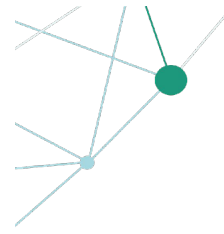


# Supporting greater Financial security and Reducing Poverty

Presentation to the Hackney Health and  
Wellbeing Board

21st March 2024

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Board



# Health and Wellbeing Board priorities

Supporting greater financial security and reducing poverty is one of Hackney Health and Wellbeing Board's three priorities.

We believe that reducing poverty contributes to the other two priorities:

- **Improving mental health:** Being in poverty causes stress and can lead to relationship breakdown which can contribute to poor mental health;
- **Supporting social connection:** Good social connections can help residents access the help they need quickly. This helps prevent and mitigate the impacts of poverty.



# We need to work differently, why?

**Rising demand  
for services**

**Growing  
inequality**

**Declining  
resources in  
the system**

**Declining faith  
in democratic  
legitimacy**

**Community  
Paradigm**

More power & resources  
to communities

([New Local](#))

**Building Future  
Public Services**

*Citizens* shape outcomes  
and services

([The RSA](#))

**Co-Production**

Recognising the  
community as an asset

([The LGA](#))

# How?

*Working with residents, directly and with local community partners to achieve better outcomes for the borough and tackle inequalities through:*

## Prevention

- Early, fairer help and prevention - in communities and with communities
- Developing more empowering ways to meet needs, based on strengths and agency
- Working more relationally, whether at a community or individual level
- Building reach and access to services

## Community confidence and cohesion

- Building trust between communities and the state
- Proactively promoting tolerance between communities and standing up for communities against discrimination and hate
- Becoming more open, inclusive and culturally humble
- Improving the way we communicate and engage with residents

## Smoother, more effective decision making, strategic responses

- Developing better strategy and solutions collaboratively across the system, and working more openly with residents
- Being agile and adaptive in the context of continued uncertainty and crisis
- Supporting good officer / member relations thus helping us develop better decisions

# How? cont

## ***System Level:***

- Helping to support people who have been 'lost' or 'stuck' in long term system usage
- Helping to spot early warning signs and extending reach of other services
- Enabling individuals to gain access to lower levels of support through joined-up approach.
- Moving other services towards a more person-centred, preventative approach.

## ***Community Level:***

- Building Community Connections/introductions
- People finding community solutions
- More engagement with community groups
- Building Community Capacity and stronger community infrastructure

## ***Individual Level:***

- Supporting people to feel more confident to navigate challenges facing them
- People more able to access services and navigate the system
- Individuals developing stronger social connections



# Our approach

## Radical innovation

Since February 2023, 14 council, health and care services can make fast referrals for financial support for residents who need it. This builds reach and encourages preventative approaches.

## Peer support and Learning

Equipping frontline staff to better support residents.

- Regular partnership-wide newsletter describing help available and a fortnightly 'tools for front line practitioners' session.
- Peer support sessions available to Black and Global Majority community practitioners and frontline staff to share insights, draw out learning and promote wellbeing
- Making Every Contact Count training for frontline staff

## Social value

LBH Money Hub - single access point for emergency funding. Data used to identify those at risk. Maximising income and benefit take-up. Outreach workers collaborate with community partners.

## Welfare and financial advice embedded in health settings

Welfare advice in health settings programme currently funded by PH/ICB - evaluation due June 2024  
ELFT Healthier Wealthier families pilot (financial advice within Children's disability services) - also being evaluated currently

Employment support and financial resilience being considered for integration into ERNH outcomes framework



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# Our approach (cont'd)

## Community partnerships

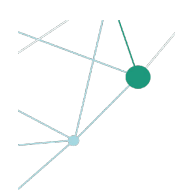
Community partners are better able to reach diversity of residents than the Council. Investing in them builds community wealth. Mapped organisations and created open ways to bring people together. Routed funding like Household Support Fund to community partners to reach those in need

## Enterprise and social economy

Worked with community partners to develop more sustainable ways to support residents through community shops. Invested in infrastructure needed to manage food surplus so it can be centrally stored and distributed to a wide range of partners. Exploring how we can better tackle food poverty in school Building links between the Food Network and Lunch Clubs - just over £200,000 invested annually to support 12 clubs.

