SHROPSHIRE HEALTH AND WELLBEING BOARD
Report

Meeting Date	**18/01/24**					
Title of report	**Adult Social Prescribing Update**					
This report is for (You will have been advised which applies)	Discussion and agreement of recommendations	√	Approval of recommendations (With discussion by exception)		Information only (No recommendations)	
Reporting Officer & email	Claire Sweeney claire.sweeney@shropshire.gov.uk					
Which Joint Health & Wellbeing Strategy priorities does this report address? Please tick all that apply	Children & Young People		Joined up working	√		
	Mental Health	√	Improving Population Health	√		
	Healthy Weight & Physical Activity	√	Working with and building strong and vibrant communities	√		
	Workforce	√	Reduce inequalities (see below)	√		
What inequalities does this report address?	Wider determinants of health, health behaviours and lifestyles, integrated health and care system, places and communities					

Report content - Please expand content under these headings or attach your report ensuring the three headings are included.

1. Executive Summary

1.1. Social Prescribing is an important programme in our system that supports people to take control of their health and wellbeing and improve their chances of preventing ill health. The Shropshire model described in this report is an integrated programme and a collaboration between Primary Care Networks, Public Health and the Voluntary & Community Sector (VCSE). Within the Health Wellbeing and Prevention directorate, the Healthy Lives Team delivers the service. The Voluntary and Community Sector deliver the Community Development element of the service, and some of the link worker time. The programme benefits a range of referral and delivery partners including Primary Care, Social Care, Job Centre Plus, the VCSE, Libraries, Sports and Leisure, self-referral and more.

1.2. This report provides an update on the offer and its development in Shropshire. It describes the programme and recent progress on the Adult Social Prescribing programme. Referral data can be found in Appendix A, Outcome data in Appendix B, a summary of comments from clients in Appendix C and a case study on Shrewsbury pain support group in Appendix D

1.3. This report also provides an update on:

1.3.1. Demand management work focussing on reducing risk of falls, cardiovascular disease and supporting adult social care.

1.3.2. New Simple Activation Question to demonstrate the increase in people being able to take action to improve their own wellbeing and in turn reducing healthcare utilisation.

1.3.3. The Winter Support Service which is mobilised across Shropshire to support winter pressures across the system.

1.4. The Social Prescribing programme is achieving fantastic results and can demonstrate significant improvement in outcomes for people who take part (details in Appendix B below). We believe that the success of the programme is in large part due to the integrated approach we have taken with Primary Care, the Voluntary and Community Sector, Public Health and many other partners.

2. Recommendations

2.1 Note, provide feedback to and endorse the progress and improved outcomes for Shropshire people.
2.2 Note and provide feedback to the development areas, particularly working to reduce risk of falls and cardiovascular disease and discuss how system partners can support this work.

3. Report

3.1 Background

Adults Social Prescribing Programme
Social prescribing is a programme of listening and working with people, often referring people to support in their community that empowers them to take control of their health and wellbeing. Through non-medical 'link workers', (known locally as Healthy Lives Advisors), who give time, focus on 'what matters to me' and take a holistic approach, motivational interviewing and behaviour change techniques, a person is supported to connect to community groups, activity of interest, and, where required statutory services for practical and emotional support.

3.2 Social prescribing in its broadest sense has been happening in our communities for many years. Our vibrant voluntary and community sector working with public services support people in communities with non-clinical approaches with great success. In recent years the NHS and Local Authorities have been keen to recognise this work and encourage its development. By formalising social prescribing across services there will be a better offer of community support for people, as well as increased understanding and recognition of the work of our community and voluntary sector partners.

3.3 In Shropshire, Public Health, the Voluntary and Community Sector and Primary Care have been working collaboratively for over 7 years to develop and roll out a model that supports people in the community where they live. This model is preventative in its approach; it supports people with their emotional wellbeing as well as physical health and social issues and supports them to have the confidence and motivation to take positive lifestyle decisions. The model started in 3 practices in Oswestry and was soon joined by 8 additional practices; in 2020-21 the programme was rolled out across all Shropshire PCNs and GP practices.

