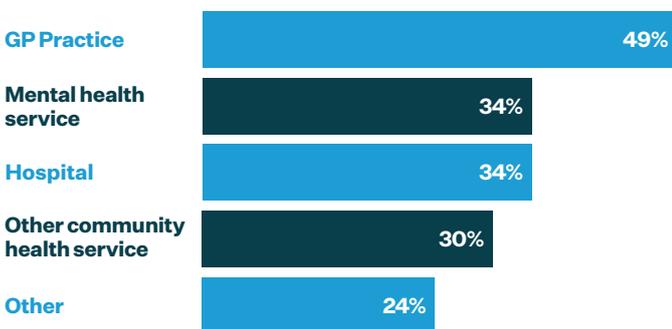
Which health settings are served by social welfare legal services?

A majority of the social welfare legal services reported being physically located in a health service setting (66%).

Social welfare legal services most commonly connected with GP practices (49%), followed by mental health services (34%), hospitals (34%) other community health services (30%) (Figure 5). Advisers also worked with hospices, care homes, social care services, health visiting, other community outreach centres and organisations like Healthwatch.

In their written comments, some advice services described operating in connection with healthcare services specialising in a particular condition, for example cancer, HIV or drug and alcohol treatment centres. Others supported particular patient groups such as the elderly, those with mental health conditions, frequent attenders or victims of domestic violence. There were also examples of social welfare legal services supporting particular health service pathways such as hospital discharge.

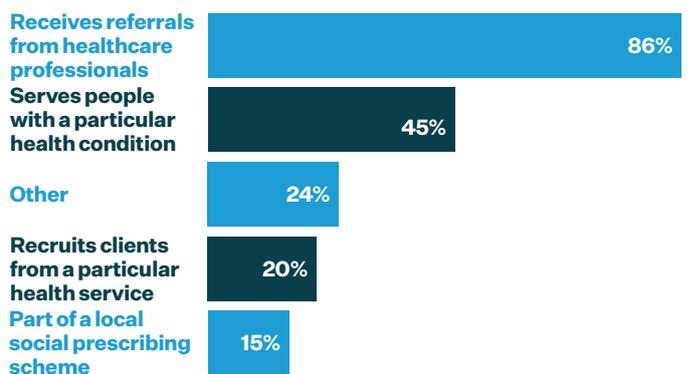
Figure 5: Which kind of health setting is the advice service connected with? (n=148)



How do social welfare legal services link with healthcare?

The most common way in which social welfare legal services connected with healthcare was through referral, with the majority receiving referrals from healthcare professionals (86%) (Figure 6). Some received referrals exclusively from healthcare services, while others received referrals additionally from a wide range of sources including social workers, children’s services, the voluntary sector, friends, relatives, carers and self-referrals. A relatively small proportion of services reported being part of a local social prescribing scheme (15%).

Figure 6: How is the advice service connected with healthcare? (n=148)



Social welfare legal services described a range of other activities connecting them with healthcare. This included being employed or partly managed by the health service, being part of local contracts to deliver advice in healthcare settings, and being part of local wellbeing partnerships that include a wide range of providers. Some worked across both health and other council-run services in the local area.

Links with healthcare services were informal in many cases and had emerged organically, mainly through informal networking, building familiarity and developing referral practices. Relationships between advice teams and healthcare staff were an important aspect of

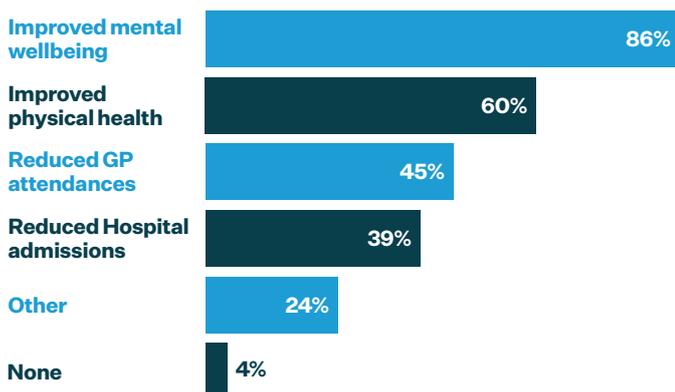
the joined-up services. This included liaising directly to support clients with a variety of needs, such as through the provision of medical evidence required for legal cases.

What health outcomes do social welfare legal services aim to achieve?

Almost all the social welfare legal services working with healthcare reported health-related service aims, the most common being the improvement of mental wellbeing (86%), followed by improvement in physical health (60%) (Figure 7). Some described specific health outcomes as key aims, for example reducing the risk of suicide, reducing mental distress, reducing use of medication and supporting recovery from problematic substance use.

Reducing pressure on healthcare services was also a prominent objective, with many advice providers aiming to reduce GP attendances (45%) and hospital admissions (39%). Services reported aiming to support the delivery of primary care by enabling GPs to manage non-medical needs, reducing non-clinical presentations, reducing prescription costs and GP appointment times. Others aimed to improve integration of care, improve patient engagement, support safe and timely hospital discharge and enable people to remain independent.

Figure 7: What health-related outcomes is the advice service aiming to achieve (if any)? (n=148)



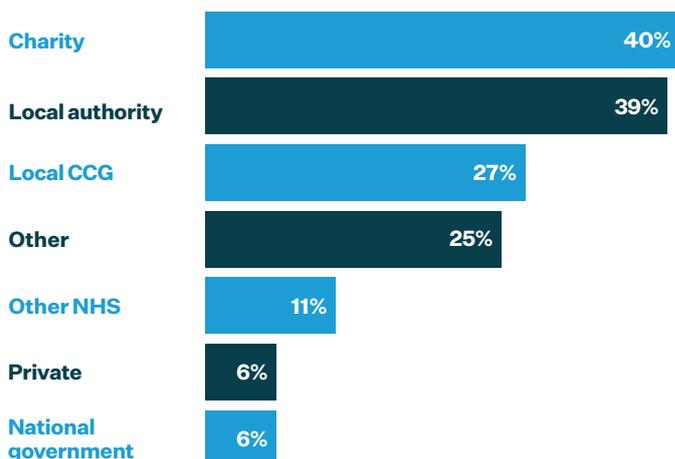
Financial outcomes were also described as an important means by which social welfare legal services aimed to improve health and reduce the impact of sickness; for example, by helping with the costs of cancer diagnosis, providing financial security during illness, maintaining employment and alleviating poverty and its impact on health.

Social welfare legal services also aimed to prevent ill health and improve wellbeing in a more upstream way, by addressing underlying determinants of ill health such as food and fuel poverty, and supporting specific vulnerable groups including the elderly or socially isolated.

How are health-linked social welfare legal services funded & for how long?

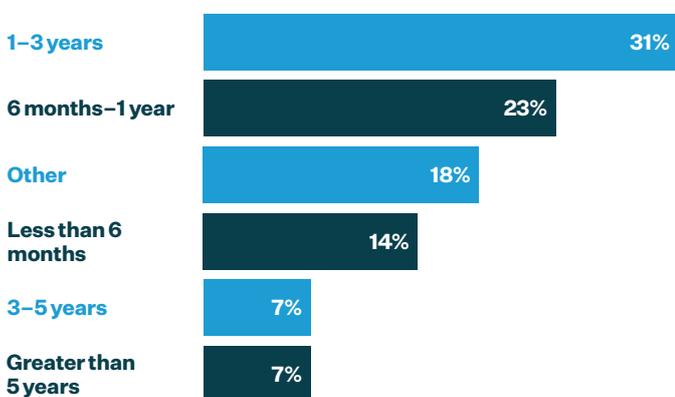
Charity funding was the most common source of financial support for social welfare legal services working with healthcare (40%), including sources such as the Big Lottery, Comic Relief, donations from patients and specific fundraising activities (Figure 8). This was followed by local authority funding (including from public health budgets) (39%). 27% of services responding had financial support from their local CCG, and 11% from other NHS sources. A number of services had no specified funding for their work in healthcare settings, but were operating on reserves or on the funding for other projects being provided by their organisation.