## Engagement and co-production

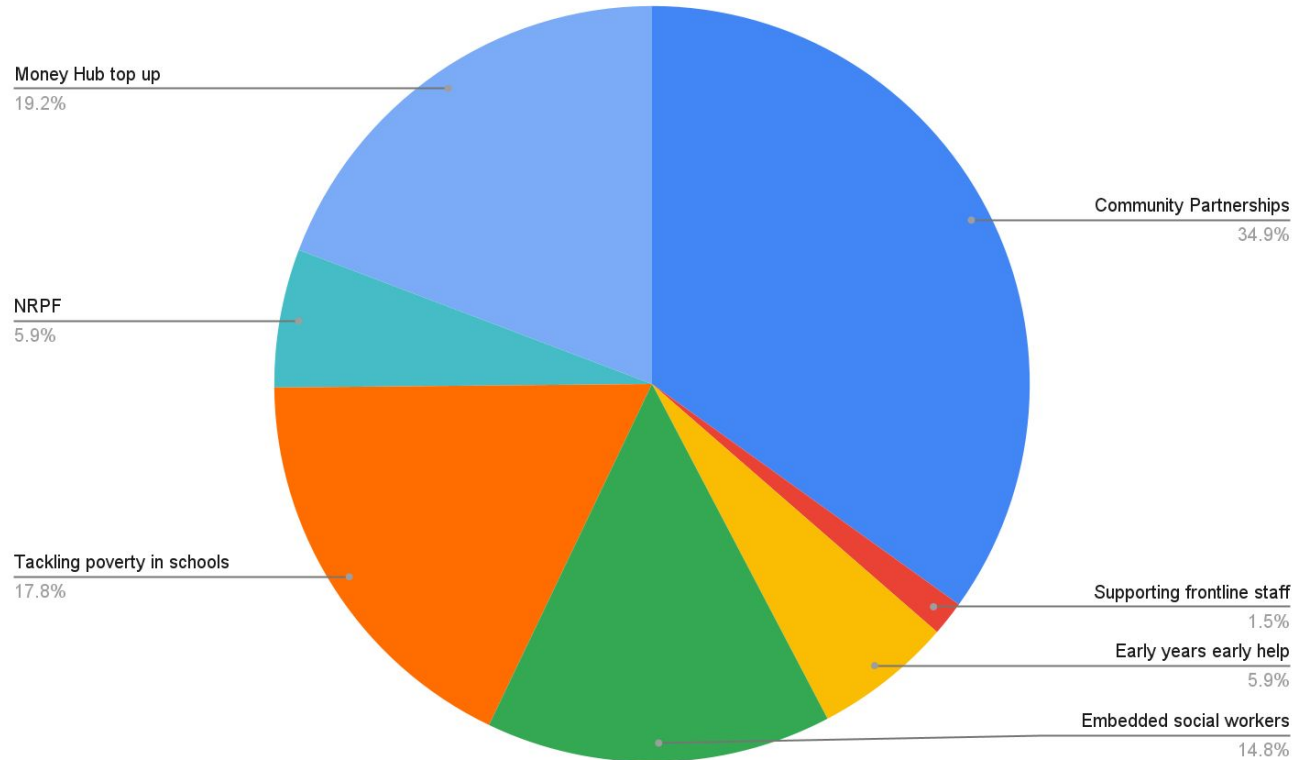
Developing hyper local partnerships, supported by two “system convenors.” Aided mobilisation of warm spaces and network of 25 organisations funded because of community reach. Now, social prescribers, Money Hub and employment support deliver outreach in community settings. Now enabling VCS organisations to shadow Council services and vice versa. Creates connections between Council led services and grassroots support.



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# £1.69m additional LBH investment in poverty reduction: 2020 and 2024