3.4 Additionally, the system has invested in 'Winter Pressure Link Workers' who are employed by a range of providers including Shropshire Council, Age UK and Shropshire Mental Health Support Service. These Link Workers work through the winter months, primarily with those who are vulnerable (including the those discharged from hospital), offering help at home, befriending, shopping and a variety of other support offers to keep people well this winter.

3.5 Shropshire Council is also investing further in Social Prescribing to support our transformation programmes and our Demand Management work to reduce preventable demand on social care provision. The size of the team also means that Shropshire Council has invested in Team Leaders to ensure the fidelity of the programme and high-quality service delivery.

4. Data

4.1 A robust data set has always been collected and monitored as part of the programme. This has included referral (referral data from across the PCNs can be found in Appendix A), and outcomes data including Measure Yourself Concerns and Wellbeing (MYCAW), Office of National Statistics (ONS) wellbeing scale used for all people/ patients, and a loneliness scaling tool. These tools give before and after measures to show outcome data across the programme. This can easily be extracted and illustrated on Power Bi.

4.2 An activation measure has been introduced following connections made with the National Association of Primary Care (NAPC) through the recent system CARE programme. The introduction of the system wide measure has been endorsed by the ICB System Quality Board and has been trialled and developed by NAPC. Activation is the measure of a person's knowledge skills and confidence in managing their own health and wellbeing. People not able to manage their own health and wellbeing see their GP 10 more times a year – a 40% difference, but when people's knowledge skills and confidence improve, physical health improves, and GP contacts fall. This is one simple question that can be tailored to the individual to ask, "How would you rate your ability to manage your own health and wellbeing". Respondents assess their own level on a scale of 1 to 4 at the beginning and at the end of the programme. We will soon be able to

demonstrate outcomes in changes in Activation. The measure has been developed from the original 13 questions Patient Activation Measure

4.3 Data across Shropshire found that:
Across all practices **79% reported an improvement** in their Concern 1, with **63% voicing an improvement in their wellbeing**. Improvements for individuals across all 4 sections of the Office of National Statistics wellbeing scale.

Reasons for referral in order of most common are:

- Lifestyle risk factors (including smoking, weight and physical activity)
- Mental health
- Lonely or isolated
- Long term health conditions

Referrers include:

- GP practice
- Schools
- Self-referral
- Adult social care
- Job centres
- Mental health social work team
- Enable

4.4 Additionally, Appendix C provides a summary of comments made by clients after their follow up appointments.

5.0 Summary of key information:

- Shropshire Social Prescribing is an integrated service with the voluntary and community sector, Primary Care, Local Authority and partners.
- There have been over **9762 referrals to date**.
- **Increase in referrals of 73%** compared to 2021-22
- The service is up and running in all GP practices in the Shropshire Council area which are part of the Shropshire PCNs.
- The service is preventative in nature, and it works to improve wellbeing in order to prevent further issues
- The community development element is delivered by our VCSE colleagues, Qube and Community Resource.
- The Mayfair Centre in Church Stretton deliver social prescribing advising for the Church Stretton Practice.
- Outcome measures demonstrate improved health and wellbeing of those who participate in the programme.
- Additional to this model, the Winter Support Service is mobilised across Shropshire to support winter pressures across the system.

6.0 Development

6.1 All over age 65 asked about risk of falls and are having personalised discussion about the fall's prevention pathways, with ongoing partnership with Energize Elevate, Shropshire Community Health Trust Falls therapy and Shropshire Community Resource Functional Fitness MOTs.

6.2 Plan to roll out in 2024 opportunistic blood pressure check, where appropriate, to assist in finding undetected hypertension, following GP practice protocols alongside lifestyle support.

6.3 Dedicated member of the team liaising with Adult Social care teams to look at waiting lists, capacity and demand, and identifying where social prescribing would be an option to prevent issues escalating to a higher level of need.

