

TITLE OF REPORT: Social Prescribing in Gateshead: Update and Next Steps

1. Purpose of the Report

The Health and Wellbeing Board held a workshop on Monday, 23rd November, 2015 to examine a social prescribing approach in Gateshead. Work on social prescribing has been developed within the context of the Achieving More Together approach.

The report will give an update from the workshop and recommendations for next steps.

2. Background

It was agreed through the Healthier Communities OSC, 21st April 2015 that work should be undertaken to “Develop a sustainable model of social prescribing in Gateshead”. This work was agreed on the basis that the physical health and mental health outcomes of those affected by mental ill health could be improved through a social subscribing approach. At that time the OSC agreed that:

- A review of the evidence base for social prescribing should be carried out and an agreement reached on a ‘Gateshead approach’ to social prescribing.
- That a feasibility study should be completed on the implementation of a robust, sustainable social prescribing model for Gateshead.
- The Health and Wellbeing Board should consider the output from the social prescribing feasibility study.

It was evident that a number of different organisations / groups were looking at Social Prescribing in Gateshead from varying angles and viewpoints a social prescribing and a working group was developed to start meeting to discuss the scope and issues involved in Social Prescribing. Members of the working group currently include:

- Gateshead Public Health
- Newcastle /Gateshead CCG
- Representatives from Live Well Gateshead and the Community Capacity building team
- Gateshead Practice Manager representative
- VCS representative (Edberts House)
- Stephen Kirk (GP lead)

The group also visited Bromley by Bow as part of its evidence gathering to view a model being described as “best practice” at a national level to inform it’s thinking. The working group proposed the workshop to the Health and Wellbeing Board as a way of consulting with key partners and organisations to look at key themes emerging from the scoping

work conducted by the group and pose key questions to help further develop the next steps to take social prescribing forward in Gateshead..

3. Social Prescribing Workshop - Why we held the event?

The Social Prescribing Working Group have been scoping out social prescribing in Gateshead and viewed the workshop as a way of sharing progress but to also get views from key partners and organisations in Gateshead. The workshop also looked to learn from those attending who also had a breadth of experience across Gateshead and offer a genuine opportunity to further shape Gateshead's approach to Social Prescribing.

The event was very well attended with over 70 in attendance from a wide range of statutory and non-statutory organisations. There was broad support for a social prescribing approach in Gateshead and particularly for shifting the emphasis from a traditional view of health and illness to wellbeing, a holistic approach. The workshop also generated a lot of interest and commitment from a wide range of people, groups and organisations. Key feedback from the event included:

- The need for a definition for Social Prescribing in Gateshead
- The need for a strategy / framework for Social Prescribing to be developed for Gateshead
- The need to develop a guide / tool kit as part of the strategy to give guidance to groups / organisations to carry out robust evaluation and build the evidence base to show the impact of social prescribing
- The need to use / develop an online directory to support the social prescribing approach
- Social prescribing to take a holistic approach in Gateshead
- Consider a commissioning approach to social prescribing in Gateshead
- Overwhelming support from people, groups and organisations attending the workshop to invest in a social prescribing approach for Gateshead.

4. Recommendations

The Health and Wellbeing Board is asked to approve further development of the attached draft framework (please see appendix 1) for social prescribing. Recommendations are sought from the Health and Wellbeing Board to approve:

- (i) The development of underpinning principles and outcomes for the framework and all work streams that will sit within it.
- (ii) Alignment of the social prescribing framework and the Achieving More Together delivery plan.
- (iii) The development of a clear accountability framework between the Health & Wellbeing Board and work streams that make up the Social Prescribing Framework.
- (iv) Formation of a Social Prescribing Steering group to act as the link to the H&WBB –made up of representatives of relevant working groups together with strategic leaders from across the health system.
- (v) Development of a joint paper (CCG / Public Health) detailing next steps and clear project management arrangements that span both LA and CCG.
- (vi) A report to be taken to the September Health & Wellbeing Board with a draft framework for approval.

