

A Community Approach to Health & Wellbeing

SPRING Social Prescribing

Summary Evaluation Report

July 2019 - October 2020









SPRING Social Prescribing (SPRING)
helps people aged 18+ to address;
social, emotional & practical needs,
by connecting them to sources
of support within their community
to improve their health & wellbeing

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Section 1: About SPRING

SPRING received £3.2 million funding from the National Lottery Community Fund and is a partnership between Scottish Communities for Health and Wellbeing (SCHW) and the Healthy Living Centre (HLC) Alliance in Northern Ireland. The lead organisation is Bogside and Brandywell Health Forum.

Social Prescribers serve communities in socially deprived areas throughout Scotland and N. Ireland and are based in delivery partners. Delivery partners are community-led health organisations and members SCHW or HLC Alliance.

SPRING creates a link between the health service and communities.

SPRING works with individuals to ask the question 'what matters to you?', rather than 'what is the matter with you?'. Typically, GPs or Primary Health Care professionals refer patients who are experiencing.

- social isolation,
- low mood,
- mild depression,
- chronic pain,
- long term conditions, or
- physical inactivity

How does it work?

A social prescriber spends time engaging with each person referred to SPRING, listening to their needs and exploring services and activities that can help them improve their health and well-being.

Using a co-production approach, the client choses which supports to avail of, and a health pathway is developed. Elemental Software is the digital platform used by each delivery partner to record social prescriptions. The impact on health and wellbeing is measured using the Warwick Edinburgh Mental Wellbeing Scale and the Outcome Star.

Section 2: Impact

SPRING measures impact for people, healthcare, communities, and the government.

1. For People

Numbers referred









Outcomes



85% of people who completed **Warwick Edinburgh** monitoring tool during the period showed an improvement in their health and wellbeing. Average improvement was **21.5%**



84% of people who completed **Outcome Star** monitoring tool during the period showed an improvement in their health and wellbeing. Average improvement was **18.4%**



I was actually at quite a low ebb ... and then [SP] came along. And actually, it was like a breath of fresh air. In fact, since then, I've decided I would like to volunteer and help wherever I could ... it had that impact on me SPRING Participant

What people say about SPRING:

- Without SPRING people would have reached crisis point
- Participating in SPRING resulted in improved health and well-being, higher confidence, reduced anxiety, and improved social connections.
- Building trust with social prescriber is fundamental to success.
- Visiting the social prescriber in a community setting normalises the engagement and encourages participation.
- Peer support is highly valued.



2. For Healthcare

Numbers participating



Outcomes



A sample of people from **2** delivery partners reported that on average their GP attendances had reduced by over **50**% following completion of a social prescription

What healthcare professionals say about SPRING:

- SPRING is improving the health and wellbeing of patients and has had a positive impact on primary care.
- Being community led makes services accessible to a wider range of patients.
- Healthcare professionals are more aware of community led health initiatives.
- SPRING is helping to tackle the root cause of patient issues.
- Patients are receiving high quality help and support services that otherwise may not have been open to them.



Social prescribers have more time to build that relationship ... sometimes it's also easier [for patients] to talk to someone they don't know about those issues than their primary caregiver who has known them all their life. Dr Laura McDonnell, Fermanagh

3. For Communities

Numbers participating



10
in Scotland

14 in N. Ireland

Outcomes



SPRING has established a social prescribing network in Scotland and plays a lead role in the All-Ireland social prescribing network, helping to strengthen links amongst community organisations and with public sector organisations. The overall aim of the networks is to influence health improvement policies and practice.

What Community Partners say about SPRING:

- Delivery partners are better able to serve harder to reach members of the community - SPRING is adding value to delivery partners.
- SPRING is helping to develop relationships between community sector organisations and public sector organisations.
- SPRING partnerships are helping partners to share resources and learning.
- SPRING is building awareness and recognition of the value of CVS amongst health care sector.
- Location in CVS means we were able to respond quickly to COVID-19 crisis closer to community, less stigma, de-medicalisation of model.



This is one of the biggest ... impacts on our organisation of any project that I've managed over the years ... it has raised our profile with the GPs, with the primary care teams, with the health service locally. Nicholas McCrickard, County Down RCN

4. For Government

Numbers participating



2 Govt. Departments are directly engaged with SPRING, providing additional funding



SPRING is represented at national level on Health Service advisory groups in Scotland and N. Ireland

Outcomes

SPRING's partnership with Department of Agriculture, Environment and Rural Affairs has led to £500,000 investment in social prescribing in rural areas in N. Ireland.

A partnership with Department for Communities through NI Housing Executive has resulted in further investment of £25,000 to deliver a pilot social prescribing programme for social housing tenants.

SPRING is working with the Department of Health to embed social prescribing in the curriculum for medical training, 10 trainee doctors have shadowed SPRING social prescribers as part of their training.