6.4 Building on pain management support following the successful pain management support group in Shrewsbury (see Appendix D). Working with MPFT and MSK transformation lead to bring together training offers and wider support across the county.

6.5 Social Prescribing is working as part of the RESET multidisciplinary team project supporting those at risk of rough sleeping and substance misuse, this includes specific support for armed forces veterans.

6.6 Referral pathway to stop smoking support for those discharged from Redwoods Hospital and SaTH.

6.7 Work in development to increase the offer for stop smoking support.

7.0 Recognition in national publications or websites:

- Delivered national webinar on creative health and social prescribing delivered by Naomi Roche
- Delivered on national Children and Young People's webinar delivered by Naomi Roche and Claire Sweeney
- Delivered on webinar for schools on our Social Prescribing for Children and Young People delivered by Naomi Roche and Claire Sweeney
- Delivered session to national personal health and social education (PHSE) group delivered by Claire Sweeney and Sharon Cochrane
- Highly commended in Local Government Chronicles Award 2023
- https://www.kingsfund.org.uk/publications/social-prescribing
- LGA Website – presentation by Jo Robins and Lee Chapman
- National Healthwatch website – report by Healthwatch Shropshire

Risk assessment and opportunities appraisal (NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)	As a health and care system we work to reduce inequalities in Shropshire. All decisions and discussions must consider reducing inequalities. Covid 19 has shone a light on inequalities and requires all of our services to further risk assess individual risk and to support the population who are at increased risk of ill health. All of our programmes abide by equalities act 2010	
Financial implications (Any financial implications of note)	There are no financial implications at this time	
Climate Change Appraisal as applicable		
Where else has the paper been presented?	System Partnership Boards	
	Voluntary Sector	
	Other	

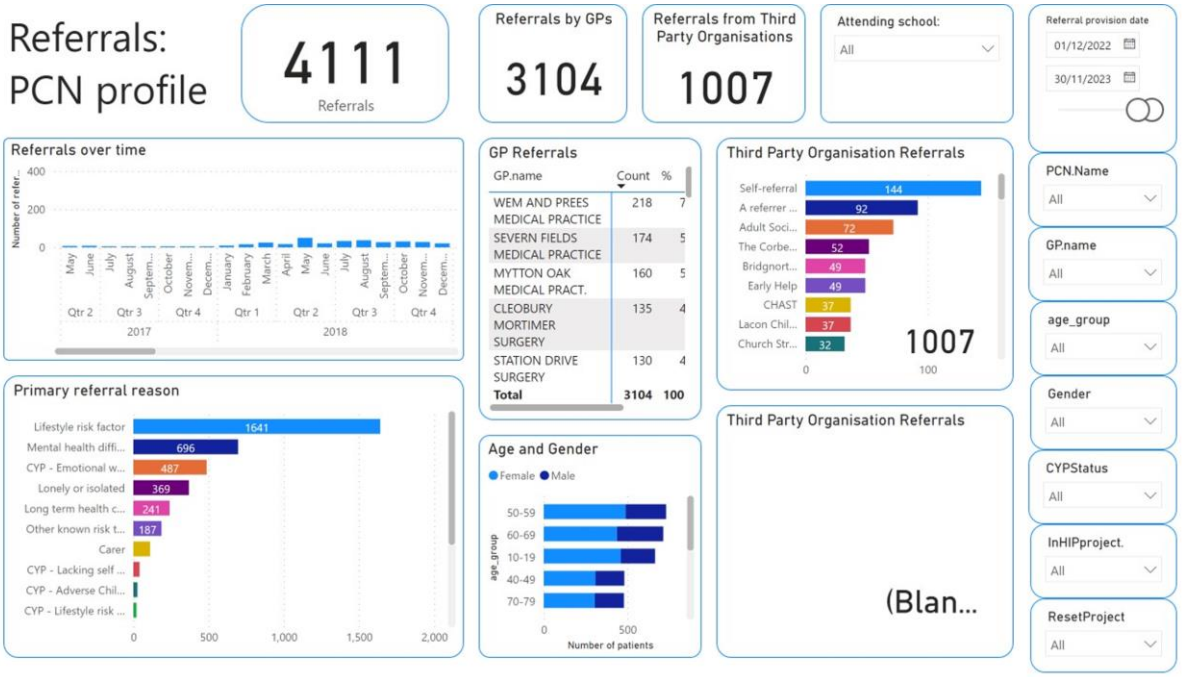
List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Cabinet Member (Portfolio Holder) Portfolio holders can be found here **or your organisational lead e.g., Exec lead or Non-Exec/Clinical Lead**
Cllr Cecilia Motley – Portfolio Holder for Adult Social Care, Public Health & Communities