Gateshead social prescribing Framework

DRAFT OUTLINE

1. Introduction

This paper proposes a framework to develop and deliver a whole system approach to social prescribing in Gateshead. Nationally Social Prescribing has been defined as a means to *“enable(s) patients with social, emotional or practical needs to access a range of non-clinical activities and services to improve their health and wellbeing.”*

The report of the first annual Social Prescribing Network Conference in January 2016 identified that social prescribing can alleviate some of these pressures currently being experienced by the healthcare system “by addressing unmet needs of patients, whose needs are not currently met by the NHS. It can also alleviate pressure on GPs and other healthcare professionals, general practices and the health service more widely, all of whom are struggling to survive difficult times. Social prescribing goes further than that. By facilitating the patients’ access to a whole range of voluntary and local services, including becoming volunteers themselves, there is much potential to nurture local social capital and catalyse health-creating communities that strengthen their ability to care for themselves and each other. Social prescribing recognises that the third sector is a largely untapped asset that can deliver further integration between health and social care in the creation of a more responsive and efficient local health economy. Social prescribing can be used to empower the patient to look for solutions to social problems before a crisis occurs that might affect their physical or mental health”.

This statement of what is being experienced nationally is mirrored locally and illustrates the potential of social prescribing to support delivery of a number of pieces of work underway across Gateshead in both health, the local authority and voluntary sector and the need for a framework to link these and ensure they are not developed in isolation of each other. There is a need to take a unified approach to deliver common agendas and maximise the use of scarce resources across our health economy.

This paper:

- outlines a framework within which a cohesive approach to social prescribing in Gateshead can be developed.
- provides the context for social prescribing – both nationally and locally
- Identifies the roles that the various stakeholder need to take in developing and implementing this Framework.
- Seeks to gain agreement from senior leaders in the Gateshead Health and Social Care economy to this approach,
- Proposes a mechanism for assuring implementation of the approach and identifies a clear governance structure of accountability for delivery of this framework.

2. Context

2.1. National drivers

In 2006 the Department of Health (DOH) proposed the introduction of social prescriptions for those with long-term conditions, promoting integrated health and social care, partnered with the voluntary and community sector. The NHS Five Year

Forward View specifically details the need for NHS organisations to develop different approaches that utilises the community and builds upon community assets.

Marmot (2010) identified that to address the wider determinants of health and to tackle health inequalities required the initiation of opportunities to support the empowerment of individuals to take control of their own lives. The Marmot Review acknowledges that primary care has a crucial role in integrating services and promoting healthier communities.

Social Prescribing offers general practice a route for signposting into community groups and activity with the aim of improving patient's health and well-being. Development of a local approach to social prescribing would complement Marmot's recommendations and supports delivery of the work programme identified from the Due North Report (2014).

Report of the annual social prescribing network conference – January 2016 further supports the national case for the development of an approach to social prescribing stating “it has been estimated that around 20% of patients consult their GP for what is primarily a social problem; in fact the Low Commission reported that 15% of GP visits were for social welfare advice. For these patients, a medical approach is inappropriate and equally frustrating for both patient and GP. At the same time, GP training places remain unfilled and insufficient numbers of GPs are applying to join general practice because of a perceived impossible workload. But it is not just GPs who are affected by the current pressures in healthcare. Healthcare professionals generally work tirelessly to do their best for their patients under ever increasing workloads”.

2.2. Local Context

Social prescribing was a new concept to general practice in Gateshead only 12 months ago, however, through the implementation of the Year of Care Approach, the primary care navigator role and incentives set by the CCG for management of long term conditions, practices have very quickly embraced the concept and there is a ground swell of interest amongst the GP community to develop this as a priority across Gateshead.

Work to implement the Year of Care approach to long term conditions care is stimulating demand for social prescribing services at the same time funding available to the voluntary sector is declining. We must be mindful of increasing demands and pressures placed on the voluntary sector and the need to help support and develop its capacity - to maximise the chances of overcoming these challenges the system must work together.

