

## **Embedding social advice services for a stronger NHS**

### Recommendations to expand the role of social advice services as part of the NHS's 10-Year Plan

#### **Summary**

AdviceUK welcomes the opportunity to contribute to the extensive development of the NHS 10-Year Health Plan. We aim to highlight the critical need for synergy between the advice sector and healthcare services. This call for input provides a vital opportunity to advocate for policies that integrate advice services with the NHS, enhancing the NHS's capacity to drive better health outcomes and address the wider determinants of health.

AdviceUK's submission, on behalf of over 600 of our member organisations in England (including 59 specialist health and disabilities advice centres), draws on evidence from our members, their clients, and the broader advice sector. We also incorporate secondary data from in-depth reports by AdviceUK members, such as the Bromley by Bow Centre and academic partners, such as University College London. This response emphasises the pivotal role of integrated advice services in tackling health inequalities, improving patient outcomes, and reducing strain on NHS resources.

Our members are currently facing significant pressures in service delivery, including funding instability, workforce shortages, adviser wellbeing issues, and limited integration with structural services. These challenges are particularly acute in deprived and rural areas, where access to advice is often constrained.

Through evidence-based recommendations, we underscore the value of embedding advice services within NHS pathways. Our response outlines key policy recommendations which aim to shape future policies to foster collaboration between healthcare and advice services, ultimately contributing to a more equitable and effective health system.

Overall, we believe that for the new 10 Year Plan to meet its aims of improving NHS services and focusing on prevention, it will be essential for it to recognise and reflect the role that advice services can and do play in supporting patients and people living with chronic health conditions.

The key recommendations that are detailed below include:

1. Integrating health advice into both primary care and hospitals
2. Scaling Health-Justice Partnerships (HJPs) to combat inequalities
3. Enhancing advice services in preventative care
4. Expanding social prescribing to include specialist advice services

## 1. Integrating Health Advice in NHS Primary Care and Hospitals by:

- Embedding advisors in key healthcare settings
- Provide NHS-specific training to advisers within healthcare settings
- Expanding funding for integrated health and welfare advice services

To address health inequalities and improve outcomes, funding should be prioritised for integrating social advice services within NHS primary care and hospital settings, particularly in regions with pronounced disparities. Embedding welfare advisors in high-demand areas such as GP practices, maternity clinics, and A&E departments can foster a multidisciplinary and preventive healthcare approach – saving NHS resources in the long run.

Social determinants of health—such as housing instability, debt, and employment insecurity—are significant drivers of poor health outcomes. Embedding welfare advice services directly into healthcare settings addresses these upstream factors, allowing the NHS to focus on clinical care. This integration not only benefits patients by resolving root causes of health issues but also alleviates pressure on NHS services. To ensure seamless service delivery, NHS-specific training should be provided to welfare and legal advisors, equipping them to offer enhanced, contextually informed patient support.

The transformative potential of embedding welfare advice into healthcare settings is well-documented:

1. A social prescribing and welfare advice pilot in East London achieved a **35% reduction in GP appointments**. This success was attributed to addressing root causes of poor health, such as housing insecurity, debt, and unemployment, through integrated welfare advice (Bromley by Bow Centre, 2023).
2. Among member advice organisations, **72% reported a growing demand for advice**, highlighting the increasing prevalence of complex needs exacerbated by systemic barriers to care (AdviceUK, 2024).
3. Embedding welfare advice within GP surgeries led to significant health improvements, including a **25% reduction in emergency hospital admissions for respiratory conditions**. This was achieved by resolving housing issues for asthma patients, which reduced symptom exacerbation (The Legal Education Foundation, 2015).
4. The critical role of GP Practice staff in connecting patients with welfare rights and money advice is underscored in a Scottish Government-funded evaluation: 75% of individuals accessed advice after a recommendation from practice staff, 38% sought advice due to being unable to work for health reasons, and nearly 50% had a disability or long-term health condition. This highlights the importance of integrating targeted support within healthcare settings (WAHP, 2024).
5. Co-located advice services reduced stress, improved mental health, and alleviated socio-economic pressures, such as council tax debt and disability payment claims, enhancing overall well-being (WAHP, 2024).

6. Co-located legal advice in GP practices increased access for vulnerable groups, reduced GP workload, and mitigated health inequalities by addressing non-clinical factors such as housing and debt (UCL Centre for Access to Justice, 2018).

## 2. Scale Health-Justice Partnerships (HJPs) to Combat Inequalities by:

- Establishing HJPs in high-priority regions with significant health inequalities, as indicated by health inequality indices.
- Building capacity within NHS teams to identify patients with legal needs and collaborate with advice organisations.
- Raising awareness among policymakers and healthcare providers about the proven impact of HJPs in improving health outcomes.