Figure 8: What sources of funding does the advice service receive? (n=148)



Most funding was provided on a short-term basis, with the majority of services (68%) having funding for three years or less, and almost four in ten (37%) having funding for one year or less (Figure 9). Some funding had been received for specific pilot projects or was under review before extension was confirmed. A number of services were having public funding withdrawn due to budget shortfalls or were currently running on reserves that were due to run out. A small number of services reported having ongoing funding as part of local public budgets.

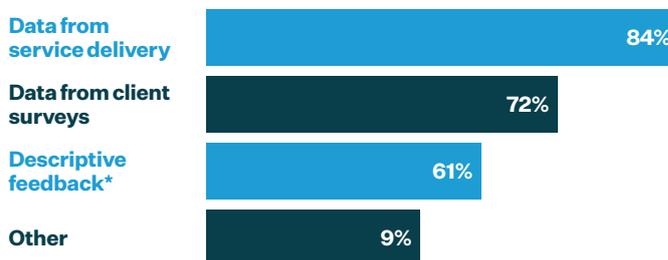
Figure 9: What is the timescale of the current funding for this advice service? (n=148)



How are the impacts of health-linked social welfare legal services being evaluated?

The majority of services responding to the survey reported undertaking some form of evaluation or research (n=89, 60%). Of these services, most were utilising data from service delivery (84%), including statistics from GP records, referrals and client gains through the service. Some services also ran client surveys (72%) including using validated health questionnaires and other outcomes tools, and descriptive feedback including comments and interviews (61%) (Figure 10).

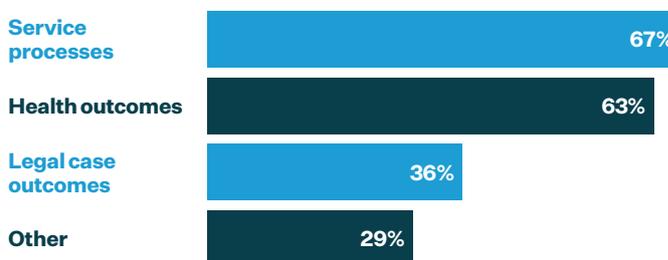
Figure 10: Please state how information for the evaluation is being gathered: (n=89)



*Including comments and interviews

Of the services undertaking evaluation, service processes were the most common outcomes measured (67%), including attendance rates and case-specific outcomes; for example, several services reported recording outcomes of benefits applications and financial gains for clients (Figure 11). A large proportion also reported measuring client health outcomes (63%). Others recorded client satisfaction and other measures of impact on individuals.

Figure 11: Please describe what is being measured for evaluation: (n=89)



Services' experiences

The following information describes the experiences of professionals delivering social welfare legal services connected with healthcare. Feedback was gathered through ten telephone interviews with individuals who had responded to the survey. Interviewees were chosen to represent a range of different types of services, in order to ensure broad relevance of the findings. Their experiences have been grouped under the themes of 'challenges' and 'enablers'; these describe factors that were found to influence the work of partnerships between advice and healthcare services.

What are the challenges of partnership working?

A range of challenges was reported by social welfare legal services in developing collaborative partnerships with healthcare. Resource constraints were prominent, including being short of space, capacity and funding. While many services aimed to be co-located to improve access for patients, space from which to run appointments within healthcare settings was limited. In primary care settings, space was easier to obtain in large multi-service health centres than in GP practices; however, it could be more difficult to develop shared working practices with health professionals in larger centres due to services being less closely linked. Some social welfare legal services reported being oversubscribed and unable to take on all the cases that were referred by health partners. While many wanted to expand their services in healthcare settings, this was mostly not possible due to funding constraints. Others had experienced significant budget cuts that impacted on advice delivery, with fewer resources to offer patients face-to-face appointments and casework. Short-term funding also meant that turnover of social

welfare legal services was high, making it difficult to develop stable partnerships with healthcare services over time.

Engaging with healthcare professionals to establish working partnerships was found to be an ongoing challenge for a number of reasons. While some clinical staff understood the role of advice in supporting health, awareness was variable and often low. Improving understanding of the rationale for integrated advice could be difficult, as it was not immediately recognisable as a health-related service. Welfare problems were commonly seen as something that should be dealt with outside the health sector and not the concern of healthcare professionals to address. Therefore, much effort was often needed to raise awareness of the relevance of advice and promote engagement with the service. However, it could be difficult to get time in meetings so as to connect with staff. Advice workers acknowledged that large workloads and competing priorities also made it difficult to engage with healthcare professionals effectively. Often the advice provider was just one of many community support services offered to patients; this crowded landscape meant healthcare professionals had many different providers to navigate, creating challenges for ensuring referrals were made appropriately.

Developing integrated working with healthcare services was inevitably a slow process that took many years to embed properly and become part of accepted practice. Ongoing commitment to the partnership on both sides was needed to establish and maintain effective collaboration. This was resource intensive, particularly if working with several health services all of which had different systems and approaches. Some advisers felt the difference in culture between advice and health sectors also made it difficult to work together easily, as each organisation could have limited insight into the other and therefore

not recognise the value of collaboration. Advice providers also needed to allow greater flexibility in schedules when working with patients as clients, since people in poor health were less able to keep appointments reliably; this was particularly important when assisting certain patient groups such as those with mental health conditions.

Making the case for commissioning social welfare legal services as part of local healthcare systems was another challenge and success was variable. Commissioners, faced with difficult trade-offs, often required proof that the services would achieve financial savings. Demonstrating the outcomes of advice in terms of monetary gains and health impacts was a significant research task that was often not possible for services, though some form of evaluation was being undertaken by many. Sometimes local commissioners were felt to be unaware of the relevance of social welfare legal services to health, or would be taking a short-term view that disadvantaged preventative services and those supporting longer-term change. Therefore, feedback identified a need for more robust research and clarity around the impacts of health-linked social welfare legal services, particularly with a focus on efficiency savings and health improvements.

What is needed to enable effective partnerships?

Developing good working relationships was the most important factor enabling successful partnerships between healthcare services and advice providers. Good will and commitment from colleagues in healthcare was essential for social welfare legal services to integrate effectively into working practices. This could be encouraged by having a shared goal and a shared understanding of the role that advice could play in achieving it, for example by addressing a recognised health need or reducing pressure on healthcare services. Building relationships with key people, including medical professionals and healthcare administrators,

Partnerships were highly valued by healthcare professionals who benefited from the extra support

was fundamental to developing effective collaboration. Having champions within clinical teams was very helpful, as they understood the value of the service and could spread the word among healthcare colleagues. Some advice providers also offered their assistance to healthcare staff; this had the effect of raising awareness of the positive impacts of advice in people's lives, which in turn encouraged staff to refer patients in need of help.

Delivering advice within healthcare locations facilitated the development of service partnerships for a number of reasons. Firstly, it made the work of the advisers more visible, creating familiarity with the service among healthcare staff. It also helped to demonstrate the professionalism of the advisers and show the results being achieved for patients; this created confidence in the service, which in turn encouraged healthcare staff to make referrals. Maintaining this personal contact over time helped services to build up a reputation and inspire trust among healthcare partners. Being co-located also provided opportunities for regular conversations, enabling discussions about the advice service and the ways it could support both healthcare services and patients. Having these discussions was important for developing an understanding of the value of collaboration, which was necessary for healthcare staff to make effective use of the advice service and refer patients when appropriate. It also enabled colleagues to get to know each other personally and encourage joined up working.

