

# **Health and Adult Social Care Overview and Scrutiny Committee**

**20 August 2024**

## **Social Prescribing**

Report from: Prof. David Whiting, Director of Public Health

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### **Summary**

Social prescribing is a way for local agencies to refer people to a social prescriber, also known as a link worker. Link workers give people time, focusing on ‘what matters to me’ and taking a holistic approach to people’s health and wellbeing. They connect people to community groups and statutory services for practical and emotional support. In 2022, Medway and Swale Health and Care Partnership refreshed the five year plan following a significant investment from NHS England and the impact of the pandemic. This report provides an update on the progress on the Medway and Swale Social Prescribing Plan 2022-2027.

### **1. Recommendations**

1.1 The Committee is asked to note this update report.

### **2. Budget and policy framework**

2.1 Social prescribing (SP) has been identified as a priority area for the Medway and Swale Health and Care Partnership (HCP). The HCP Local Care Steering Group (which has since been retitled) had the responsibility for the development of a five year plan to realise the potential of social prescribing. A successful social prescribing system relies on meaningful input and engagement from the NHS, Local Authority and Community Voluntary Sector.

2.2 The Public Health team play a lead role in the strategic co-ordination of the Medway and Swale Social Prescribing Plan 2022-2027.

### **3. Background**

3.1 Social Prescribing enables frontline healthcare professionals to refer patients to a link worker. A link worker will meet with a resident in person to have a conversation whereby they can learn about the possibilities and design their own personalised solutions to challenges or situations they are facing. This is

so people with social, emotional or practical needs are empowered to find solutions which will improve their health and wellbeing, often using services provided by the voluntary, community and social enterprise (VCSE) sector.

- 3.2 Medway and Swale Health and Care Partnership developed a five year plan, which was refreshed in 2022, to realise the potential social prescribing can bring to residents and the system. The plan documents the range of agencies that employ link workers, the priority groups for each social prescribing service and the outcomes the social prescribing system looks to achieve.
- 3.3 A successful social prescribing system can be transformative for the local health and social care economy by saving money as well as transforming people's lives. The current social prescription services target and prioritise populations that experience large health inequalities and have some of the poorest health outcomes.
- 3.4 Social prescribing link workers in Medway and Swale are mainly based within primary care. These assisted roles routinely support patients who regularly attend their practice and other NHS settings due to their more complex health status. Social prescribing is an excellent vehicle to better understand what matters to that patient and how their health and wellbeing needs can be better met than just through NHS services. Link workers are trained to work with people with multiple health conditions and are aware of the wider social determinants of health that may be affecting an individual's current circumstances.

#### 4. Five year plan aspirations

4.1 The following targets were set at the outset of the 5 year plan:

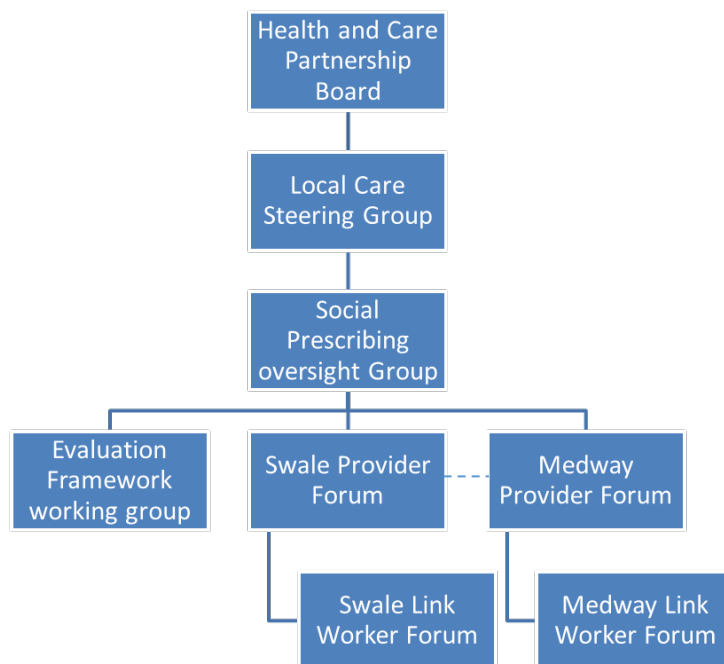
- 40,000 people to access a social prescribing service by 2027
- 20,000 people improving their health and wellbeing level through a social prescribing service
- 15,000 Voluntary and Community Sector activities accessed by clients
- 1,000 additional Voluntary and Community Sector activities supporting people to improve their health and wellbeing
- All social prescribing services achieve an average of 90% on The Friends and Family Test
- All social prescribing providers and link workers engaging in the provider and link worker forum/community
- The establishment and roll out of a set of standards and a competency framework for all link worker staff and organisations delivering a social prescribing service

