

Social Prescribing – Key Messages from Ageing Better

Introduction

In January 2019 we brought together Ageing Better projects to share learning and insight from across the programme about Social Prescribing. The focus of this paper is on social prescribing programmes in Ageing Better where a health referral is involved. We have also aligned our work with the definition of Social Prescribing used by HM Government in 'A Connected Society'.

Social prescribing enables organisations to refer people to a range of services which offer support for either social, emotional or practical needs. These could include feelings of loneliness, as well as for debt, employment or housing problems. Social prescribing connects people to community groups and services, often through the support of a Link Worker. These connector schemes employ individuals (link workers) who take referrals from local agencies (including GPs), and work with people to produce a tailored plan to meet their wellbeing needs. They help people to overcome social isolation and feelings of loneliness by connecting them to activities and support in their local area. This can involve a range of activities from arts participation, befriending and sport or exercise, as well as debt, housing or employment advice.

Key message summary

- The Link Worker role needs to provide short term interventions that help tackle immediate needs. They also need to provide a Connector role that offers longer term support and works with the community to ensure there are suitable places for people to go. In order to be effective the Link Worker also needs access to specialist mental health services to complement their delivery.
- 2. There is no one size fits all or one length of time that will suit. Link Workers should not be expected to fix all problems within a single time period. Complex cases need more time than more straight forward cases. People may also move from a straight forward case to a more complex case as the relationship between the Link Worker and older person develops and the older

person is able to fully explain their situation. However, it is possible to group people into categories of complexity to help with management of workloads and cases.

- 3. Volunteers have a role to play but ideally later in the journey once the issues have been diagnosed and a plan in progress. It would not be appropriate in the early stages of a Link Worker's role where there is too much pressure on the volunteer. Volunteers are not a low cost solution. It takes time to match volunteers to older people and there is considerable time needed for supervision and support.
- 4. The Link worker needs to be part of a peer support network, working with people who understand the unique stresses and strains of the role and can provide appropriate support. They also need good management support and access to clinical supervision if required to help them manage the emotional challenges of the role.
- 5. Link Workers need access to health and social care systems and if this isn't possible should attend Multi-Disciplinary team meetings.
- 6. The referral network is never 'done'. It requires constant review and updating and relationships need constant input and work. There is a churn of staff and CCGs are going through restructures and changes so the wider workforce connections are changing and this is time consuming. There is a need to continually visit team meetings to keep communication routes open and and to raise awareness of the types of referral suitable for a Social Prescribing service.
- 7. A Social Prescribing model needs to invest in the community offer as well as the Link Worker role. Where the Link Worker is working with people who have complex needs, the community groups should only be expected to work with smaller numbers. It is unrealistic to expect community centres and community groups to provide the transition routes identified byt Link Workers without money and resources.
- 8. A personalised plan needs to be person centred and built on what that individual wants to achieve. Offering a first home visit can be very beneficial to help build a relationship.