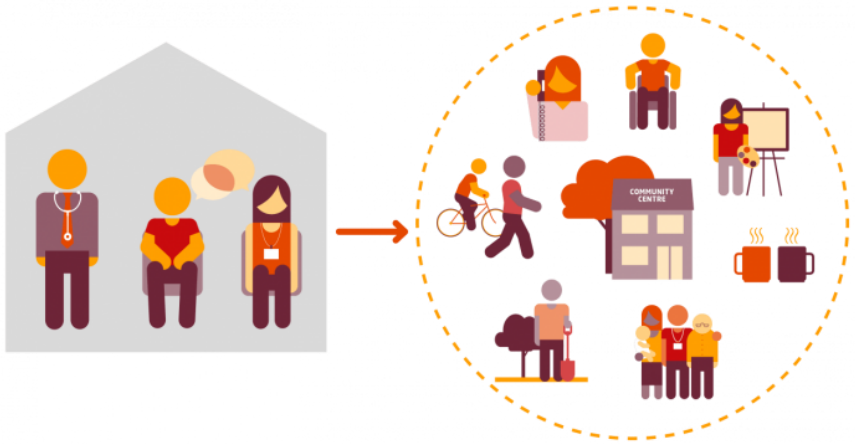
Community First
making life better for everyone

Hants & IoW Social Prescribing Network Conference

Why Social Prescribing Works?

Wednesday 23 November 2022, 9.00am-2.00pm



HIOW Social Prescribing Network

Why Social Prescribing Works?

Conference Welcome

Tim Houghton

Chief Executive, **Community First**

tim.houghton@cfirst.org.uk

A very warm welcome

- On behalf of the Hants & IOW SPN steering group, my colleagues in Community First, our friends in GVA and the wider CVS network. Together we make the voluntary sector better; creating thriving and successful organisations capable of delivering high quality services that help people to be happy & healthy.
- Our time to shine and put SP centre stage. We're in a situation where pressures on NHS are at an all time high and we need to tackle the problem head on.
- Opportunity to re-energise and re-boot the VCSE sector as we learn to live with long term effects of COVID and the lasting legacy; mental health, loneliness and the economic hardship and challenges that pervade our lives. A toxic combination which is fuelling increasing inequalities across our communities,
- Most of us in this room know that social prescribing delivered through our networks of frontline NHS and social care staff, link workers and connectors, and volunteers and voluntary sector groups can really impact people's lives. Yet we know we need to do more – estimated 900,000 people will access SP by 2024 - thankfully not all in Hampshire - but the network has given us a great head start and platform to build on
- I'm also buoyed by the rising Barometer of recognition around SP. Barely a day without news item on the benefits of SP – this week we heard about a pilot scheme to pay energy bills for people with LT respiratory illness and with caring responsibilities. AND It really does work and when you strip it back – its very simple but like anything worth doing it takes a lot of hard work, volunteers and partnerships to make it work.
- The opportunity to come together in such large numbers are few and far between so make the most.
- This conference is about unlocking that potential; the art of the im/possible by harnessing the passion and enthusiasm generating and sharing ideas, constantly innovating. Although we sit in different organisations, different sectors with differing responsibilities we're united and fuelled in our efforts to help people to be as happy and healthy as they can.

Sian Brand, Co-Chair, National Social Prescribing Network

(Pre-recorded presentation)