Gateshead GP at scale meeting – Demonstrated an aim to ensure SP is integrated across General Practice in Gateshead through the education of staff and patients, the evaluation of current SP work and the development of IT and coding systems within practices to support referrals and evaluation.

An Overview and Scrutiny Review of mental health carried out by the local authority in 2015 highlighted the need to consider SP within Gateshead.

The Integrated Wellness Service - Live Well Gateshead - commissioned by Gateshead Council, takes an asset based approach, working with local communities to identify action to improve health and wellbeing. The model offers the potential for the basis from which a menu of services in Gateshead to support self-care could be developed. The model potentially could inform the commissioning of future self-care services and the development of a “More than Medicine” model or Social Prescribing for self-care which in turn supports delivery of the Year of Care approach to LTCs currently being implemented in General Practice.

The council has initiated a programme of work under the title “Achieving More Together” to progress this approach through a delivery plan to facilitate change. This work underpins the Change Programme led by the Chief Executive, and is co-ordinated by the Director of Public Health. The delivery plan is emerging and includes a number of interlinking elements that are designed to support culture shift, behavioural and service change over the life of the Council Plan. Specific work streams are in place to look at how the asset based approach can support business change in relation to the adult social care service redesign and the approach to delivering environmental services. This approach values the capacity, skills, knowledge, connections and potential across the whole community and partners, with a changing role for the Council. This is sometimes described as an “asset-based” approach”. Assets can be social, financial, physical, environmental, or human resources (skills and time).

2.3. Gateshead H&WBB Workshop

The Health and Wellbeing Board held a workshop on Monday, 23rd November, 2015 to examine a social prescribing approach in Gateshead. The objectives were:

- to bring together interested parties to share ideas and information
- to learn more about social prescribing (including national and local drivers)
- to hear about the evidence base to hear from a national and a local example of SP
- to explore the potential of SP for improving health and social care outcomes in the Gateshead population
- to consider how to progress the social prescribing agenda in Gateshead
- to agree key outcome measures
- to consider next steps

Delegates were asked to consider the following key questions:

- What does the term social prescribing mean to you?
- How do we define social prescribing in Gateshead? Do we need to define what Social prescribing is for Gateshead?
- What role do you think social prescribing has in Gateshead?
- Is social prescribing an approach we want to invest in?
- What are the opportunities, barriers and risks to developing a social prescribing model for Gateshead?
- What should social prescribing focus on in Gateshead? Should it have a specific focus or be more holistic? (e.g. target population i.e. age range, health diagnosis, geographical area).
- What outcomes should we be measuring?
- How can we resource and fund social prescribing in Gateshead if it seen as an approach to invest in? What opportunities already exist?
- How do we take social prescribing forward in Gateshead building on evidence of what works?

There was broad support for a social prescribing approach in Gateshead and particularly for shifting the emphasis from a traditional view of health and illness to wellbeing, a holistic approach. Key feedback from the event included:

- The need for a definition for Social Prescribing in Gateshead
- The need for a strategy / framework for Social Prescribing to be developed for Gateshead

- The need to develop a guide / tool kit as part of the strategy to give guidance to groups / organisations to carry out robust evaluation and build the evidence base to show the impact of social prescribing
- The need to use / develop an online directory to support the social prescribing approach
- Social prescribing to take a holistic approach in Gateshead
- Consider a commissioning approach to social prescribing in Gateshead
- Overwhelming support from people, groups and organisations to invest in a social prescribing approach for Gateshead.

3. Scope of Social Prescribing in Gateshead

It is proposed that the social prescribing work in Gateshead initially focuses upon adults (i.e. 19 years and older) who fall into one or more of the categories identified below:

- A person with multiple LTCs
- Is at risk of social isolation
- Has been identified as having mental health needs

This work would include an approach to looking at service delivery for families where appropriate. Once the framework is embedded in practice it is proposed that a second phase of implementation would look to expand to incorporate provision for children and young people specific services.

