



# Health-Justice Partnerships in England: An implementation study

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## About health-justice partnerships

Health-justice partnerships are collaborations between healthcare and welfare rights advice services. They provide assistance for people on social welfare legal issues, for example benefits, debt, housing and employment.

Health-justice partnerships can be designed in diverse ways. They involve dedicated and specialist advice services, often delivered on site in the healthcare setting. This can include hospitals, GP practices and mental health services, among others.

Integrating welfare rights advice with patient care:

- Reaches people at a time and place of need
- Supports access to legal rights and entitlements among vulnerable patient groups.
- Addresses leading social and economic causes of poor health and inequality. Evidence shows they have a positive impact on mental wellbeing, through improving social circumstances and stability.
- Provides an integrated response to complex individual needs and supports health and social care professionals in their work.



## Policy implications

- Wider action is needed to ensure greater recognition of health-justice partnerships and a more strategic approach to implementing them nationally.
- Consideration must be given for how to fund and resource these partnerships, to ensure they can continue to support deprived communities.

*“When you’re coming into hospital and you’re quite disorientated... having those services available is a safety net and provides an important support that can make all the difference at that time.”*

Funder

## About the research

The study was guided by the research question: **‘How can health-justice partnerships be implemented successfully?’**. The study explored the following themes:

- Collaborative working (how health and advice teams can work together effectively)
- Impact (how aspects of service delivery can improve outcomes for patients and staff)
- Sustainability (how partnerships can be supported and maintained over time)

Nine services across England acted as case studies for the project. Staff in the services participated in interviews exploring their work. This included professionals in frontline, management and funding roles.

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## Key findings

Health and advice teams can work together in different ways. Sometimes this is as simple as making a referral. But it can be much closer; for example, actively assessing a person's welfare needs, discussing the appropriate response, coordinating the support provided, sourcing the necessary evidence, and communicating a person's progress.

Closer team working between the two services led to greater impacts; for example, better access, improved welfare outcomes, improved patient experience and greater knowledge and expertise among staff.

Team working between services could be difficult to establish, and was facilitated by:

- Willingness (teams valuing the partnership and wanting to work together for a common purpose)
- Ability (teams having the necessary knowledge, opportunities to interact and administrative systems for joint working)
- Confidence (teams developing trusting relationships and new working habits)

Maintaining partnerships over time was an ongoing challenge and three of the case studies had ended. In each case, funding or other resource issues had contributed to service closure.

Funding decisions were influenced by various factors:

- Willingness (funders' belief in the value of the service and their perceived responsibility to fund it)
- Ability (the overall availability of funds)
- Confidence (decisions were reinforced by good evidence, positive reputation and strong strategic relationships)

Where funders believed strongly in the partnership, they had sometimes been able to protect the budget over time; however, broader financial and economic difficulties could override this.

*"If she can help in her expert welfare rights role, it just makes our job a little bit easier... People calm down, they become less distressed, they're then able to look after themselves, and adhere to their medication... so it has a big impact on somebody's ability to just function in the world."*

Healthcare professional

## Further information

Further information on this work can be found at:

[Implementation of health-justice partnerships](#)

[Health-justice partnerships: What role do legal services play in supporting patient health?](#)

## Contact the researcher

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## About the School

The NIHR School for Public Health Research is a partnership between the Universities of Sheffield; Bristol; Cambridge; Imperial; and University College London; The London School for Hygiene and Tropical Medicine (LSHTM); LiLaC – a collaboration between the Universities of Liverpool and Lancaster; and Fuse - The Centre for Translational Research in Public Health a collaboration between Newcastle, Durham, Northumbria, Sunderland and Teesside Universities.

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