A Community & Voluntary Sector Response…

Tim Houghton

Chief Executive, **Community First**

tim.houghton@cfirst.org.uk

Social Prescribing Network

Voluntary Sector response

- Scale of the challenge is scary. Natural to be cautious particularly if your organisation has already been fully stress tested through the last 3 years
- 'We all have a role to play' and we shouldn't see this as a problem any one of us should solve in isolation. Sian talked about the importance of collaboration and building relationships. We're experts in this and have to be to get things done stretching resources to the max and reaching into and understanding communities is our asset. Where we're less expert and need to learn is around data; capturing, sharing, analysing to understand local drivers of poverty and inequality. Opportunity to invest in community research and work with universities and research bodies
- Our sector is often described as 'messy and magnificent – we thrive on being community driven and value led; doing all we can to ensure people are treated fairly with kindness and respect. As the SP approach gathers momentum it too feels messy and magnificent. I sometimes think we should be drawing flowcharts to map patient pathways navigating them through SP referral and VCS engagement. But its the organic community led approach that works allowing people to find their level to do what is right to help themselves accessing support near to where they live and sustain that health and wellbeing benefit.
- Most VCSE orgs are place based – it makes it more effective but it presents a challenge when wanting to scale up and replicate and in working with SPs to navigate the VCSE and signpost to the right or most suitable organisation
- The VCSE is great at putting people first – we saw this during the pandemic, wrapping support around the individual reflecting the personalised care agenda and giving people choice and control over their health outcomes. VCSEs are also adept at knowing when to give a helping hand as opposed to just a hand out. Support to build resilience and sustain health outcomes is crucial
- I can't and won't underestimate or underemphasise the value of volunteers in SP systems. They are the lifeblood. We simply have to do more to reach and motivate more people to give a little to support each other. We may all need SP ourselves at sometime or another. The training and support for vols is also crucial – giving them a good experience.
- All of this has a cost and its vital we explore more ways of making this financially viable and sustainable for VCSE orgs. Much is expected and wanted but funding remains limited. Its not all about NHS as Sian says but it has to be part of the conversation and we need NHS support to unlock the more significant funding opportunities grants and social investment

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National Academy for Social Prescribing

HAMPSHIRE & IOW SOCIAL PRESCRIBING NETWORK

WHY SOCIAL PRESCRIBING WORKS?

The Influence and Role of Local Infrastructure Organisations

Anne-Marie Morrison, Health and Wellbeing Manager, NAVCA

November 23rd 2022

Content

- Background of NAVCA
- Social Prescribing Project and Partnerships
- Project Aims and Approach
- Key Findings and Recommendations
- What next?

Credit Anita Staff, Creative Arts East

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What is local VCSE Infrastructure

... the beating heart of a community's voluntary sector

- Leadership & Advocacy
- Partnerships & Collaborations
- Community Development & Practical Support
- Volunteering Inspiration & Promotion

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What does that mean in practice?

- 196 member LIOs working with
- 200,000+ local VCSE organisations
- Covering a very diverse range of delivery areas and activity
- Impacting the lives of people every day!

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Why Social Prescribing?

In 2022, NASP, Spirit of 2012 and NAVCA formed a partnership to increase the impact of social prescribing. This project aims to deliver increased impact and patient outcomes of social prescribing by:

- creating **stronger connections** between local VCSE infrastructure organisations (**LIOs**) and **stakeholders** involved in social prescribing **at a national, regional, system and place** level
- supporting **increased co-design/production** of social prescribing **infrastructure**

What did we set out to learn?

The **scoping phase** of the project aimed to identify gaps and actions to take forward to further support the development of local social prescribing delivery and was guided by **3 key questions:**

1. What different models of social prescribing delivery and hosting exist and which work well?

2. How do local VCSE host organisations ensure the social prescribing offer is good quality and what resources exist to support this?

3. How do SPLWs access information about community assets?

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darts

Key findings #1 – Models of delivery for Social Prescribing

The project focused on three models for SPLW employment (i.e. hosting): (1) PCN host; (2) LIO host (including partially subcontracting out); (3) other VCSE organisation hosting.

- **Wherever the hosting takes place, by PCN or VCSE (whether by the LIO or another VCSE), there is a variability of involvement in SP in an area, by the PCN , LIO, VCSE and other stakeholders, that impacts delivery.**

'The pandemic has changed the role and I don't know if we will ever get back to true social prescribing.'

SPLW employed directly by a PCN

Used with permission, darts in Doncaster

'Our approach is allowing the client to write the prescription'

SPLW manager in a VCSE organisation

Key findings #2 – How do local VCSE host organisations ensure the social prescribing offer is good quality?