4. Development of outcomes

This is an area where further stakeholder engagement needs to inform the outcomes we want to deliver via social prescribing and how these will be measured. Outcomes need to be identified at different levels :

- For individuals (i.e. the difference for the recipients of social prescribing e.g. patients feel better informed and more confident to manage their conditions; patients feel more engaged in their communities)
- For referrers into the model (i.e. General practice e.g. more effective use of their resources)
- Groups and community organisations (i.e. those delivering the activities such as the community and voluntary sector)
- Strategic outcomes for partner organisations – CCG, LA, NHS England (i.e. the difference to the health system)

It will be important to ensure outcomes are aligned across the health economy and the strategic aims of the Health and Wellbeing Board.

5. Principles for developing social prescribing across Gateshead.

In order to ensure a consistent approach to the development and implementation of social prescribing across Gateshead it will be important to collectively agree a set of principles that will underpin it, and which everyone involved across the system agrees to sign up.

Principles should aim to identify and build on the elements of social prescribing that already exist within Gateshead and ensure these are jointed up in a cohesive way to

form a clear pathway for social prescribing. This may involve elements of new commissioning but will build on existing assets, avoid duplication and take innovative approaches to identify alternative models of funding for social prescribing activities.

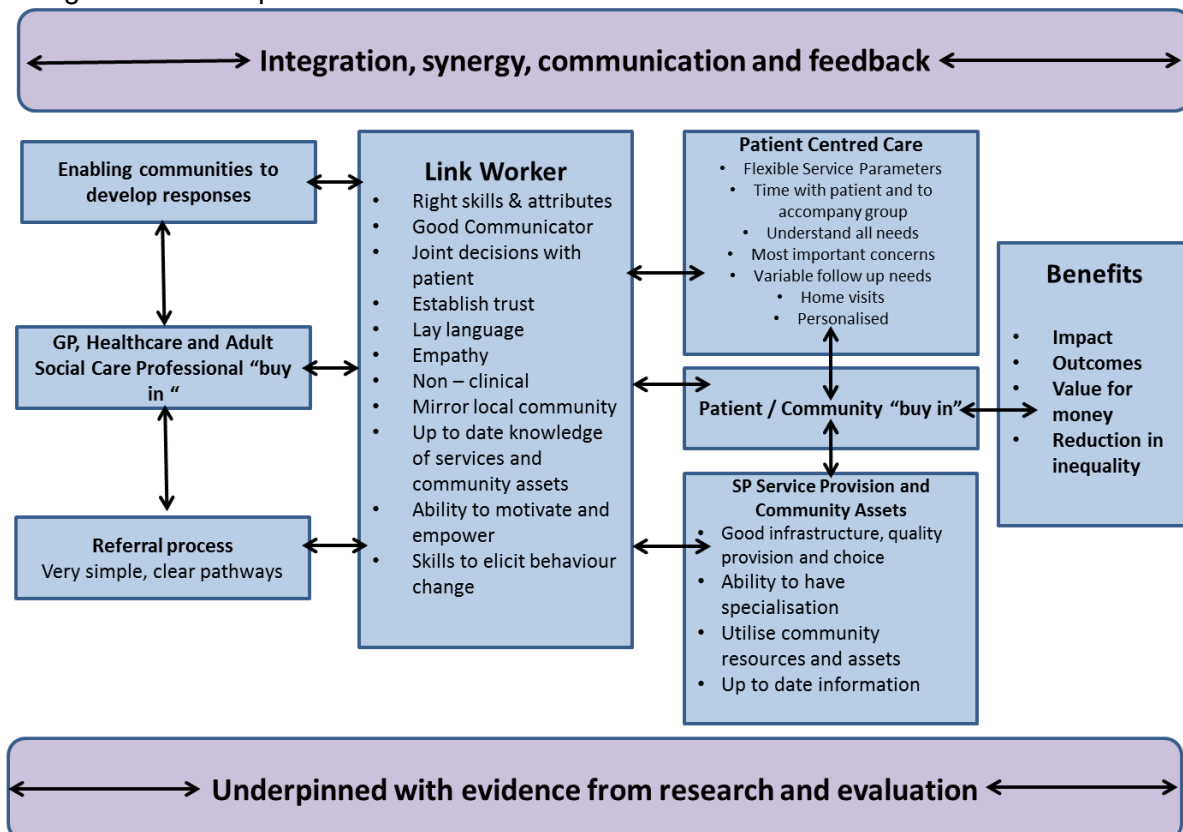
A suggested list of principles has been developed below from what people identified as important at the Social Prescribing Workshop held in November 2015:

