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East Midlands Social Prescribing Scoping Project

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Aims of the Session

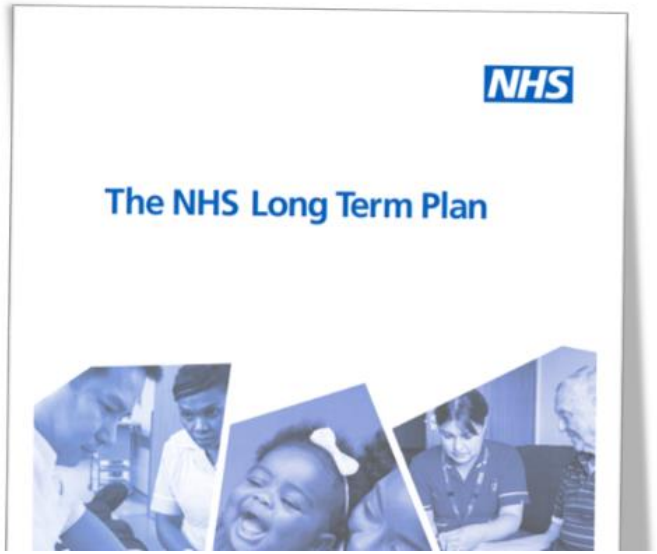
- Introduce the East Midlands Scoping Project
- Pilot Scoping Tool
- Collect Data
- Gather your Feedback

The Scoping Project

- **Background**
- Social prescribing enables healthcare professionals and other agencies to refer people to a range of community and third sector, non-clinical services
  - Despite a lack of controlled trials the **evidence base is growing**
  - Our own research 5-mnth SP pilot in 3 GP practices in South Wales = **£500 saving per annum for frequent attenders**, in reduced prescriptions and GP appointments (Jones & Lynch, 2018)
  - Further evaluations and reviews have found
    - 24% reduction in A&E attendance
    - 28% reduction in demand for GP services (Kimberlee et al, 2013)
    - 55% drop in secondary care referrals at 12 months (Brandling et al., 2011)
    - Improved mental wellbeing outcomes
    - Higher rates of employment
    - mean social return on investment of £2.3 per £1 invested in the first year (Polly & Pilkington, 2017)

Political Context

- Social Prescribing is in the long term plan
- Social Prescribing is a priority for Matt Hancock the Health & Social Secretary
- NHS England are planning recruit and train 1000 link workers by 2021 and more incrementally over the next 5 years
- These will be managed through the newly formed Primary Care Networks
- NHS England has produced guidance & Common Outcomes Framework



Which Social Prescribing Models?

- There are a **range of social prescribing models**:
  - Active signposting
  - Care Navigator
  - Link Worker
  - Voluntary vs Paid
- A recent systematic review detailing social prescribing schemes for diabetes treatment identified a variety of models (Pilkinton et al, 2017)
- To be effective, patients need to be **"transferred"** from the primary care setting into the community and to **maintain their participation** in activities
- The potential impacts of social prescribing can vary according to **pathway** and between **different groups** of patients with **different conditions**
- What works for whom in what contexts?

The East Midlands Scoping Project

- There isn't a clear picture of what is happening across the East Midlands in relation to social prescribing
- UoL has been commissioned to develop a scoping tool to identify the breadth & variety of models of social prescribing in the East Midlands
- This will allow the:
  - Sharing of best practice
  - Benchmarking of organisations/regions
  - Allow the reduction of duplication of effort
  - Create economies of scale through the sharing of resources
  - Create opportunities for collaborative working and commissioning

Project

- **Stage 1: Development of the Social Prescribing Review Protocol:**
  - a) Interviews with key stakeholders
  - b) Rapid review of evidence, policy documents & guidance
- **Stage 2: Piloting Protocol and Gathering the Data on Social Prescribing Models in the East Midlands**:
  - a) Piloting and co-producing questions
  - b) gathering survey data from across the region
- **Stage 3: Refinement of tool**:
  - a) Analyzing findings
  - b) refinement of tool
  - c) Summary for each county
  - d) Final report

Scoping Tool Pilot

- Please can you fill in the paper copies on your table
- Some of the questions may not be relevant for you – please mark these as N/A and move to the next relevant question
- This should take more more than 20 minutes
- Please try and answer all the relevant questions
- Feel free to make notes comments on the paper copies

- https://www.surveymonkey.co.uk/r/EMAHSNsocialprescribing

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Feedback

- On your tables can you feedback

Comprehension

- Are the questions relevant/appropriate?
- Are the questions easy to understand?

Content

- Are the any topics/questions that need to be included?
- Are there any topics/questions that are not relevant?

Usefulness

How would you use the results?

Further Research

Understanding the experiences, training, and support needs of Link Workers: An exploratory study examining indirect traumatisation in social prescribers

- People working with individuals who have experienced emotional/physical trauma are especially likely to develop indirect trauma, which can lead to workers experiencing problems normally associated with post-traumatic stress disorder symptomology.

- Research has shown that this is especially problematic in workers who have not received the training necessary to work with people who have experienced trauma, and do not have the support needed to protect against developing indirect trauma and knowing how to handle it when indirect trauma does occur.

- **Study Aims**

- This study will explore Link Workers/social prescribers experiences of indirect trauma, in order to increase understanding around how best to support people working in this role by:
    - Increase understanding of Link Workers experiences of indirect trauma
    - Explore what additional support Link Workers feel would help to protect them against occurrences of indirect trauma, and ways for them to handle occurrences of indirect trauma when they do occur
    - Understand what the organisational responses and strategies to reduce indirect trauma are

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