- No standardised quality assurance mechanisms specifically for SP delivery in the VCSE exist.
- The NHSE Maturity Matrix and updated Workforce Development Framework, address quality assurance for systems but are often not utilised effectively by hosts in the VCSE.
- VCSE host organisations use their own experiences and knowledge to develop safe and effective services but would like a simple and clear template for a structure of a SP approach across their area.

Key findings #3 – Accessing information about community assets

- Directories of community services are important but are not the only tool SPLWs use for linking people to assets; SPLWs getting out into the community to engage with activity providers is the best route for ‘successful referrals’.
- Local directories that are resourced, maintained and link up with referral systems are the most useful to the SP journey.

'Don't quality assess us; provide resource so we can provide a quality service!'

VCSE provider of activity used for SPLW referrals

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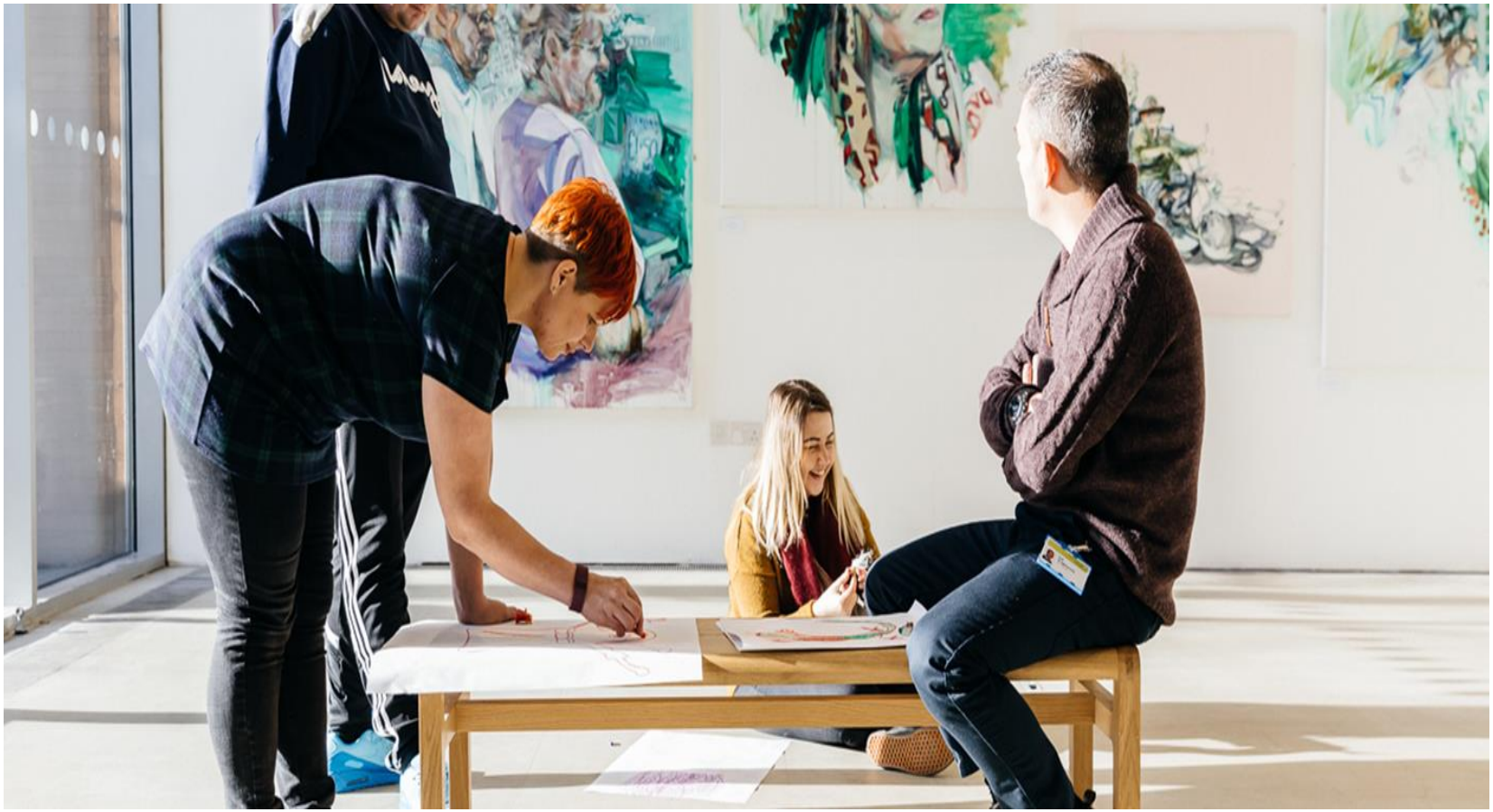

