Case Study: Supporting a Homeless Patient with Financial and Healthcare Access Barriers

Background

During a MECC (Making Every Contact Count) wellbeing check, a homeless male patient presented with low energy, swollen hands and frequent cramps. He was not on any medication and reported that he was unable to afford pain relief due to having no financial support. Despite holding a British passport, he believed he was not entitled to benefits because he had recently arrived from South Africa. His case worker was in the process of clarifying his eligibility for financial assistance, but in the meantime, he was experiencing significant distress due to lack of money and inability to buy basic necessities.

What We Did

Immediate Financial Assistance

- Recognising the urgent financial strain, we provided the patient with a £20 grocery voucher to help him purchase pain relief and essential items.

Securing Access to Free Prescriptions

- We contacted the patient's GP surgery to discuss both his physical symptoms and his financial barriers to healthcare access.
- The Practice Manager was very supportive and agreed to assist the patient in applying for an HC1 form, which would allow him to access free prescriptions and healthcare services while his benefit entitlement was being reviewed.
- We also requested a referral to a Care Coordinator to provide him with further practical and wellbeing support.

Impact

By taking a proactive, patient-centred approach, we were able to:

- Provide urgent financial relief, allowing the patient to purchase essential medication.
- Advocate for his healthcare needs, ensuring his symptoms were brought to the attention of his GP.
- Facilitate access to free prescriptions, preventing cost from being a barrier to his treatment.
- Engage his GP practice in coordinating ongoing support, helping him navigate the complexities of the benefits system and healthcare access.

Conclusion

This case highlights the severe financial and healthcare access barriers experienced by some homeless individuals, even those with British citizenship. It also demonstrates how small but meaningful interventions such as financial aid, GP advocacy and access to free prescriptions can alleviate immediate distress and support long term stability.