What statutory bodies say about SPRING:

- Acknowledgement from health board managers that social prescribing is part of the wider direction of travel.
- Support for community-based social prescribers working with local primary care teams.
- Acknowledgement of SPRING's sphere of influence at regional and national levels, but there is recognition that this differs across the programme.



[Spring] has ... helped to demonstrate a practical way that we could do better around non-medical health interventions ... I think it has also helped to shine a light ... on the great work that does go on within local communities and voluntary organisations to make better use of the resources that are there. Sinead Malone, ICP Regional Business Manager, Health and Social Care Board



Section 3: Challenges, Solutions & Learning

1. Collaborative working

The challenge

In some areas there are other 'social prescribing' initiatives. These include Community Connectors (funded by the Health and Social Care Partnerships), Community Link Workers (funded by the Scottish Government and NHS) and Multi-Disciplinary Teams (based in General Practice Northern Ireland) The emergence of MDTs has altered the relationships between SPRING and some GPs. There is a need to ensure parties work together for the benefit of people needing help.

The solution

Your Voice (Inverclyde) has established a partnership with; Community Connectors (funded by the Health and Social Care Partnership), Community Link Workers (funded by the Scottish Government) and SPRING. This partnership has led to the development of an effective triage system between the 3 partners. Under the system, typically, Tier 1 referrals are addressed by the SPRING social prescriber and Tier 2 and above referrals go to Community Connectors and Community Link Workers. This model makes the most of scarce resources and the skill sets of the partners. The success of the model is due to strong working relationships in the locality.

Social Prescribers in N. Ireland have established positive working relationships with MDTs. Strong working relationships are essential to avoid duplication and utilise community assets appropriately.

The learning

There has been important learning from this model, including the benefits of collaboration over competition; the need for clarity of roles, responsibilities, and areas of focus; and the importance of developing strong working relationships. SPRING has captured this learning and shared it with delivery partners who operate in areas where there are other social prescribing initiatives, including Belfast, the Scottish Borders and Dumfries and Galloway. Although progress has been impacted by the Covid 19 pandemic as some NHS based staff have been temporarily redeployed, the learning from the Invercylde model provides an evidence base to help inform future discussions.



2. Sharing learning

The challenge

There has been much learning from social prescribing initiatives to date. The challenge is to share this learning as widely as possible to influence practice, policy, and strategy.

The solution

SPRING has been at the forefront of establishing social prescribing networks in Scotland and Ireland. These networks bring together the key players in social prescribing in both countries and aim to share learning on social prescribing practice, policy, and strategy. SPRING established and co-ordinates the Scottish network which began in June 2020 and the HLC Alliance Regional Coordinator is Co-chair of the All-Ireland network.

SPRING also co-facilitates the Project Echo shared learning network for social prescribing in N. Ireland. Project ECHO was originally developed in New Mexico, it is a model for learning and sharing good practice which brings people with a shared interest together in structured way within a virtual community using video conferencing technology. The shared learning network in N. Ireland includes link workers from five other social prescribing initiatives.

The learning

SPRING has applied learning from the All-Ireland Network to develop a Social Prescribing Network in Scotland which first met in June 2020 and has a membership of 22 social prescribing initiatives.



3. Issues wider than Health

The challenge

Although initially referred to SPRING for a health-related issue, often the underlying causes are wider social matters.

The solution

SPRING social prescribers spend time with people to understand 'what matters to them'. This establishes relationships and helps identify underlying causes. For example, people with anxiety and mental well-being issues may be experiencing housing or financial difficulties. In appropriate circumstances, SPRING social prescribers can make referrals to partners who can help with financial advice.

The learning

'Make the Call' is an advice line that helps to ensure individuals and households across Northern Ireland are receiving all the benefits, supports and services to which they and their families are entitled. During the 2019/20 financial year, SPRING referred 50 clients into Make the Call over a 6-8 month period. As a result, around 60 additional benefits, supports and services were identified with over £35,000 of annualised benefit money generated for clients.



4. Making digital referrals

The challenge

Simplifying the digital referral process for GPs to SPRING is likely to lead to larger numbers of referrals.

The solution

GPs can make digital referrals to SPRING from the Elemental platform. However, there has been a reluctance to do this because of information security concerns. A GP at Lorn Medical Centre, Oban, Scotland worked with the Deputy Head of E-Health, NHS Highlands to undertake a Data Protection Impact Assessment of the Elemental system, to ensure information transferred this way is secure and meets legislative requirements under GDPR. The outcome of this assessment has been approval from E-Health NHS Highlands for the GPs at Lorn Medical Centre to use cloud based Elemental software to make digital referrals to SPRING.

The learning

SPRING is making other GPs aware of this development which should pave the way for further digital referrals from GPs in years 4 and 5.



Section 4: Connect Well - COVID-19 response

The challenge

From March 2020, SPRING adapted its delivery model to address the impact of the Covid 19 pandemic, by launching the 'Connect Well' service.