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Recommendations #1: Models of delivery for Social Prescribing

- Develop guidance for a consistent mechanism of involving all partners and stakeholders in delivering a SP service in a place, with the VCSE host organisation and/or LIO at the heart of the model.

Recommendations #2: Ensuring a Quality Offer

- Develop a SP QA framework specifically for hosting LIO's and other VCSE organisations

- Bring together support resources for SP practice and delivery (e.g. training, guidance, toolkits, case studies) from national bodies into a coherent and user-friendly document with live links, updated regularly and disseminated to host organisations and the wider VCSE.

Recommendations #3 – Accessing information about community assets

- Develop and share clear guidance on developing sustainable local directories of VCSE activity for SP with LIOs and share best practice through links with Thriving Communities Regional Leads.

Credit Anita Staff, Create Arts East

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Please contact me for further discussions, observations:

anne-marie.morrison@navca.org.uk

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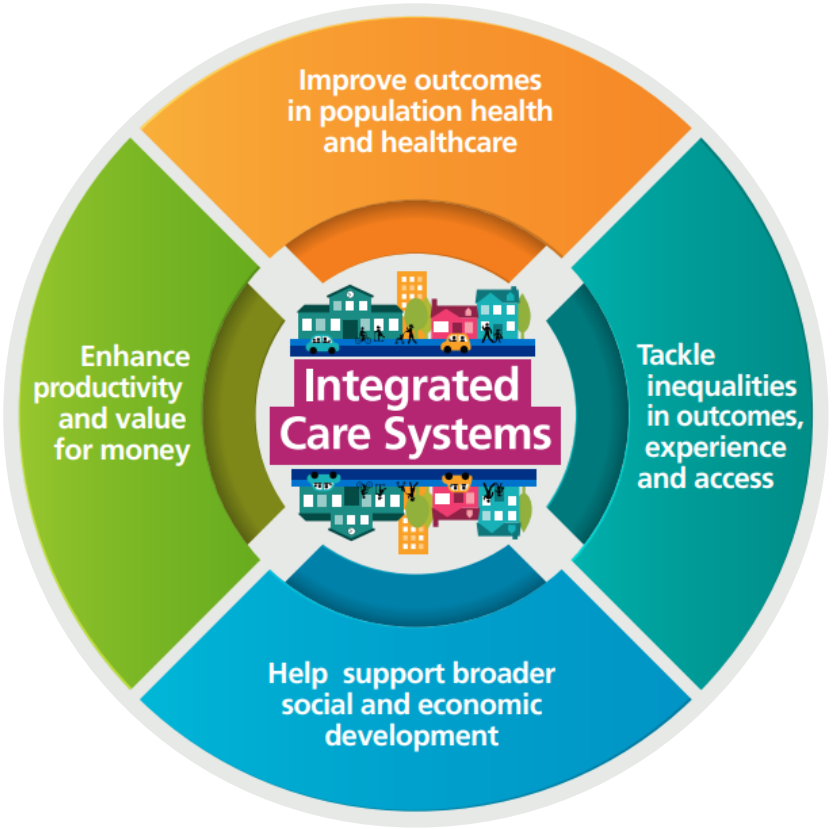
Hants and IOW Social Prescribing Network Conference

Lena Samuels, Chair of HIOW ICB

The purpose of an Integrated Care System



Our vision

- Realise the potential of collaborative working to enable people in our communities to live healthier, longer lives.
- We will do this by listening to local people and using their input to shape services and by building on our partnerships with local authorities, emergency services colleagues, voluntary organisations and local communities for the benefit of our populations.
- We have a shared ambition to be one of the best health and care systems, with local partners continuing to work closely together with the wider community to deliver consistency of care, break down barriers between services and reduce inequalities.
- Our aim is to provide care that is tailored to individual needs, delivered at the right time and in the right place.