Ongoing engagement and good communication were essential for developing working relationships between the partner services. Providing regular feedback to healthcare staff helped to create better understanding of the

role of advice and the positive progress it could achieve for individuals. When staff became familiar with the advice service and appreciated the difference it could make to patients' health, they were more willing to engage and work together. This in turn could lead to better welfare outcomes for individuals, for example, through providing appropriate medical evidence to support benefits applications. Communicating in the language of healthcare was also important, tailoring the message to different professional groups to demonstrate how the advice service was addressing health priorities at various levels. For example, staff on the ground wanted to see how patients' welfare problems were solved, aligning with their own goals of supporting individuals. At management level a more strategic focus was needed, such as showing how the service supported patient choice and empowerment or achieved outcomes like efficiency savings.

Having support at strategic level and being recognised as part of the healthcare system made partnerships much easier to establish, as it made a big difference to the way social welfare legal services were perceived. This was the case for services that were partly or fully funded by healthcare bodies, or ones that were part of local healthcare partnership models (for example, in local CCG clusters). In these cases, social welfare legal services had an identity within the system, and were therefore recognised as a service that delivered valuable assistance to patients and healthcare providers. Partnership models were found to be very helpful in increasing the awareness of non-NHS services and the role they play in providing expert and valuable support to patients. Undertaking evaluation and being able to demonstrate outcomes was important for communicating how the advice service supported the health of patients. While evidence for this was often difficult to provide, making use of academic research on the health impacts of advice could help to make the case to commissioners.

Despite the many difficulties of inter-agency working, services were able to overcome the challenges and develop successful partnership models between healthcare and advice providers. This was achieved with time, perseverance and dedication, as well as good communication and a willingness to adapt and be flexible in order to find the most effective ways of integrated working. Starting small, being realistic about what was achievable and remaining patient all played a role in helping services to achieve this. When effective partnerships were established, they were found to be highly valued by healthcare professionals who benefited from the extra support that social welfare legal services could provide both to themselves and their patients. There were also examples of committed and passionate commissioners and other local figures who championed the work of integrated social welfare legal services and raised the profile of social welfare on the local health service agenda.

Discussion

Key findings

This mapping exercise identified more than 380 social welfare legal services operating in connection with healthcare across England and Wales. There is much diversity in the types of services delivering advice, as well as the healthcare settings they connect with and the nature of collaboration. Partnerships between social welfare legal services and healthcare have clear aims in supporting individuals with issues affecting physical and mental health, assisting healthcare professionals in managing non-clinical demand and addressing a range of other health-related needs. The work being undertaken by social welfare legal services covers a wide range of social welfare issues, most commonly welfare benefits, housing and debt. Assistance ranges from first-line advice to in-depth casework, legal representation and consultancy. Social welfare legal services are commonly delivered from health service locations, and most receive referrals directly from healthcare professionals; only a small proportion are currently part of local social prescribing schemes. Funding for health-linked social welfare legal services is fragile and short-term, coming mainly from local authority and charity sources. While advice providers experience specific challenges in developing working partnerships with healthcare services, this study provides insight into the factors that are important in developing positive and successful health-justice collaboration.

Strengths and limitations

This is the most comprehensive mapping study of social welfare legal services provided in healthcare settings carried out in the last decade. The wide-ranging search involved the engagement of many network organisations across both health and social welfare legal services sectors. The information presented outlines various aspects of the service models and presents illustrative examples of practice; data from the survey also provide a quantified indication of services' activities.

The figure of 383 services is only an estimate, as this review is unlikely to have captured all the services currently operating and may under-represent the scale of current activity. There is currently no single source of information on the existence of this type of integrated service and few organisations hold comprehensive records that would enable a full census to be undertaken. While every attempt was made to publicise this study widely, some relevant channels may have been missed and it is unlikely to have reached all the services that are operating or to have achieved responses from all those reached. At times it was also difficult to define services, as some were run as collaborations of different providers or as part of wider networks, making the distinctions between services unclear.

Data from the online questionnaire present results from a sample of the total number of services identified, and may not be fully representative due to differences in the characteristics of services responding: compared with all services identified, a smaller proportion of Macmillan services and a greater proportion of local charities and partnerships answered the survey. This reflects different ways in which services were identified: most Macmillan services were notified to the

authors through Macmillan Cancer Support directly, while many independent services were found through circulation of the survey by Health and Wellbeing Boards and other local organisations.

Comparison with other studies

The search identified 383 services, an increase from 58 identified in mapping work carried out in 2015; this may be due to greater identification rate as the current study had a longer data collection period.¹⁵ However, it is considerably fewer than estimated by a study carried out in 2006, which found over 1,000 health locations with linked social welfare legal services across England; while some of the difference may be due to units of measurement (use of health ‘locations’ as opposed to ‘services’ that might cover several locations), this could also indicate a reduction in service provision over the last decade.²³ Many of the findings correspond to the earlier work carried out as part of the Low Commission evidence review,¹⁵ which similarly found a diversity in service models, health service settings, funding sources and health-related objectives. The current study updates this knowledge and adds data to help quantify the characteristics and activities of social welfare legal services operating in healthcare settings.

The qualitative findings of this report also echo conclusions of other studies describing experiences of health and legal service partnerships. The Low Commission review identified similar challenges for social welfare legal services working in health settings, including lack of space, difficulties in engaging healthcare professionals and a general lack of awareness of the value of social welfare advice in supporting health outcomes.¹⁵ A recent

qualitative study explored the processes by which co-located welfare advice can improve outcomes for GP practices (such as by reducing non-clinical demand from unaddressed social needs).²⁴ The study concluded that sharing physical space alone was unlikely to promote benefits for surgeries. Among other factors, effective collaboration could be encouraged through regular promotion and feedback, proactive support from managers and funders, sufficient bed-in time, and offering advice on a range of issues responsive to local need.

References

- ²³ Neil Bateman, ‘Just What The Doctor Ordered: Welfare Benefits Advice And Healthcare’ (Age Concern England 2008).
²⁴ Charlotte Woodhead and others, ‘Co-Located Welfare Advice In General Practice: A Realist Qualitative Study’ (2017) 25 Health & Social Care in the Community.

There is much diversity in the types of services delivering advice, as well as the healthcare settings they connect with and the nature of collaboration.

Conclusions and recommendations

This mapping study reveals activity across England and Wales involving the provision of social welfare legal services in healthcare settings. These collaborations have potential to improve the health and wellbeing of individuals, as well as to support healthcare services in delivering holistic care that addresses the underlying determinants of health and reduces pressure on frontline services.

Information on the provision of social welfare legal services in healthcare is not widely recorded and there is currently no resource to identify local examples and explore best practice. A platform bringing together information, resources and expertise in this area could promote greater awareness of these services and facilitate future research, development and collaboration.

The current move towards integrated care and social prescribing in the NHS presents an opportunity for wider development of partnerships between social welfare legal services and healthcare services, facilitating access to justice and improved wellbeing for individuals. As services that facilitate access to the most basic needs and rights which are fundamental to health and wellbeing (such as sufficient income and appropriate housing), social welfare legal services should form core components of any holistic social prescribing scheme. Greater recognition of the contribution of social welfare law to social determinants of health and health inequalities is needed. Integrating health and social welfare legal services should be considered an essential element in the development of social prescribing.

As services that facilitate access to the most basic needs and rights which are fundamental to health and wellbeing, social welfare legal services should form core components of any holistic social prescribing scheme

Appendices

Appendix 1: Examples of services

1. Age UK Nottingham – Benefits Advice Service, Housing Options and Silverlinks Advice Service

Age UK Nottingham runs two separate social welfare legal services in connection with healthcare. The Benefit Advice Service is run in a GP practice in Nottinghamshire. Clients are patients of the surgery and either self-refer to the service or are referred by healthcare professionals working in the surgery. Patients need to be 55 years old or over, although advice is also provided to older people's family members or carers. The service is focused on welfare benefits advice, but also provides support with other social welfare matters. The Housing Options and Silverlinks Advice Service runs a ward round at a local hospital. The service runs on specialist older persons rehabilitation wards during open visiting hours. Advice is provided on housing, health and community care issues, and is offered to inpatients (many of whom have dementia), as well as carers and families. Advisers provide information, advice, one-to-one coordinator support and advice with referral and signposting if needed. The service works closely with health professionals and aims to reduce hospital admissions.