4.2 Headline progress to date:

- 16,348 people accessing a social prescribing service
- 8,061 people improving their health and wellbeing level through a social prescribing service

- 10,342 Voluntary and Community Sector (VCS) activities accessed by clients
- The Medway Link Worker forum meets twice a year, bitesize training sessions are delivered on topics to support their development and service delivery, and an annual Medway SP networking event takes place bringing together partners from across statutory services and the VCS. All are well attended. The Leader's Consortium meet three times per year, all providers attend.
- After development of this plan NHS England released a [Competency Framework](#) that sets out the core competencies that all link workers within the NHS need in order to deliver their role. In addition, Kent and Medway have developed a Social Prescribing and Community Navigation Strategy, looking at a broader scope of social prescribing and additional roles such as care navigation. Within the strategy it is recognised the NHS Competency Framework may not be achievable for some providers across Kent and Medway. Therefore, an action has been agreed that a working group will be set up to decide on a common minimum set of competencies a link worker/navigator will be expected to meet.

4.3 Social Prescribing Governance (Medway and Swale) and overview of each group:



<b>Group name</b>	<b>Responsibilities</b>	<b>Organisations</b>	<b>Meeting schedule</b>
Local Care Steering Group	-Hold system accountable for SP -Ensure sufficient funding in place -Flag SP strategic risks to exec board	-Health service -Social Care -VCS -Primary Care	Monthly
Social Prescribing Working Group	-Ensure 5 year plan is delivered	-Commissioners -Public Health -Clinical Directors -VCS -PHM -Primary Care Networks	Quarterly
Provider Forums	-Sharing SP system challenges -Ensure consistent outcome measures are reported	-Commissioners -Public Health -SP Providers -Primary Care Networks	Tri-annual
Link Worker Forums	-Peer support -Sharing best practise -Feedback on system risk and dependencies -Receive SP system level updates	-Front line link workers -Public Health	Monthly
Evaluation sub-group	-Agree a consistent measure of wellbeing is recorded and reported -Develop a health economics model to evidence the financial impact of SP	-Public Health -Commissioners -SP Providers -OHID -NHSE	Task and finish

## 5. Social Prescribing providers in Medway

5.1 The following organisations employ workers and provide a social prescribing service. The primary target audience they support is listed alongside the number of link workers they employ.

Provider	Link workers (FTE)	Priority group
IMAGO Medway Wellbeing Navigation Service	11	Regular attenders of primary care and A&E
Medway Adult Social Care	1	Medway residents accessing Adult Social Care

Provider	Link workers (FTE)	Priority group
MCH Community Child Health team	1	0-16 year olds with additional needs accessing the Community Child Health Team
wHoo Cares CIC	2	Residents on the Peninsula
Live Well Kent and Medway	9	17yr and over with mental health needs that can be supported in the community
Gillingham South PCN - IMAGO	4	Primary Care referrals – Children and Adults
Medway Central PCN	1	Primary Care referrals
Medway Peninsula PCN – Involve Kent	2	Primary Care referrals
Medway South PCN – IMAGO & Carers First	3	Primary Care referrals
Medway Rainham PCN	2	Primary Care referrals
Medway Practices Alliance PCN - IMAGO	2	Primary Care referrals – Children and Adults mental health
Sheppey PCN - IMAGO	4	Primary Care referrals
Sittingbourne PCN - Involve Kent	8	Primary Care referrals
IMAGO Swale Community Navigation Service	12.5	Complex needs, carers and frail older people
Involve Kent	1	Care Leavers

## 6. Directory of Services

- 6.1 In 2023/24, Medway and Swale HCP was awarded £300,000 of Health Inequalities funding to support the social prescribing system. Part of the funding was used to commission a Social Prescribing platform called Joy <https://services.thejoyapp.com/> which was to be utilised by link workers throughout Medway and Swale. Provider arrangements are in place with voluntary sector partners across the system to keep the content up to date and social prescribing providers have referrer accounts to allow them to find and make referrals into activities in the community for residents to access. Currently, Medway Voluntary Action (MVA) are responsible for the management of the Joy within Medway, ensuring the directory is up to date and accurate.
- 6.2 There are currently 573 different activities listed on Joy, plans are underway to work with VCS to increase the number of organisations signing up to Joy and agreeing to take referrals from social prescribers.
- 6.3 Development of a mechanism to pay VCS organisations for accepting social prescribing referrals using the Joy platform has been designed and is being utilised. This provides a succinct and efficient pathway in which funding can reach the third sector.