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Our NHS in Hampshire and Isle of Wight

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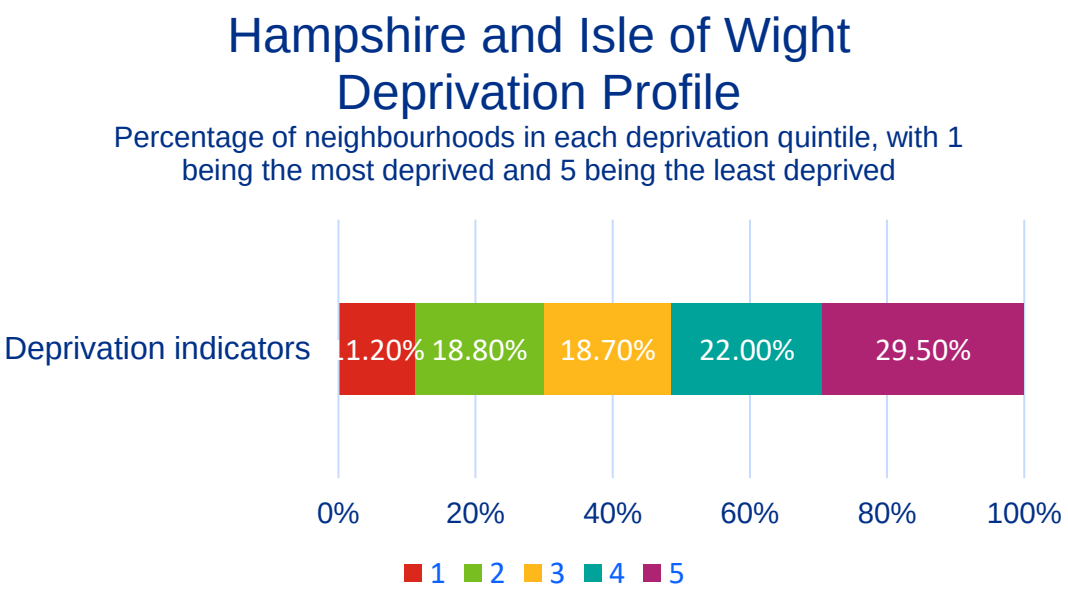
Our component parts

Integrated Care Partnership	HIOW Integrated Care Board	Four Place partnerships	Provider collaboratives and Local Delivery Systems	Hampshire and Isle of Wight Transformation Programmes
Brings together many different partners with **strong working relationships**. The Integrated Care Partnership has a strong relationship with place and has developed a strategy owned by the whole system.	The board meets its statutory duties, and the new organisation **works in new ways** in support of the broader formation of the system. The 5-year plan is agreed and informed by the Integrated Care System strategy.	Our places have a clear relationship with both the Integrated Care Board and the Integrated Care Partnership and appropriate delegated authority. A lead for place is agreed working with all partners at place to **reduce inequalities and integrate services**.	Existing collaboratives have further developed and we have established new collaborations each with clear and distinct responsibilities. We **transform services** and improve our resilience.	Our programmes are aligned to our strategic priorities. They operate consistent with appropriate oversight and assurance so we know that we are making a **positive impact on outcomes**.