2020-23 -£840k

23-25 £850k

## Objective 1: prevention

**Early years early help:** Fresh food voucher scheme linking with markets and development of early help work

**Social workers embedded in homelessness prevention-** to help them secure and maintain housing tenancies.

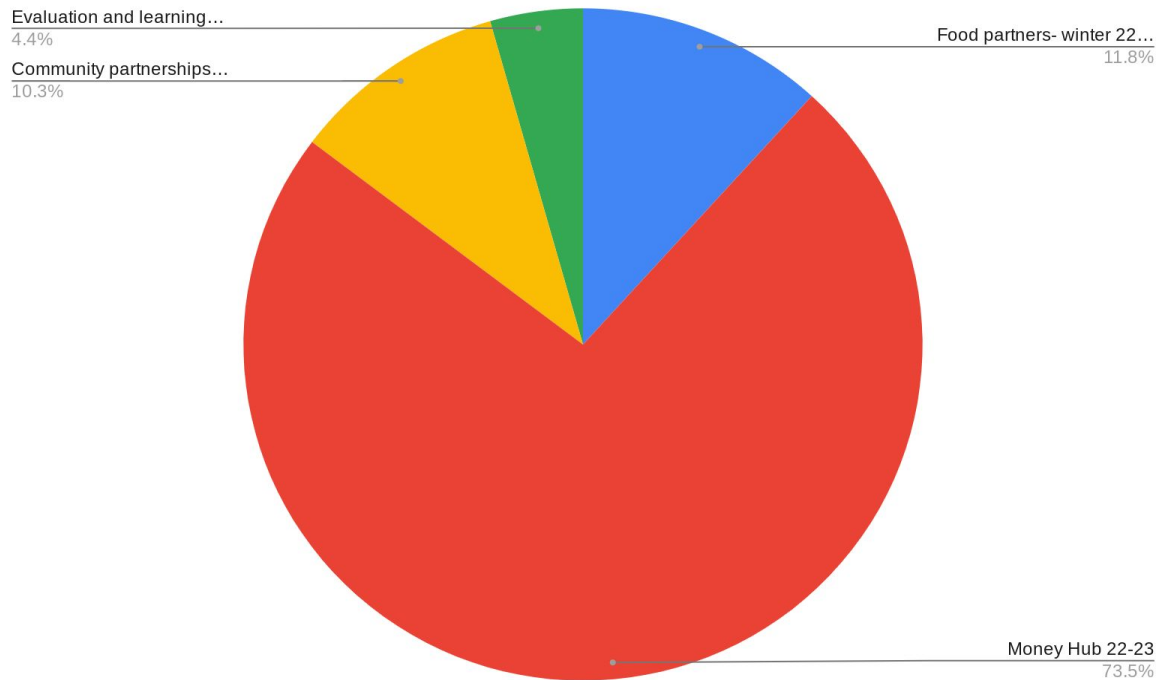
**Objective 3: material needs**  
**Community partnerships,** developing social economy, developing hyper local partnerships, inc right to food  
**Tackling poverty in schools**

**NRPF:** hardship and advice  
**Money Hub -** advice and partnership work

**Objective 5: ways of working**  
**Supporting frontline staff -** digital tools, support to 100+ frontline workers



# £68k additional health investment in poverty reduction: 2022 to 2025



## Objective 3: material needs

### 2022-23

£80k Food partners- winter

### 2023-25

£500k Money Hub

### 2024-25

£70k Community partnerships

£30k Evaluation and learning

# Live issues - temporary extension of HSF and rollout of Universal Credit

£5.6m annual Household Support Fund has been extended, but only until the end of September 2024

Availability of crisis support has encouraged residents to come forward for longer-term support. Funding has enabled services to engage in poverty reduction

Crisis payments have been crucial in alleviating short term need, reducing stress and enabling residents to purchase essentials like food, fuel and warm clothes.

Families on free school meals, the Orthodox Jewish community, older and disabled residents, households in Temporary Accommodation and VCS organisations providing food and advice will be most impacted when funding ends

From April remaining claimants to legacy benefits, except Employment Support Allowance and ESA with Housing Benefits will be migrated to Universal Credit.

Danger residents could lose entitlement if they ignore migration letters, leading to loss of income, rising debt and rent arrears

Registered Social Landlords and Hackney Housing risk losing revenues

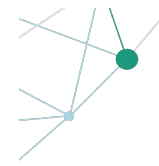


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# From Crisis Support to Early Help and Prevention

- Profiling recipients of crisis support to understand who we have reached
- Working with University of Sheffield to collect [case studies](#) and conduct in-depth interviews with HSF recipients to better understand personal, community and institutional supports that prevent crisis, to inform future commissioning and service design
- Analysing Council spending with voluntary and community sector with a view to redirecting funding to support early help and prevention if necessary
- Building on our collaborative work to develop a [Fairer Help](#) model enabling statutory services share expertise to help VCS partners support residents more effectively



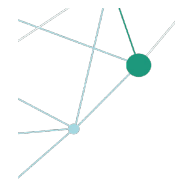
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# Early learning and case studies

Discussions with services and case studies received to date suggests our approach has;

- Crisis support, though flawed, can build trust with residents otherwise reluctant to engage, reduce stress, free up cash e.g. for warm clothes or address short-term cash flow;
- Tools and peer support activities have Built trust between services system-wide;
- Enabled services to start thinking about prevention and poverty reduction
- Long-term support and capacity needed to further develop the work



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# Challenges for system and partners

How do we get teams to take on wider determinants of health as their responsibility – including the Health Wellbeing Board priorities? How do we mainstream this as a way of working?

How do we balance tendency toward short term thinking (e.g. system financial recovery) with longer term approach needed to tackle poverty and financial security)?

How do we get people to understand the approach to poverty reduction and financial security, and understand what they can do within their teams, services, transformation areas?

How does this work practically?

- What is the most effective governance of this work?
- How do we ensure alignment of projects?
- How do we keep partners updated and allow partners to collectively plan our work?



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