6.4 From 2024/25, Kent and Medway Integrated Care Board (ICB) will be commissioning Joy for one year to be used across the whole ICB footprint. There will be a facilitated roll out period throughout the year.

## 7. VCSE Capacity

7.1 The voluntary sector are experts at working with residents with some of the poorest health outcomes. Many local groups charitable objectives are centered around supporting specific high risk demographic groups, so are ideally placed to receive referrals and support people in order to help the system to narrow the gaps in health and wellbeing outcomes. However, VCSE Capacity is a well recognised risk to the social prescribing system. To address this risk, Medway and Swale HCP made a bid for NHS Health Inequalities funding in order to support our VCSE partners. In 2023/24, £300,000 was awarded to seed fund activities within the community and pay organisations for receiving social prescriptions from link workers as well as supporting the infrastructure to enable this activity to happen.

7.2 MVA currently manage the funding allocation for Medway and Swale. The funding provides much needed revenue to the third sector to allow for an increased number of referrals from social prescribing for those residents and groups with the largest health inequalities. These client groups are the most regularly seen and supported by link workers. Pump priming new activities or new providers is based on this demand identified from link workers working within the community and are designed to meet the needs of residents. Where activities are block funded, providers deliver a pre agreed amount of referral capacity for social prescribing.

## 8. Referral and Outcome Data

8.1 The majority of social prescribing providers submit data to Medway Public Health on an annual basis to allow an overall update against the 5 year plans aspirations. Data requested includes:

- Number of people accessing a link worker for a social prescribing service
- Number of people who completed a link worker social prescribing service that had a demonstrable improvement in their health and wellbeing
- The number of social prescriptions made by a link worker to a community activity provided by a VCSFE organisation

8.2 Data for this report was requested for the time period between 1<sup>st</sup> October 2022 and 30<sup>th</sup> September 2023. Data for this period is incomplete due to changes in host providers within PCNs. PCNs may commission external providers to host LWs or choose to employ directly. At this stage it is not possible to split data between providers and PCNs for changes part way through the reporting period

- 8.3 Kent and Medway ICB have commissioned a full package from Joy which includes a Client Record Management system embedded into GP clinical systems. This provides a template for LWs to update engagement and outcomes for their patients and track referrals into VCSE organisations. Data will be able to be extracted from Joy giving a more robust data set. However, Joy have only been commissioned for one year and the data will be reliant on the LW accessing the platform and utilising its functions.

## 9. Risk management

<b>Risk</b>	<b>Risk</b>	<b>Mitigations</b>
Directory of Services	Directory of services and social prescribing database needs to be in place with long term funded contract so link workers can quickly identify community activities to refer to, and information can be exchanged with evaluation metrics tracking activity volumes.	The short term funding of Joy is on the ICBS steering group risk register and being discussed.
VCS Capacity	Long term funding for the payment upon prescription model is not secure due to financial constraints of the system.	Independent evaluation commissioned to assess the impact of this prescription payment pilot.
Appropriate Referrals	Due to the large volume of people being referred to social prescribing providers, it's a common occurrence that some of these residents have complex needs that far exceed the professional competency of a link worker. This and other factors are having a direct impact on link worker well being levels and they need a comprehensive support package for their workplace wellbeing and stress levels.	Development of a training programme for potential referrers so they refer appropriate clients to SP providers. Referrals between providers, Integrated Locality Review Teams, clinical supervision and best practise of supporting link workers shared between hosts and providers.
Estates Capacity	Link workers are finding it difficult for appropriate clinic and consultation space to meet clients. Home visits and lone working comes with risks and may not always be appropriate for service users or link workers, so consideration must be given to all link workers and where they work from to support clients.	Individual PCNs/link workers/providers will report specific details of specific location challenges and the strategy group will engage with wider partners to try and find solutions and work arounds.
Transport	Residents and link workers have also reported large barriers accessing social prescriptions due to transport issues. Although not exclusive to rural	Additional social prescription opportunities being made available across

	communities, many residents who do not have access to their own vehicle are limited to the amount and location of many activities available in the community.	Medway should reduce the need to travel
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## 10. Consultation

- 10.1 The Medway and Swale Social Prescribing Plan 2022-2027 continues to be reviewed by the Social Prescribing Strategy Group in collaboration with link workers, social prescribing providers and NHS and social care professionals.

## 11. Climate change implications

- 11.1 There are no climate change implications as a result of this report.

## 12. Financial implications

- 12.1 There are no financial implications to Medway Council arising directly from the recommendations in this report.

## 13. Legal implications

- 13.1 There are no legal implications to Medway Council arising directly from the recommendations in this report.

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## Appendices

None

## Background papers

None