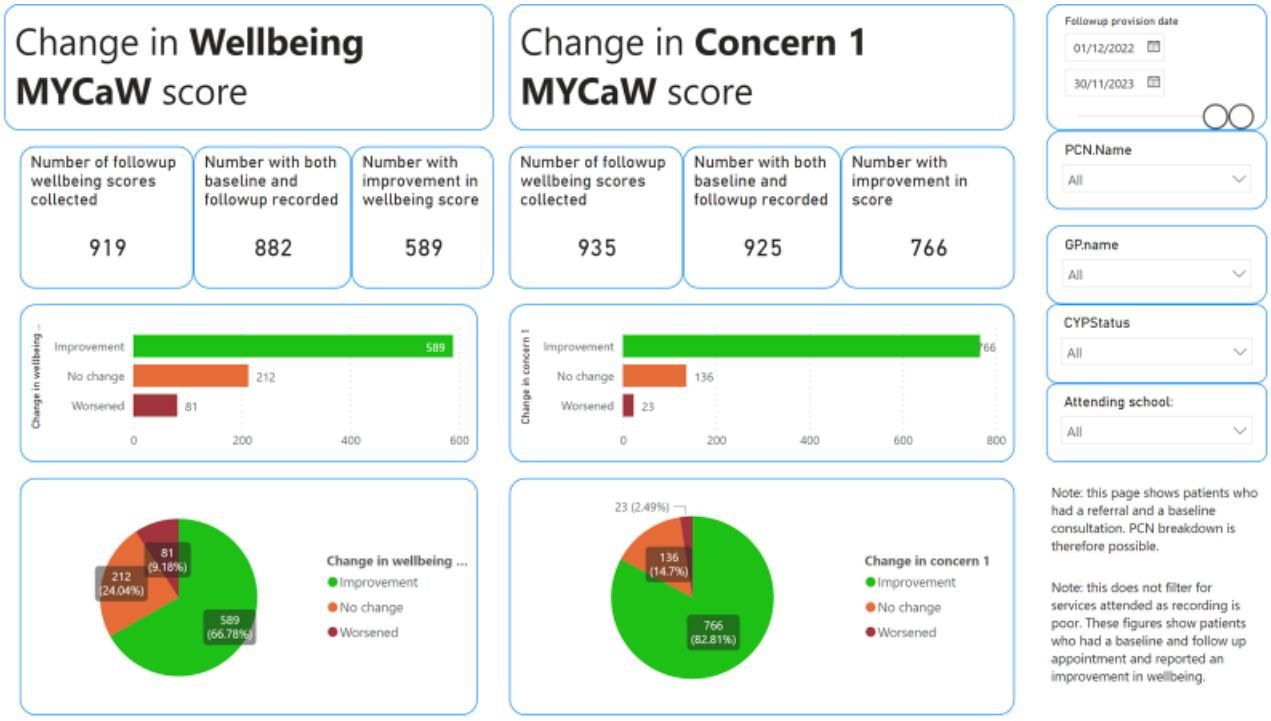
Appendices
Appendix A: Social Prescribing Referral data
Appendix B: Outcome data