1. Ask Us Wirral

Ask Us Wirral is an integrated advice service provided by Citizens Advice Wirral, Age UK Wirral, Wirral Mencap and Wirral Change, who provide a coordinated information and advice service across the region. It is commissioned jointly by Wirral NHS Clinical Commissioning Group, Wirral Public Health and Department of Adult Social Services. The service in its current form was established in 2017, but the social welfare legal services have relationships with GPs built up over many years' previous work in practices. The service provides advice and information on all social welfare topics and is offered to patients of all 58 GP surgeries in the

Wirral. Referrals are received directly from GPs, members of the practice team and by the local mental health services staff, as well as coming from clients, families, partners and other referral agencies. The service offers advice by telephone and email six days a week, as well as pre-booked face to face appointments held in GP surgeries that are offered to vulnerable clients and those with mental health conditions. One off advice is provided, as well as casework and tribunal representation where deemed necessary.

2. Bromley Third Sector Enterprise CIC – Bromley Well

Bromley Third Sector Enterprise CIC is a partnership of local voluntary sector organisations. The Bromley Well service supports people to maintain or improve their health and remain independent, particularly those who may be at risk of crisis because of their physical or mental health condition. Bromley Well is jointly funded by Bromley Clinical Commissioning Group and the London Borough of Bromley. Access to the Bromley Well services is via Citizens Advice Bromley who provide the Single Point of Access, assessing clients' needs and making onward referrals to appropriate support. The Single Point of Access also provides specialist advice on housing and benefits issues and runs a free form-filling service. The services connected to through Bromley Well provide a wide range of interventions including legal advice, personal advocates, information and guidance, education and employment support, handyperson services, social and leisure activities, emotional support and counselling.

3. Cheltenham & Tewkesbury Community Wellbeing Service (Social Prescribing)

The Community Wellbeing Service is a partnership funded by the Clinical Commissioning Group and County Council. It offers health and social care professionals a structured way of linking identified patients with support in their community. The aim is to help patients to access

organisations and community groups, which can support wellbeing. This can include assistance with housing, benefits, employment and debt issues, as well as a wide range of other services. The Community Wellbeing Service is located at Cheltenham First Stop, which brings together a range of statutory and voluntary sector agencies in one place to work in partnership. Patients can be referred to the service via GPs and other health professionals. Any people in need of in-depth advice are picked up by the Advice & Inclusion Team, who work in partnership with Community Wellbeing Team to ensure patients are supported through whatever difficulties they may be facing.

4. Ceredigion Third Sector Community Resource Team

The Ceredigion Third Sector Community Resource Team is funded by the Welsh Government under the Intermediate Care Fund. The team consists of a partnership between the British Red Cross, Citizens Advice Ceredigion, Age Cymru Ceredigion, the local Community Voluntary Service and the Royal Voluntary Service. The team provides a 'home from hospital' service to support hospital discharge of people who are elderly and frail. The aim is to safeguard the health and wellbeing of clients and reduce pressure on health services, by increasing access to a range of support that can keep people independent, reduce length of hospital stays and minimise re-admission to hospital. The team provides a wide range of assistance to address practical issues such as income maximisation, warmer homes, physical home adaptations, housing condition, social isolation and access to health and community care. Assistance includes information, advice, casework, advocacy, befriending and housing repairs. Patients discharged from hospital are referred to the service by health professionals. Referrals go via the British Red Cross in the first instance, and Citizens Advice Ceredigion case-manages the social welfare law advice and casework.

5. Citizens Advice Camden – Advice in healthcare settings

Camden Citizens Advice Bureau has provided advice in a number of local healthcare settings

for over 15 years. Currently, advice outreach services are run in nine local GP practices and health centres, Great Ormond Street hospital, the Royal Free hospital (oncology and renal departments), a community HIV clinic and a homeless walk-in centre. Each outreach service has been established to serve particular advice needs of local patients and has developed organically in partnership with the health providers. Each has separate funding streams and working practices. The advisers working in the health outreach services have expertise for working in specialised healthcare settings. Advice is provided on a wide range of welfare issues, including benefits, debt, housing and employment. Advice appointments are provided in the healthcare locations and referrals are received from a large number of different clinical teams. In the example of the GP service, long-term casework and ongoing support is provided, including for benefits submissions and appeals.

6. Citizens Advice South Liverpool – Advice on Prescription

South Liverpool Citizens Advice has provided social welfare legal services in health settings since 1995. Advice on Prescription is a city-wide service funded by Liverpool Clinical Commissioning Group as part of the local mental health strategy. Advice is provided on a full range of social welfare issues, including debt and financial confidence, and advice sessions are delivered in healthcare locations. Referrals to the service are limited to GPs and other partners of the Clinical Commissioning Group's community of practice, including mental health services. The Advice on Prescription service aims to reduce non-medical presentations, to support GPs in managing patients vulnerable to mental distress and to alleviate poverty and its impact on health.

7. CommuniCare – Advice, Information and Support

CommuniCare is an independent charity based in Reading. It is one of the many associate members of the Reading Voluntary Action social prescribing scheme and clients are signposted in through the social prescribing service, as well as by healthcare professionals directly.

CommuniCare offers a wide range of support to local residents including pro-bono legal advice, and covers issues such as welfare benefits, debt, employment and housing, among others. The comprehensive welfare benefits advice service covers home visits, benefits assessments, applications, mandatory reconsideration and appeals.

8. Community Law Service Northampton & County – Financial Health and Wellbeing Service

Community Law Service Northampton and County is an independent advice provider that gives assistance with a wide range of social welfare issues. Four specialist financial advisers deliver the Financial Health and Wellbeing Service, a project that aims to support health and improve quality of life through addressing the problems of indebtedness and fuel poverty. Advice and assistance are provided on a range of financial issues including benefits and income, debt (including energy debt), energy tariffs and energy grant applications. The project focusses on people who are vulnerable in respect of their health, particularly those with mental health problems. Advice is delivered through appointments in healthcare settings, including GP surgeries, a mental health hospital and community mental health teams. Referrals are also received from general hospitals (including A&E and discharge teams) and home visits are provided for patients who require it.

9. Great Yarmouth and Waveney Clinical Commissioning Group – 'Solutions' social prescribing pilot

The Great Yarmouth and Waveney social prescribing service links patients in primary care with non-medical source of support. It is provided in partnership with East Coast Community Healthcare, Waveney District Council, North East Suffolk Citizens Advice Bureau, Lowestoft Rising and Suffolk Police. The service aims to provide a coordinated and holistic package of care for people with existing long-term conditions, in order to prevent worsening health and reduce costly interventions in specialist care. It is led by GPs and provided by voluntary and community

sector organisations. GPs and other healthcare staff refer patients to the Citizens Advice Bureau in the first instance, which runs appointments in local practices. The assessor will address any immediate advice needs, and provide a triage function to refer patients on to other specialist support where necessary. Partner organisations in the scheme also run their appointments in surgeries. A wide range of social welfare issues are covered by the scheme, including benefits, debt, housing, employment and family matters, as well as support with mental health, healthy living and social opportunities.

10. Legacare

Legacare is an independent legal charity based in the North East of England that provides free legal advice and ongoing legal support for patients affected by life threatening or terminal illness. Advice is provided on a wide range of legal matters relating to the end of life, including employment, housing and mortgages, relationships and guardianship of children, insurance, debt, wills and probate, and lasting power of attorney. Patients or carers are referred to the service by healthcare professionals, including those working in hospices and a wide range of other health service settings.