- Take an effective collaborative approach that tackles the underlying causes of inequalities and poor health;
- results in increased understanding for individuals and communities, helping them to access and engage actively in self-help;
- Clinicians and others are able to offer a 'more than medical' approach to addressing individuals health and wellbeing needs;
- Take an approach that recognizes and unlocks existing assets within our communities e.g. volunteers, community based activities etc
- Take collective responsibility across the Gateshead Health System to work within identified budget envelopes and maximize use of available resources
- Support and develop opportunities for non-statutory partners to access investment for social prescribing activities within Gateshead.

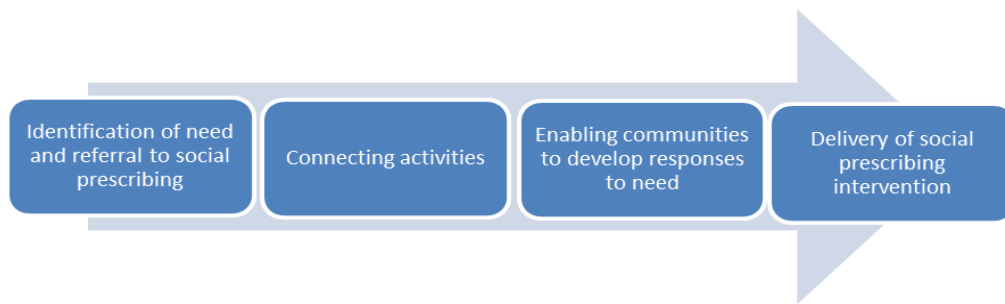
6. Proposed Framework for social prescribing in Gateshead

The table below is taken from the Report of the first annual Social Prescribing Network Conference in January 2016 and identifies what the network sees as the “key ingredients of social prescribing”. These fit well to those elements that have been identified by the local Social Prescribing Working Group in Gateshead and could be adapted to form an over-arching framework for the delivery of Social Prescribing locally and be used to inform the working groups necessary to ensure delivery of the approach.

Diagrammatical representation of framework



The simple pathway for Social Prescribing within the framework can be summarised as



Key questions that need to be answered to fully implement the framework are detailed below:

Questions to address in framework	Referral to social prescribing	Connecting activities	Delivery of intervention
What is already happening now?	<ul style="list-style-type: none"> General practices participating in the Year of Care Approach – stimulating demand for social prescribing Achieving More Together work stream within Adult Social supporting people to improve their health and wellbeing through learning conversations Referrals being made in ad-hoc way to social prescribing activities/interventions 	<ul style="list-style-type: none"> Live well Gateshead Hub – assessment of patient's needs Live well Gateshead – signposting to relevant local services to meet identified needs Health care Navigators – assessment of patient's needs (only in some practices) Health care navigators – supporting patients to access relevant services (only in some practices) Navigator Role within the new Adult Social Care Model Live Well Gateshead wellness coaches – supporting patients to access activities 	<ul style="list-style-type: none"> Existing services commissioned or funded by CCG or LA that meet a social prescribing need Voluntary sector services that already exist in local communities (already funded via other routes) Live Well Gateshead wellness coaches delivering activities to groups or individuals Mapping of current social prescribing activities available to Gateshead Population (by Social Services)
What are the gaps in the pathway we need to address?	<ul style="list-style-type: none"> Working with General practice to develop their understanding of Social Prescribing Development of 	<ul style="list-style-type: none"> Health Care Navigator role in General practice – to be developed 	<ul style="list-style-type: none"> Identification of gaps in social prescribing activities available