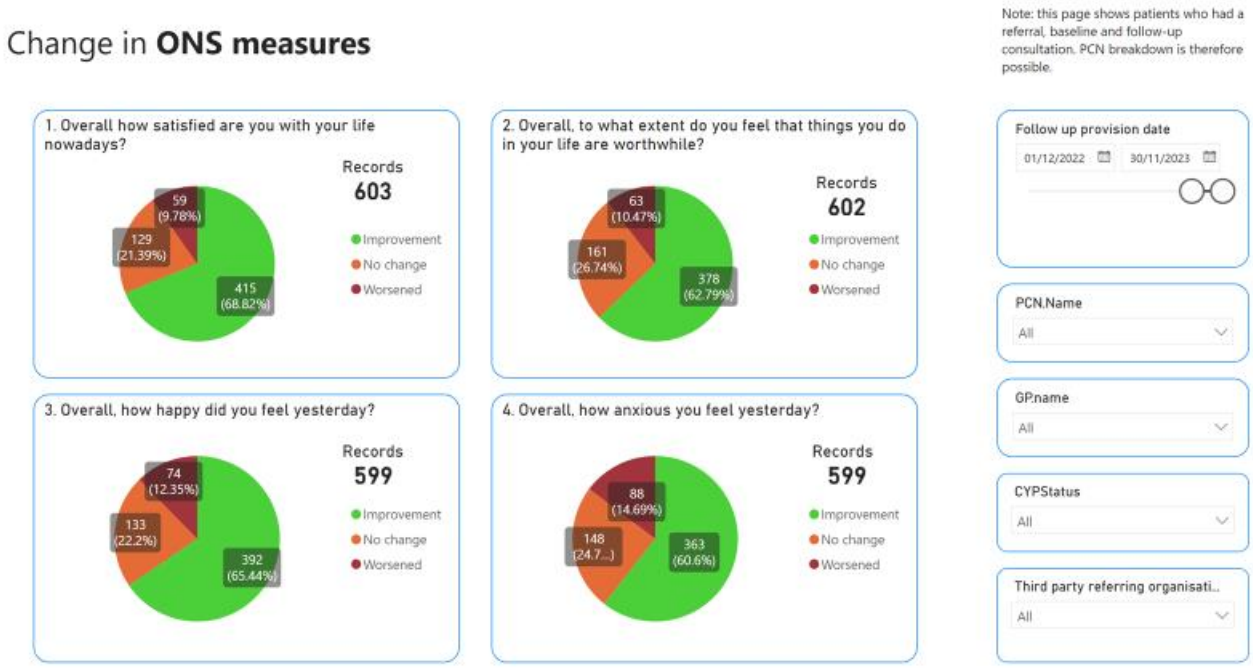
Appendix C: Satisfaction statements
Appendix D: Case study report of Shrewsbury Pain Support Group
(PDF attached separately)

Appendix A Referral Data



Appendix B Outcome Data





Appendix C Satisfaction Survey Comments

I did not leave the house before receiving support from Tina. However, since speaking to Tina she has given me hope and I now enjoy my life and go out to various places. I was an alcoholic and since working with Tina and having been referred to We are With You, I have not had a drink for 10 months. Tina has been wonderful and brilliant, I will miss her support as she has done an amazing job.

Enjoyed it, found it beneficial, helped me through a difficult time, and it has been really good to talk to Hannah and everyone she connected me with

A friendly face was in this age a treat and a pleasure. The consultation times allowed me to focus on my eating habits and face some of my problems. I was able to get my work pension, get voluntary work and was guided in getting support. I applied for a job.

Katie was always helpful and full of really useful advice. She let me set my own parameters and with her encouragement, I achieved my target. Very friendly and relaxed style.

I found the consultations very helpful. Isobel listened to me, offered a range of practical suggestions/services and followed up. Isobel appeared very knowledgeable not just of available services but also had insight into my family situation illness. Really helped me overcome my anxiety and loss of confidence and has made me a lot happier.

I am now attending the gym regularly which helps me to feel better in myself.

Appendix D Shrewsbury Pain Support Group

(PDF attached separately)