11. Macmillan Cancer Support – South West London Macmillan Welfare Benefits Advice Service

The Welfare Benefits Advice service is funded by Macmillan Cancer Support and provided as a partnership between Citizens Advice Wandsworth and Citizens Advice Croydon. The advice service focuses on income maximisation by supporting cancer patients and their families with welfare benefits claims and grant applications. Advice on a wide range of other matters is also provided, including employment, housing, debt and help with health travel costs. The service employs the equivalent of four full time staff, supported by volunteers, who are mainly office based and answer a weekday helpline. Face to face appointments are also provided both at the service's offices and at outreach appointments across five hospitals and a hospice in south west London. Referrals are received from a wide range of clinical staff.

12. Maggie's Oxford – Welfare Benefits Advice

The Maggie's Centre is based in the grounds of the Churchill Hospital in Oxford. The service is for people with cancer, their family members, relatives and friends. Maggie's Centres provide a wide range of services under one roof in order to improve access, including emotional, social and practical support. The welfare benefits service provides a full package of support, from initial advice and form completion up to casework and tribunal representation (including Upper Tribunal). The advice service is there to help people maximise household income and challenge unfair decisions. Information is provided on benefits and grants that may be available. The service works closely with clinical staff at the hospital and receives referrals from them.

13. Newcastle Welfare Rights Service – HIV post

The Newcastle Welfare Rights Service is run by Newcastle City Council and funds one full time post to provide welfare benefits advice in the Royal Victoria Infirmary's centre for HIV care, which serves a wide geographical region. The post was established 20 years ago in response to high levels of need among HIV patients and has continued due to ongoing demand, as well as the value it provides to healthcare professionals. The adviser is part of the multi-disciplinary team at the HIV service and works closely with a wide range of health and social care professionals. The service is part of a holistic approach to supporting people who have been infected or affected by HIV, and receives referrals from hospital staff and GUM clinics across the North East. As well as assisting individuals, the adviser also provides a professional advice line to assist staff in other hospitals in helping patients with benefits issues.

14. Northumbria Healthcare NHS Foundation Trust – Welfare Rights team

The Welfare Rights team is longstanding, having begun work in the mid-1990s. The team of three advisers is based in the local authority and funded by the NHS as part of adult social care. They work closely with staff across the NHS, Clinical Commissioning Group and local

authority. The team runs a telephone helpline and provides advice, training and support in welfare rights matters. Their work is mainly with staff from health and social care, providing them with advice and information in order to help them support patients with welfare issues. In more complex cases, they also provide hands-on casework for patients themselves, including representation at tribunal. Referrals mainly come through adult social care and children's services. The team will advise on benefits eligibility for people with different conditions, in order to assist patients onto the right benefits and help prevent further health problems. The advisers also work with 'hospital to home' teams at local hospitals to provide training and support for staff to help them prepare patients for discharge.

15. Oxfordshire Mind – Benefits for Better Mental Health

Oxfordshire Mind has a history going back around 30 years of providing benefits and money advice to the people who use their services. The Benefits for Better Mental Health service is part of the Oxfordshire Mental Health Partnership and has developed over the last decade, working in partnership with mental health services across Oxfordshire to provide benefits advice for patients. The assistance includes advice, information and tribunal representation, as well as form-filling and letter-writing. Advice is provided in healthcare settings that include adult mental health teams, a crisis day hospital and inpatient mental health wards at two acute hospitals. Referrals are received from all locations, as well from GPs and through word of mouth. Advisers are experienced in mental health problems, as well as the particular benefits support needs of people with mental health issues. Ongoing assistance is provided to patients to ensure continued support after discharge from mental health teams.

16. Pathway – King's Health Partners homeless teams

The King's Health Partners Pathway homeless teams work across three hospitals in South London: Guy's and St Thomas', King's College Hospital and South London and Maudsley NHS Foundation Trust. The teams are multi-

disciplinary and include clinical staff across physical and mental health, occupational therapists, social workers, housing advisers and peer advocates. They work with homeless patients admitted to or attending hospital and aim to support clients holistically to maximise physical and mental health outcomes, improve safety of discharge and reduce hospital admissions. Advice and support are provided with a range of social welfare issues, including housing, benefits, immigration, health and community care. The team also supports people with GP registration and links them in with other community health services such as for substance misuse.

17. Release – Legal outreach surgeries in drug treatment centres

Release is an independent charity and the national centre for expertise on drugs and drugs law. It operates a legal outreach surgery programme that has been in operation for over 20 years. Advice is currently delivered in ten drug and alcohol treatment centres across eight London boroughs, seeing over 1800 clients a year. Many people receiving treatment for substance misuse will have a wide range of social welfare legal issues, including with welfare benefits, debt and housing among others. The programme aims to improve general health and wellbeing through the resolution of legal problems. The legal services offered by Release are only delivered within drug and alcohol treatment centres, providing a secure and familiar environment for clients, improving access to advice and promoting engagement with the treatment centre services. The legal team consist of non-practicing barristers, solicitors and paralegals that deliver the legal surgeries, supported by law student volunteers. Ongoing casework and representation are provided for clients, as well as onward referral if needed.

18. Salford City Council – Welfare Rights and Debt Advice

The Salford Welfare Rights and Debt Advice service is based in Salford City Council. The majority of the advice work focusses on welfare benefits, including casework and representation at tribunal if required. Funding from the Clinical Commissioning Group supports three Welfare Rights Officers within the team, and an additional two members of staff are employed to work specifically with mental health clients. The service has been working with community health centres since 1997 and was originally established to support local regeneration schemes. Over time, the work with GPs has expanded and the service currently covers seven health centres. Pre-booked appointments are offered to clients in GP practices and appointments are made by health centre receptionists. The service works closely with healthcare professionals and referrals are made by many health centre staff, including both doctors and nurses.

19. Social Action for Health – Tower Hamlets Health Advice Links Project (THHAL) and Hackney Information Advice Consortium (HIAC)

Social Action for Health leads two consortia of local advice agencies that deliver social welfare advice in primary healthcare settings across the London boroughs of Hackney and Tower Hamlets. The consortia include a mixture of grassroots and bigger organisations. The THHAL is a partnership of four local advice agencies: Limehouse Project, Bromley by Bow Centre, Island Advice Centre and Citizens Advice Bureau. The HIAC is a partnership of five local advice agencies: Hackney Marsh Partnership, DERMAN, Hoxton Trust, City and Hackney Carers Centre and Citizens Advice Bureau. The consortia partner with a total of 27 GP practices across the boroughs and provide advice on a wide range of social welfare issues, including (but not limited to) welfare benefits, housing, debt, family, employment and community care. Referrals are received from GPs, nurses and support workers at the practices, and clients can also self-refer.

20. Southwark Law Centre – Immigration Consultancy

The Southwark Law Centre provides an immigration consultancy service to the King’s Health Partners Pathway team. The Pathway team identified immigration status as being a root cause of high levels of homelessness locally, and approached the Law Centre to establish a partnership to tackle this problem. The service aims to address the underlying cause of homelessness and thus reduce associated poor health, mortality and A&E admissions. It allows access to advice for people who are lost in the system and would not otherwise obtain assistance. The Law Centre provides telephone consultancy to address enquiries from the Pathway teams at King’s and Guy’s & St Thomas’ hospitals, and a solicitor attends team meetings to advise on patients’ situations and relevant case law. Some limited casework is also provided through legal aid, although the project funding does not cover this.

21. Welsh Government – Better Advice, Better Health

Better Advice Better Health (BABH) has been operating across Wales since 2001. It is one strand of advice provided under the government-funded Better Advice Better Lives project, which is delivered by Citizens Advice Cymru. BABH aims to improve the health and well-being of the population by maximising income for people living in deprived areas whose health is likely to be affected by poverty. Face-to-face outreach social welfare legal services are delivered in a variety of healthcare settings, mainly in primary care but also in hospitals and mental health service settings. The objective is to reach those who may not access high street social welfare legal services. The services’ location, referral routes and structure of advice sessions vary across the local bureaux, however referrals most typically come via healthcare professionals. The advice covers issues such as debt, welfare benefits and housing.