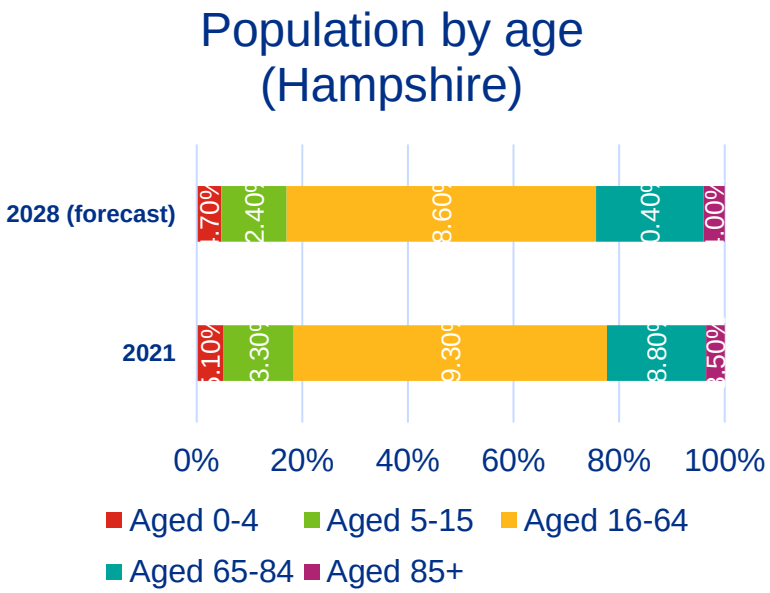
Our population

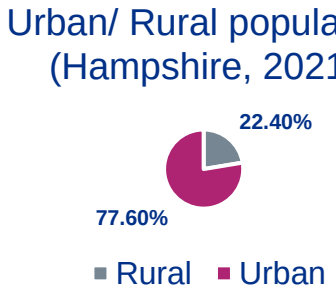


Out of the 42 Integrated Care Systems in England, Hampshire and Isle of Wight ranks 11th least deprived nationally. However, substantial pockets of deprivation exist in our communities and we are working to close the gap between the health outcomes of our most and least deprived population groups.

Source: https://www.health.org.uk/publications/long-reads/integrated-care-systems-what-do-they-look-like

Our population





Isle of Wight population profile:

- The Island has a population of 140,400 compared to 1,502,980 living on the mainland in Hampshire.
- Over the past 10 years, there has been a 24.7% increase in people aged 65 and over living on the Island, compared with a 5.3% decrease in people aged 15 to 64 years, and a 6.3% decrease in children aged under 15 years old.

ICP strategy development

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ICP Emerging Themes

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Priorities for our strategy

Mental wellbeing	Children and young people
Prevention of ill-health and promotion of healthy lifestyles	
Digital and data	Our people (workforce)

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What we have heard from our system partners so far

- Tackle avoidable mortality through more effective, timely health care interventions
- Increased focus on prevention and healthy behaviours – tackling the 'causes of the causes'
- Address major drivers of the healthy life expectancy gap, including circulatory, cancer and respiratory diseases
- Improve access to primary care and elective care, in particular outpatients

- Prevent ill health across life course to ensure healthy ageing
- Refresh the 'post acute model' to better support people, address high readmissions and social care pressures

- Implement our integrated neighbourhood model of care
- Credible workforce strategy that prioritises staff health and wellbeing to better support them, increase their satisfaction and productivity
- Create new opportunities for local employment to address people shortages, address Equality, Diversity and Inclusion imbalances, impact wider determinants of health and benefit the wider socio-economics of local area
- Create an integrated data set that links outcomes, resources and money spent to ensure a deeper understanding of value and enable population health management
- Use systems convergence, our Shared Care Record and interoperability to share information more seamlessly across organisations

- Address the wider determinants of health that are related to poor mental health outcomes
- Establish at scale care management for people with the most complex mental and physical health and care needs
- Improve access to NHS funded community mental health services and preventative care

- Use data insights to identify worsening inequalities gaps and devise interventions to level up and close these gaps
- Modernising care and experience through digital transformation, taking into account the needs of people who may be digitally excluded
- Work with partners in recognising and addressing the wider determinants of health

- Focus on first "1,001 days" to impact on children's health in adult life
- Improve access to mental health services for children and young people
- Focus on adverse childhood experiences and trauma
- Focus on mental wellbeing during pregnancy and early childhood

Integrated Care Board Membership

All members contribute strategic, delivery and operational leadership experience and insight to the Board's responsibilities for the quality and performance of integrated NHS care – each member also contribute additional perspectives including, but not limited to, those indicated here.