'Connect Well' provides support online and remotely, including offering socially distanced visits and activities where appropriate, to ensure people feel connected and supported across the communities that SPRING operates within.

Numbers supported



Interventions provided

As a direct response to the mental and emotional strain being experienced because of the Covid-19 pandemic, SPRING is providing 'Connect Well' online workshops. These are free weekly workshops available to anyone over 18 years and are delivered via Zoom. The workshops provide information on mental health, relaxation, and coping mechanisms, and cover themes including, relaxation, anxiety, how to get a good night's sleep and arts. 20 workshops were delivered between May to September 2020 and 668 people took part in these.



Referrals ... they are changing ... there's people coming to the surgery who have never been for mental health issues before but need to now ... maybe they're worried about Covid or lost their job Allison Rae, Mental Health Nurse, Burnbrae Medical Practice, Shotts

Section 5: Conclusions & Recommendations

Conclusions

The Evaluation Report for year 1 of SPRING concluded that in its first year, SPRING had put in place the building blocks for the future development of the project. The period July 2019 to October 2020 was initially a period of growth, as SPRING built on the foundations established in year 1. Further delivery partners were recruited in N. Ireland, additional GP practices were engaged, and more people received social prescriptions across the geography covered by SPRING.

SPRING's sphere of influence increased, establishing, leading, and developing national networks bringing together key players in social prescribing in Ireland and Scotland, being involved in regional steering groups with Public Health Scotland and Department of Health in N. Ireland and building partnerships with national charities and Government departments beyond health. Locally, several delivery partners successfully developed working relationships with community connectors, link workers and primary care based multi-disciplinary teams.

Then, in March 2020, the global Covid 19 pandemic hit Scotland and Ireland. This had a direct impact on the people being referred to SPRING as mental health issues and isolation increased during national and local lockdowns. SPRING reacted quickly, and in March 2020, social prescribers and delivery partners developed and delivered the Connect Well service to ensure people in the communities they served remained connected.

Connect Well has been a success, however the pandemic has had a wider impact on SPRING, delaying its ability to further influence key decision and policy makers as they focus all their attention on responding to the impact of the pandemic. This scenario is likely to continue well into 2021. However, this presents an opportunity for SPRING to continue to gather evidence demonstrating the difference it is making.

The evaluation report provides evidence that in the period July 2019 to October 2020, SPRING helped:

- i) People to improve their health and well-being.
- ii) Health professionals to deal more effectively with their patients.
- iii) Delivery partners to respond to the needs of their communities, and
- iv) Government to understand the benefits of social prescribing and community led health provision.

Recommendations

- 1. Enhanced referral pathway. Learning from years 1 and 2 shows that social prescribers are most effective when they spend time with people to build trust and rapport and understand their needs, which are often multi-faceted. It takes time to co-produce an effective social prescription. As a result, the referral pathway was enhanced for year 3 of the project to enable social prescribers to spend more time with people referred to SPRING to understand their needs. In years 4 and 5, SPRING should continue to use the enhanced referral pathway developed for year 3. SPRING should also continue to receive referrals from Covid response hubs in 2021.
- 2. **Collaborative working.** SPRING should continue to encourage collaborative working, through sharing learning between delivery partners and with other community and voluntary sector organisations. Collaborative working with other social prescribing initiatives should continue to be developed nationally through social prescribing networks and locally by individual delivery partners with link workers, community connectors and primary care based multi- disciplinary teams.
- 3. Influencing policy makers. SPRING should continue to share learning from the project with policy makers, through working on national steering groups and building on existing relationships with Government departments. Learning to date should be considered when developing future initiatives and partnerships. The structure, composition and operation of the Strategic Advisory Panel should be reviewed and strengthened.

- 4. Impact of community based social prescribing. SPRING should use the learning and evidence gathered to date to promote and reinforce the impact and sustainability of community based social prescribing. The SPRING Management Group should use their knowledge of health economics and the wellbeing economy, to demonstrate the economic impact of community based social prescribing and community led approaches to improving health and wellbeing.
- 5. **Data capture.** SPRING should continue to refine its information systems to ensure they are easy to use and capture relevant information consistently across all delivery partners.
- 6. Financial resources. To date, the resources invested in SPRING have been utilised to create a network of social prescribers. Now that there is clear evidence available as to the type of activities delivered through social prescriptions and their effectiveness, the focus for the next two years should include the development of a continuity and sustainability strategy based on relevant evidence (including for example, evidence relating to cost benefit, countering failure demand and the economic efficiency of holistic community approaches to health improvement). This strategy should include building the case for increased resources to secure appropriate community capacity to respond effectively to increasing numbers of social prescriptions.





It's been a great process for us ... the relationships that have formed with GPs, other medical professionals, mental health teams. It's been enlightening to see the people who have benefited from it. But it's come with additional problems ... there's a huge range of additional support that people need ... it's capacity, it's neverending, my staff are working constantly on it. June Vallance, GBT Manager

J.



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