22. YMCA DownsLink Group – Youth Advice Centre

The Youth Advice Centre is a well-established advice and support centre for people aged 16-25 in Brighton & Hove. It is part of the Brighton and Hove Wellbeing Service commissioned by the Clinical Commissioning Group, which integrates mental health support for children, young people and adults. The Wellbeing Service also connects with mental health services for children and young people in schools and NHS services. The Youth Advice Centre embodies the Youth Information, Advice and Counselling Services (YIACS) service model, bringing together a wide range of services to support young people holistically. This includes counselling and other psychological therapies, family mediation and sexual health services, as well as advice on employment, benefits, debt and housing issues. The Youth Advice Centre is a trusted youth-friendly venue with late night opening and thousands of contacts each year, proving holistic support in a stigma-free setting.

Appendix 2

Online questionnaire

Mapping social welfare advice in health settings

DETAILS OF ADVICE SERVICE CONNECTED WITH HEALTH SERVICE

1. Name of service you provide that is connected with a health service

2. Address of service

3. Name of lead contact for the service

4. Main contact email

5. Main contact phone number



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Mapping social welfare advice in health settings

LEGAL ADVICE

6. Which areas of law does the service provide advice on? Tick all that apply

- Consumer / General contract
- Debt
- Elder law
- Employment
- Family
- Health and Community Care
- Housing
- Immigration / Nationality
- Welfare benefits
- Other

7. What kind of support does the service provide for its clients? Tick all that apply

- Advice
- Advice with casework
- Advocacy
- Form filling
- Information
- Tribunal representation
- Other



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Mapping social welfare advice in health settings

HEALTH SERVICE CONNECTIONS

8. Which kind of health setting is the advice service connected with? Tick all that apply

- GP practice
- Other community health service
- Hospital
- Mental health service
- Other

9. Is the advice service physically located in a health service setting?

- Yes
- No

10. How is the advice service connected with healthcare? Tick all that apply

- Part of a local social prescribing scheme
- Receives referrals from healthcare professionals
- Serves people with a particular health condition
- Recruits clients from a particular health service
- Other

11. What health-related outcomes is the advice service aiming to achieve (if any)? Tick all that apply

- Improved mental wellbeing
- Improved physical health
- Reduced GP attendances
- Reduced hospital admissions
- None
- Other



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Mapping social welfare advice in health settings

FUNDING

(These questions refer to the funding of the advice service that is connected with healthcare)

12. What sources of funding does the advice service receive? Tick all that apply

- Local authority
- National government
- Local CCG
- Other NHS
- Charity
- Private
- Other

13. What is the timescale of the current funding for this advice service?

- Less than 6 months
- Between 6 months and 1 year
- Between 1 year and 3 years
- Between 3 years and 5 years
- Greater than 5 years
- Other



Mapping social welfare advice in health settings

RESEARCH AND EVALUATION

14. Is the advice service undertaking any evaluation or research on outcomes?

- Yes
- No



Mapping social welfare advice in health settings

RESEARCH AND EVALUATION

15. Please state how information for the evaluation is being gathered: Tick all that apply

- Descriptive feedback (including comments and interviews)
- Data from service delivery
- Data from client surveys
- Other

16. Please describe what is being measured for evaluation: Tick all that apply

- Service processes
- Legal case outcomes
- Health outcomes
- Other



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Mapping social welfare advice in health settings

FURTHER INFORMATION

17. Please tell us more about the work of this advice service, particularly regarding the nature of its connection with health or healthcare:

18. If you have a web page with further details about the service, please paste the link here:

19. If you know about other similar services (where social welfare advice is delivered in partnership with healthcare), please let us know:



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Appendix 3

List of services identified

Provider type	Service
Citizens Advice	Citizens Advice and Law Centre Derby
	Citizens Advice Ashfield
	Citizens Advice Barnet
	Citizens Advice Bassetlaw
	Citizens Advice Bath and North East Somerset
	Citizens Advice Bedford
	Citizens Advice Bedworth, Rugby and Nuneaton
	Citizens Advice Bexley
	Citizens Advice Blackpool
	Citizens Advice Bracknell
	Citizens Advice Bridgend County
	Citizens Advice Bridport and District
	Citizens Advice Brighton and Hove
	Citizens Advice Bristol
	Citizens Advice Broxtowe
	Citizens Advice Burnley and Pendle
	Citizens Advice Bury District
	Citizens Advice Caerphilly County
	Citizens Advice Calderdale District
	Citizens Advice Cambridge & District
	Citizens Advice Camden
	Citizens Advice Canolfan Cynghori Ynys Mon
	Citizens Advice Cardiff and Vale
	Citizens Advice Central & East Northamptonshire
	Citizens Advice Central and South Sussex (Horsham)
	Citizens Advice Cheadle
	Citizens Advice Cheshire East
	Citizens Advice Cheshire North
	Citizens Advice Cheshire West
	Citizens Advice Chesterfield
	Citizens Advice Chiltern

Provider type	Service
Citizens Advice <i>continued</i>	Citizens Advice Corby & Kettering
	Citizens Advice County Durham
	Citizens Advice Coventry
	Citizens Advice Craven and Harrogate Districts
	Citizens Advice Croydon
	Citizens Advice Cylch Conwy District
	Citizens Advice Cyngor Ar Bopeth Ceredigion
	Citizens Advice Cyngor Ar Bopeth Gwynedd
	Citizens Advice Dacorum District
	Citizens Advice Darlington
	Citizens Advice Daventry and District
	Citizens Advice Denbighshire
	Citizens Advice Diss, Thetford & District
	Citizens Advice Doncaster
	Citizens Advice Dorchester, Sherborne & Districts & North Dorset
	Citizens Advice East End
	Citizens Advice East Hampshire
	Citizens Advice East Lindsey
	Citizens Advice Edenbridge & Westerham
	Citizens Advice Enfield
	Citizens Advice Exeter
	Citizens Advice Felixstowe
	Citizens Advice Flintshire
	Citizens Advice Gateshead
	Citizens Advice Greenwich District
	Citizens Advice Grimsby Cleethorpes & District
	Citizens Advice Guildford
	Citizens Advice Halton District
	Citizens Advice Hambleton, Richmondshire, Selby and District
	Citizens Advice Hammersmith & Fulham
	Citizens Advice Haringey District
	Citizens Advice Harlow
	Citizens Advice Hart District
	Citizens Advice Hartlepool
	Citizens Advice Havant and District
	Citizens Advice Havering

Provider type	Service
Citizens Advice <i>continued</i>	Citizens Advice Heathlands
	Citizens Advice Hertsmere
	Citizens Advice Hounslow District
	Citizens Advice Ipswich & District
	Citizens Advice Isle of Wight
	Citizens Advice Jersey
	Citizens Advice Kensington & Chelsea
	Citizens Advice Knowsley District
	Citizens Advice Lancashire West
	Citizens Advice Leeds
	Citizens Advice Leighton Linlade
	Citizens Advice Leiston, Saxmundham & District
	Citizens Advice Lincoln & District
	Citizens Advice Maidstone
	Citizens Advice Manchester District
	Citizens Advice Medway District
	Citizens Advice Mendip
	Citizens Advice Merthyr Tydfil
	Citizens Advice Mid Lincolnshire
	Citizens Advice Mid Norfolk
	Citizens Advice Mid Suffolk Citizens Advice
	Citizens Advice Mid-Bedfordshire
	Citizens Advice Middlesbrough
	Citizens Advice Milton Keynes
	Citizens Advice Monmouthshire County
	Citizens Advice Newcastle
	Citizens Advice Newham
	Citizens Advice Newmarket
	Citizens Advice Norfolk
	Citizens Advice North East Derbyshire
	Citizens Advice North East Suffolk
	Citizens Advice North Hertfordshire
	Citizens Advice North Lancashire
	Citizens Advice North Liverpool
	Citizens Advice North Oxfordshire and South Northamptonshire
	Citizens Advice Northumberland