When the ICB was established in July 2022, we committed to review the structure and membership of the Board after six months. Plans are in place to start this review in January.

Executive members

Non executive members

Partner members

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Our Integrated Care Board Strategic Plan

Keep people healthy and out of hospital

- Increased focus on **prevention** and health behaviours
- Fix our **integrated neighbourhood model of care**
- Establish **at scale care management** for people with the most complex health and care needs
- Refresh the '**post acute model**' to better support people, address high readmissions and social care pressures

Action to address health inequalities

- **Rebalance spend to address the inverse care law.** This is based on significantly lower elective activity in poorer urban areas that have the highest rates of non-elective admissions as well as lower GP numbers in these areas
- **Address major drivers** of the healthy life expectancy gap, including circulatory, cancer and respiratory diseases. This could include a focus on children's health, healthy lifestyle choices and cardiovascular disease

Improving access

- **Mental health**: perinatal mental health, mental health services for children and young people, NHS funded community mental health, eating disorder services
- **Elective**, in particular outpatients – including through care navigation

Enablers

- Modernising care and experience through **digital transformation**, but being careful not to 'digitally exclude'
- **Workforce transformation**: addressing our people shortages, collaborating to achieve a game-changing impact on workforce supply and the wider socio-economics of our local area
- Creating a **collaborative environment**, just like during the peak of the pandemic, where we can all work together to better join up what we do for local people
- **Organising clinical service provision** to deliver world-class care models

For each of these areas, we are covering:

1. **Diagnosis** – the case for change
2. Our **vision** for the future
3. Guiding **approaches** – to tackling issues and opportunities identified
4. The **transformation plan** that gets us there
5. How we will **measure** our success

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Progress so far, July-September 2022

- Successful establishment of the Hampshire and Isle of Wight Integrated Care Board on July 1st 2022, combining the Hampshire, Southampton and Isle of Wight CCG and Portsmouth CCG
- Further strengthened relationships with a range of NHS and non-NHS partners, including those in Local Authorities, Health Watch and the Voluntary, Community and Social Enterprise sector
- Strong engagement with developing our Integrated Care Partnership and the associated ICP strategy and the ICB 5-year plan
- Enacted winter plans to manage increased demand over the autumn and winter months across all our services
- Board endorsement of the independent review of our Community and Mental Health Services, including recommendations and next steps to reduce unwarranted variation in service provision across Hampshire and Isle of Wight
- Development of new Integrated Care System Clinical Leadership model

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No Limits – a case study

Supporting Young People in Hospital Emergency Departments

No Limits is an award-winning, local, independent charity providing a unique combination of prevention, early intervention and crisis support to young people, based on a nationally evidenced model.

No Limits Youth Workers provide wellbeing support to young people aged 11-26 who attend the emergency department in crisis, whether that is through violent crime or mental health crisis.

They are in 5 emergency departments across Southampton, Hampshire, Portsmouth and Isle of Wight hospitals.

The team of ED Youth Workers are committed to empowering children and young people to achieve positive changes in their lives, providing direct support to children and young people in the emergency department and in the community by connecting them with specialist support and other community services through Social Prescribing.

NO LIMITS
Helping Young People Help Themselves

No Limits – a case study

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Working with 111

- No Limits works in partnership with the **111 Mental Health** team to support 11-25 year olds across Hampshire who are accessing 111 for advice and support with their Mental Health and Wellbeing.

- A Social Prescriber will work with them to create a well-being plan that focuses on priorities and connects young people with local community groups, activities and events, education and employment opportunities and statutory services for practical and emotional support to improve wellbeing.