	General Practice IT systems to enable “social prescriptions” to be made <ul style="list-style-type: none"> • Access to a “menu of services” that enables the public and general practice staff to identify activities that fulfil social prescribing needs • Supporting communities to develop responses to local need 	across Gateshead <ul style="list-style-type: none"> • Mapping of other Health Care Navigators roles across Gateshead to understand how various roles fit into the social prescribing framework and to avoid duplication 	<ul style="list-style-type: none"> • Development of systematic way to identify gaps in social prescribing activities on an ongoing basis • Development of funding strategy for third sector in Gateshead
Which agencies are involved/need to be involved?	<ul style="list-style-type: none"> • N&GCCG • Primary Care Transformation Team (CBC) • Gateshead Council 	<ul style="list-style-type: none"> • Local Authority • CCG • Voluntary sector • General Practice • Primary Care Transformation Team 	<ul style="list-style-type: none"> • Local Authority • CCG • Voluntary sector groups • Local businesses and chamber of commerce (identify future funding models for Vol Sector)
Enablers	Underpinning principles		
	Identification of outcomes – patient level/system level		
	Stakeholder engagement		
	Funding strategy		
	Appropriate Quality Assurance		

7. Implementation of Framework

7.1. Issues to consider

In developing the framework locally there are a number of issues to be considered:

- the sustainability of funding
- generating demand through pilots that could not be sustained
- accessing up-to-date information about local services
- ascertaining the quality of services.

Practical challenges in implementing social prescribing include:

- agreeing referral routes and criteria;
- voluntary sector capacity;
- maintaining up-to-date information on sources of voluntary and community support;
- recording and evaluating impact and outcomes;
- increased GP workload (initially); and
- identifying resources for link worker/referrals facilitator.

7.2. Work streams

In order to assure delivery of the framework it is proposed that a time limited social prescribing steering group is established – which will be accountable to the Health and Wellbeing Board and will be made up of relevant strategic leaders from across the Gateshead Health Economy together with representatives of working groups that will sit beneath it. The working groups will be broadly based on “the key ingredients of social prescribing”. In some instances it is anticipated that these will be already established groups whose work aligns with to the delivery of the social prescribing framework, however in other instances it may require the formation of task and finish groups. Anticipated areas of work are:

- Development of GP/Healthcare Professional understanding of social prescribing and establishing their “buy-in” – already commenced via the Primary Care Transformation Team and Year of Care Operational Group
- Development of Access to information on social prescribing activities for Gateshead residents – to align to the development of the “Our Gateshead Website
- Development of referral process and pathways
- Development of the link worker role aligned to social prescribing
- Development of Patient Centred Care – part of the Year of Care Work led by the CCG
- Social Prescribing Service Provision
- Development of enabling community to develop responses for Social Prescribing

Each work stream will be expected to develop a work programme that will report into the Social Prescribing Steering group which will be supported by appropriate project management resource. Further work is required with the Gateshead Health Economy to map whether these are pieces of work already underway, or new aspects of work that require establishment of task and finish groups.

7.3. Next steps towards Implementation of the framework

To progress implementation of the social prescribing framework in Gateshead the following elements need to be in place:

- The Development of underpinning principles and outcomes for the framework and all work streams that will sit within it.
- The development of a clear accountability framework between the Health & Wellbeing Board and work streams that make up the Social Prescribing Framework
- Formation of a Social Prescribing Steering group to act as the link to the H&WBB – made up of representatives of relevant working groups together with strategic leaders from across the health system
- Clear project management arrangements that span both LA and CCG
- Clarification of how the social prescribing framework links to other strategic work streams already underway across Gateshead e.g. Achieving More Together; the Year of Care Project; Care Homes Vanguard, Primary Care Strategy – workforce development; Connected Communities Connected People.