Provider type	Service
Citizens Advice <i>continued</i>	Citizens Advice Oxford
	Citizens Advice Pembrokeshire
	Citizens Advice Pennine West
	Citizens Advice Peterborough
	Citizens Advice Poole
	Citizens Advice Portsmouth
	Citizens Advice Powys
	Citizens Advice Preston
	Citizens Advice Purbeck
	Citizens Advice Reigate & Banstead
	Citizens Advice Rhondda Cynon Taff
	Citizens Advice Rossendale and Hyndburn
	Citizens Advice Rushmoor
	Citizens Advice Rutland
	Citizens Advice Salford
	Citizens Advice Scarborough and District
	Citizens Advice Sefton
	Citizens Advice Sheffield
	Citizens Advice Solihull Borough
	Citizens Advice South Derbyshire
	Citizens Advice South Liverpool
	Citizens Advice South Somerset
	Citizens Advice South Tyneside
	Citizens Advice South Worcestershire
	Citizens Advice Southampton
	Citizens Advice Southend
	Citizens Advice Southwark
	Citizens Advice St Albans District
	Citizens Advice St Helens
	Citizens Advice Staffordshire North and Stoke-on-Trent
	Citizens Advice Staffordshire South West
	Citizens Advice Stevenage
Citizens Advice Stockton & District	
Citizens Advice Stroud & Cotswold Districts	
Citizens Advice Sudbury	
Citizens Advice Suffolk West	

Provider type	Service
Citizens Advice <i>continued</i>	Citizens Advice Sunderland
	Citizens Advice Surrey
	Citizens Advice Swansea Neath Port Talbot
	Citizens Advice Taunton
	Citizens Advice Teignbridge
	Citizens Advice Telford & The Wrekin
	Citizens Advice Tendring
	Citizens Advice Torridge, North, Mid and West Devon
	Citizens Advice Waltham Forest
	Citizens Advice Wandsworth
	Citizens Advice Warrington District
	Citizens Advice Warwick District
	Citizens Advice Wavertree
	Citizens Advice West Lindsey
	Citizens Advice West Somerset
	Citizens Advice Westminster
	Citizens Advice Wigan Borough
	Citizens Advice Wiltshire
	Citizens Advice Wirral
	Citizens Advice Woking
Citizens Advice Wolverhampton District	
Citizens Advice Worcester	
Citizens Advice Wyre Forest	
Citizens Advice Ynys Mon	
Citizens Advice York & District	
Macmillan Cancer Support	Age UK Calderdale and Leeds Macmillan Benefits Advice Service
	Aintree Liverpool Macmillan Benefits Advice Service
	Aneurin Bevan Macmillan Benefits Advice Service
	Barnet Citizens Advice Macmillan Benefits Advice Service
	Barnsley Macmillan Benefits Advice Service
	Bassetlaw Macmillan / Citizens Advice Welfare Benefits Advice Service
	Bath and North East Devon BANES Macmillan Benefits Advice Service
	Bideford North Devon and Mid Devon Torridge Citizens Advice Macmillan Benefits Advice Service
	Birmingham Macmillan Benefits Advice Service
	Bolton Macmillan Benefits Advice Service

Provider type	Service
Macmillan Cancer Support <i>continued</i>	Brighton & Hove Citizens Advice Macmillan Benefits Advice Service
	Bristol Citizens Advice Macmillan Team
	Central Bedfordshire Macmillan Benefits Advice Service
	Cheshire East Citizens Advice Macmillan Benefits Advice Service
	Citizens Advice Camden Macmillan Welfare Advice Service at the Royal Free Hospital
	Citizens Advice Cornwall Macmillan Welfare Benefits Project
	Citizens Advice Northumbria Macmillan Benefits Advice Service
	Citizens Advice Oldham Macmillan Benefits Advice Service
	Clatterbridge Cancer Centre Macmillan Benefits Advice Service
	Colchester Borough Council Macmillan Benefits Advice Service
	Coventry Macmillan Benefits Advice Service
	Cumbria Macmillan Citizens Advice Welfare Benefits Advice Service
	Cwm Taf Macmillan Benefits Advice Service
	Darlington Citizens Advice Macmillan Benefits Advice Service
	Derbyshire Absestos Support Team Macmillan Adviser
	Derbyshire City & County Council Macmillan Benefits Advice Service
	Doncaster Macmillan Benefits Advice Service (Meeting New Horizons)
	Dorset Dorchester Macmillan Citizens Advice Service
	Dudley Macmillan Benefits Advice Service
	Durham Macmillan Benefits Advice Service
	East Kent Macmillan Benefits Advice Service (Canterbury) Citizens Advice
	East Sussex Macmillan Money Advice Service (Brighton Housing Trust)
	Forest of Dean Citizens Advice Macmillan Benefits Advice Service
	Grimsby Macmillan Benefits Advice Service – Palliative Care, Hospice
	Guildford Macmillan Benefits Advice Service
	Halton Borough Council Macmillan Welfare Rights Service
	Hambleton and Richmondshire Macmillan Benefits Advice Service
	Hampshire Macmillan Citizens Advice Bureau
	Harrogate Macmillan Benefits Advice Service
	Hartlepool West View Macmillan Benefits Advice Service
Hertfordshire Macmillan Benefits Advice Service	
Hull Royal Infirmary Macmillan Benefits Advice Service	
Imperial Macmillan Benefits Advice Service at Hammersmith and Charing Cross Hospitals	
Kirklees Council Macmillan Benefits Advice Service	

Provider type	Service
Macmillan Cancer Support <i>continued</i>	Leeds Macmillan Benefits Advice Service
	Leicestershire, Leicester City and Rutland Macmillan Citizens Advice Welfare Benefits Service
	Liverpool Macmillan Benefits Advice
	Luton Macmillan Benefits Advisor
	Lynda Jackson Macmillan Benefits Advice Service
	Manchester Macmillan Welfare Rights Service
	Middlesbrough Macmillan Benefits Advice Service
	Milton Keynes Macmillan Benefits Advice Service
	Neath Port Talbot Macmillan Benefits Advice Service
	Newcastle Macmillan Benefits Advice Service
	North Somerset Citizens Advice Macmillan Benefits Advice Service
	North Tyneside Council Macmillan Benefits Advice Service
	Northamptonshire Macmillan Citizens Advice Service
	Oxfordshire Macmillan Benefits Advice Service
	Pembrokeshire Macmillan Benefits Advice Service
	Plymouth Derriford Hospital Macmillan Benefits Adviser
	Poole and Bournemouth Citizens Advice Macmillan Benefits Advice Service
	Powys Macmillan Benefits Advice Service
	Reading Berkshire Macmillan Benefits Service
	Redbridge Macmillan Advice Project
	Rotherham Macmillan Benefits Advice Service
	Royal Brompton Macmillan Benefits Advice Service
	Royal Liverpool Macmillan Benefits Adviser
	Shropshire Macmillan Benefits Advice Service
	South Somerset and Yeovil Macmillan Benefits Advice Service
	South Tyneside Cancer Connections Macmillan Benefits Advice Service
	South West London Macmillan Citizens Advice Service
	Southwark Macmillan Benefits Advice Service
	St Barnabas Lincolnshire Hospice Trust Macmillan Welfare Team
	St Helen's Macmillan Benefits Adviser
Staffordshire Disability Solutions Macmillan Benefits Service	
Stockport Council Macmillan Benefits Advice Service	
Stoke Mandeville Hospital Macmillan Benefits Advice Service	
Suffolk County Council Macmillan Benefits Advice Service	
Sunderland Macmillan Benefits Advice Service	