Health-Justice Partnerships (HJPs) leverage legal expertise to address systemic health inequalities, enabling patients to resolve legal issues—such as eviction or benefit denials—that directly impact their health. By embedding legal support into healthcare settings, HJPs help mitigate the social determinants of health, providing an integrated response to a range of complex needs.

To maximise their impact, the establishment and expansion of HJPs should be prioritised across England, focusing on under-resourced urban and rural areas.

The potential for impact is documented:

1. Pregnant women at risk of eviction received immediate legal support, securing stable housing. This intervention reduced risks of **low birth weight** and **preterm births**, highlighting the vital role of HJPs in safeguarding maternal and infant health. For instance, in South London’s maternity clinic partnership, **78% of clients achieved improved housing conditions**, reducing critical health risks for mothers and infants (UCL Health of the Public, 2024).
2. Patients referred for welfare-related issues reported substantial reductions in **stress and anxiety**, facilitating faster recovery post-surgery (Bradford Advice Service, The Legal Education Foundation, 2015).
3. Providing welfare advice in GP practices demonstrated tangible benefits such as financial gains (£23 million) and improved health outcomes, showcasing the potential for similar partnerships in diverse settings (WAHP, 2024).

### 3. Utilise Advice Services to Prevent and Manage Chronic Illness by:

Early intervention through advice services can play a transformative role in preventing and managing chronic illnesses, particularly those exacerbated by poverty, stress, and poor living conditions, such as respiratory conditions, diabetes, hypertension, and mental health conditions.

To harness the full potential of advice services in preventative care, the following actions are recommended:

- Funding advice services as part of preventative health strategies, acknowledging their role in reducing demand for clinical interventions.
- Introducing long-term commissioning frameworks that embed advice services into NHS preventative health strategies.
- Developing referral pathways between secondary care providers and advice services to enhance chronic disease management and patient support.

#### Evidence

1. Patients managing chronic illnesses, such as diabetes, experienced improved health outcomes after resolving housing instability and energy debt. This intervention reduced hospital readmissions by **20%**, underscoring the preventative impact of addressing social determinants of health (Bromley by Bow Centre, 2023).
2. Poverty limits access to essential services, leading to delayed care; A&E attendance is nearly twice as high, and emergency admissions are 68% higher among the most deprived groups (Mallorie, 2024). Advice organisations report that clients with chronic health conditions face welfare-related challenges, such as housing insecurity and fuel poverty. Despite their impact, advice services struggle with capacity and funding constraints.
3. Patients with long-term health conditions reported reduced anxiety and depression after accessing welfare advice. For example, resolving financial and housing issues helped manage chronic illness by reducing stress-induced symptom exacerbations (WAHP, 2024).

### 4. Expand Social Prescribing to Include Specialist Advice Services by:

- Making welfare advice services an integral part of social prescribing frameworks across the NHS, with a focus on addressing both medical and social determinants of health.
- Funding initiatives designed to engage marginalised groups, such as migrants, disabled people, and minority ethnic groups, ensuring cultural and linguistic barriers are addressed.

Social prescribing is increasingly recognised for its positive impact on physical and mental health and well-being. Incorporating welfare advice services within social prescribing frameworks ensures that patients receive holistic care that addresses both their social and medical needs. Social prescribing models incorporating welfare advice effectively addressed immediate social needs, enabling better long-term health outcomes and reducing the burden on clinical care services.

### Evidence

1. Patients referred for financial advice experienced a **30% reduction in antidepressant use**, as improved financial stability significantly enhanced mental health outcomes (Dorset Social Prescribing Project, The Legal Education Foundation, 2015).
2. Integrating social prescribing with specialist debt advice resulted in measurable health improvements and a **15% decrease in GP visits**, demonstrating the cost-effectiveness of holistic care (**Camden GP Cluster**, Bromley by Bow Centre, 2023).
3. A 40-year-old client struggling with anxiety and unemployment benefitted from linked welfare advice and mental health support. The intervention enabled them to re-enter the workforce, reducing dependence on healthcare services and improving overall well-being (Bromley by Bow Centre, 2023).

### Conclusion

Health advice services are not ancillary but essential to the NHS's mission of improving health outcomes and reducing inequalities. By addressing social determinants, these services alleviate the burden on clinical care and empower individuals to lead healthier lives. The evidence is clear: embedding, funding, and supporting advice services within NHS systems will yield measurable benefits for patients, communities, and the healthcare system.

AdviceUK urges the NHS to act on these recommendations to create a more equitable and efficient healthcare system.

### Contact information

For further collaboration or implementation details, please contact the Policy and Public Affairs team at AdviceUK: [sarah.macfadyen@adviceuk.org.uk](mailto:sarah.macfadyen@adviceuk.org.uk)

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