Provider type	Service
	Swindon Citizens Advice Macmillan Benefits Advice Service
	Tameside Macmillan Benefits Advisor
	Taunton and District Macmillan Citizens Advice Benefits Service
	The Haven Macmillan Benefits Advice Service
	The Medway Council & Macmillan Welfare Benefits Service
	Toynbee Hall Macmillan Benefits Advice Service
	University College Hospital Macmillan Welfare Rights Service
	Velindre Macmillan Benefits Advice Service
	Warrington CCG Macmillan Benefits Advice Service
	West Sussex (Central and South) Macmillan Benefits Advice Service
	Wiltshire Macmillan Benefits Advice Service
	Wolverhampton Macmillan Benefits Advice Service
	Worcestershire & Herefordshire Macmillan Citizens Advice
	Wrexham & Flintshire Macmillan Benefits Advice Service
	Wrightington, Wigan and Leigh Benefits Advisor
Local authorities	Ashford Borough Council Welfare Intervention Officers
	Cambridge City Council Welfare Benefits Advice Service
	Halton Borough Council Welfare Rights Service
	Hertfordshire County Council Mental Health Service Project
	Lambeth Council Every Pound Counts Service
	Lincolnshire County Council Wellbeing Service
	Newcastle City Council Welfare Rights Service HIV post
	Norwich City Council Community Social Prescribing
	Salford City Council Welfare Rights and Debt Advice Service
	South Gloucestershire Council Financial Inclusion Service
	Wrexham County Borough Council Income Maximization Unit Welfare Rights Unit
Health services	Big C Welfare Advice, Norfolk hospitals
	Cheltenham & Tewkesbury Community Wellbeing Service (Social Prescribing)
	City and Hackney CCG Social Prescribing Service
	Dorothy House Hospice Family Support Team
	Dorothy House Hospice with Mogers Drewett solicitors (free Will-making service)
	East Cambridgeshire Older Persons Service
	East Sussex Better Together Alliance

Provider type	Service
Health services <i>continued</i>	Eastbourne Hailsham & Seaford CCG and Hastings & Rother CCG Debt & Benefit Advice Project
	Essex Partnership University NHS Foundation Trust – Employment Service
	GP Primary Choice Ltd (North East Essex) GP Care Adviser
	Great Yarmouth and Waveney CCG social prescribing service pilot
	Greater Manchester Mental Health NHS Foundation Trust Welfare Rights Team (dementia services)
	Harrogate and District NHS Foundation Trust Sir Robert Ogden Cancer Centre outreach service
	Heart of Kent Hospice Family Support Team Welfare Adviser
	High Weald Lewes Havens CCG Connecting 4 You
	King's Health Partners Homeless Teams
	Lambeth Drug and Alcohol services at The Harbour & Lorraine Hewitt House
	Maggie's Centre Cambridge
	Maggie's Centre Cheltenham
	Maggie's Centre Liverpool
	Maggie's Centre Manchester
	Maggie's Centre Newcastle
	Maggie's Centre Nottingham
	Maggie's Centre Oxford
	Maggie's Centre Royal Free
	Maggie's Centre Swansea
	Maggie's Centre West London
	Mary Stevens Hospice social work service
	Maudsley Hospital Welfare Advice Service
	Northumbria Healthcare NHS Foundation Trust Welfare Rights team
	Northamptonshire Centre for Oncology and Haematology, Northampton General Hospital Macmillan Social Care Coordinator
	Nottinghamshire Healthcare Foundation Trust Employment Connections
	Pathway team Bradford Bevan
	Pathway team Brighton and Sussex University Hospital
	Pathway team Kings College London
	Pathway team Leeds
	Pathway team Manchester
	Pathway team Royal Free
	Pathway team The Royal London
	Pathway team UCLH

Provider type	Service
Health services <i>continued</i>	Pilgrims Hospices Kent welfare rights advice
	Princess Alice Hospice Esher financial and benefit advice
	Royal Brompton Hospital NHS Welfare Advice Service
	Royal Free Charity Support Hub
	Royal Trinity Hospice London welfare rights advice
	Solent Mind & Southern Health NHS Foundation Trust ITalk Hampshire Employment Support Team
	Springfield Hospital (South West London and St George's Mental Health Trust) Welfare Benefits Team
	St Catherine's Hospice Crawley welfare rights advice
	St Christopher's Hospice welfare rights advice
	St Clare Hospice Patient and Family Support
	St David's Hospice Care
	St Joseph's Hospice Hackney welfare rights advice
	St Oswald's Hospice
	St Pancras Hospital welfare rights adviser
	Sue Ryder Wheatfields Hospice Patient and Family Support Team
	The Royal Marsden hospital Sutton welfare benefits advice
	The Royal Marsden hospital Chelsea welfare benefits advice
	Wisdom Hospice Rochester welfare rights advice
	Woking and Sam Beare Hospices Social Work Team
	Other charities and partnerships
Age UK Newcastle Wellbeing Coordination Service	
Age UK Norfolk	
Age UK Northamptonshire	
Age UK Norwich GP outreach	
Age UK Nottingham Benefits Advice Service	
Age UK Nottingham Housing Options and Silverlinks Advice Service	
Age UK South Gloucestershire	
Ask Us Wirral	
Autism Anglia	
Barnet Community Projects Rainbow Money Advice	
Better Advice Better Lives (Welsh Government)	
Bromley Third Sector Enterprise Bromley Well service	
Bromley by Bow Social Welfare Advice Service	
Cambridgeshire Health & Wellbeing Network	

Provider type	Service
Other charities and partnerships <i>continued</i>	Cambridge Money Advice Centre
	Camden Advice Partnership
	Caring for Communities and People Cheltenham and Tewkesbury Community Wellbeing Service
	Ceredigion Third Sector Community Resource Team
	CommuniCare Reading
	Community Law Service Northampton and Counties
	Croydon Voluntary Action
	Equal Lives Norwich GP surgery outreach
	Helping Hands Community Trust Wigston
	Independent Domestic Abuse Support Craven
	It's Your Choice Southampton
	Latin American Women's Rights Service Violence Against Women and Girls Programme
	Legacare
	Legal Advice Centre University House Medico-Legal Project
	Manchester Mind Young Adult Advice and Support project and Integrated Response Service
	Manchester University Legal Advice Centre Dementia Law Clinic
	Mancroft Advice Project Norwich
	Middlesbrough & Stockton Mind Firm Foundations service
	Money Advice Plus Brighton and Eastbourne
	Newcastle Law Centre Specialist Welfare Benefits advice
	North Bristol Advice Service Debt and Welfare Benefits advice
	Northampton Association for the Accommodation of the Single Homeless (NASH)
	Northamptonshire Action with Communities in Rural England (ACRE) Rural Wellbeing Service
	Northamptonshire Carers
	Oxfordshire Mind Benefits for Better Mental Health
	Reading Voluntary Action Social Prescribing service
	Release legal surgery programme
	Rethink Mental Illness Mental Health & Money Advice service
	Shelter Family Health & Housing Project Newcastle
	Shelter Family Health & Housing Project Newham
Social Action for Health Hackney Information Advice Consortium	
Social Action for Health Tower Hamlets Health Advice Links Project	

Provider type	Service
Other charities and partnerships <i>continued</i>	South Bristol Advice Service
	Southwark Law Centre Pathway Project
	Springfield Advice and Law Centre
	St Pauls Advice Centre Bristol Welfare Benefits Specialist Advice Session
	Stonham Homestay working with Norfolk GPs
	UCL integrated Legal Advice Clinic
	Venus Charity Financial Resilience service
	YMCA DownsLink Group Youth Advice Centre