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The No Limits project in North Hants

- The Hampshire Emergency Department team have achieved 7 day a week service with a regular working pattern across sites.
- Data shows topics discussed regularly by young people include: anxiety, depression, low mood, stress, self-harm, suicidal feelings, issues with family relationships, friendships and school.
- No Limits worked with 362 young people throughout the year at Basingstoke and Winchester emergency departments.

Joshua Ryan, Head of Thriving Communities
National Academy of Social Prescribing
(Pre-recorded presentation)

Workshops

Workshop 1 – Tackling Health Inequalities (Blue Room, 1st Floor)

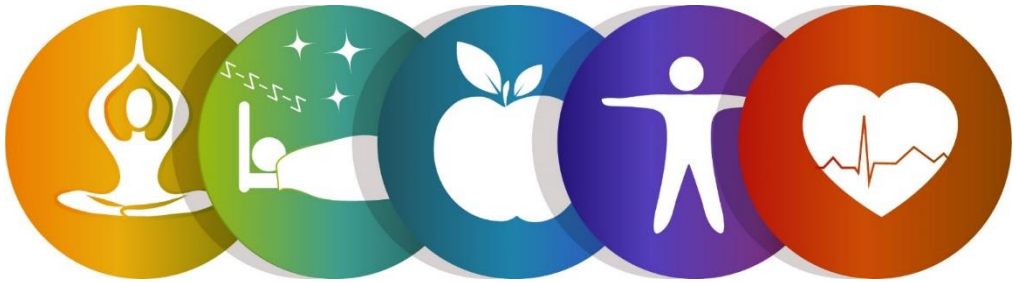
Workshop 2 – Social Prescribing Health & Wellbeing – Impact and Evaluation (Main Hall, Ground Floor)

Workshop 3 - Sources of Social Prescribing and Health & Wellbeing Funding (Green Room, 1st Floor)

Hants & IoW Social Prescribing Network Member Responses…

Stacie Gofton, Social Prescribing Link Worker, **Havant & Waterlooville Primary Care Network**

Social Prescribing Video Introduction…



Home & Well

An introduction to the service

How we help

SGN Your gas. Our network. Hampshire and Isle of Wight Scottish & Southern Electricity Networks citizens advice Hampshire Portsmouth Water south east water Southern Water

What is Citizens Advice?

- A network of **independent charities**
- **Joined together** by a membership scheme
- A mix of **volunteers** and **paid staff**
- A mix of **general** advice and **specialist** teams
- **All** a little bit **different,** but **all similar**

Home & Well

citizens advice Hampshire

What is Home & Well?

- A specialist **Citizens Advice** service
- Hampshire-wide through a **collaboration** between Citizens Advice Hampshire and several local Citizens Advice
- Made possible by a number of **key partners**

(P.S. It’s also award winning)

Customer Vulnerability Award at the 2021 Utility Week Award

Our partners:

Hampshire and Isle of Wight

SGN
Your gas. Our network.

Southern Water

Portsmouth Water

Scottish & Southern Electricity Networks

south east water

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Who makes it happen?

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What do we do?

- Support residents of **Hampshire** and the **Isle of Wight**
- Aim to address the detrimental impact that **cold homes**, **reduced water usage** and anxiety that **utility bills** can have on people
- Provide a **complete wrap around service** to help residents feel **safe** and **comfortable** in their home environment, with a focus on energy and fuel poverty

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Why is it important?

- “It offers people lifelines of support within their community. Feeling supported is key to improved health and wellbeing" – **Sarah, Home & Well Adviser**
- “There to listen…support clients facing unprecedented difficulties...have the additional support they need to stay safe and warm…eases the burden on vulnerable clients” – **Emily, benefits adviser @ Citizens advice**

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How do we do this?

- **Imagine** a patient, service user, or vulnerable friend or family member – or **anyone**
- As we go through what we do, think if they could benefit from the service in any way

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Step 1 – Explore the Issue

- We receive a referral and make **contact as soon as possible** – usually 72 hours
- We undertake a **holistic exploration** to identify presenting and underlying needs.
- For example: **housing** needs, **benefits**, **debt**, **family,** and so much more.
- We aim to find out every way that we can help.

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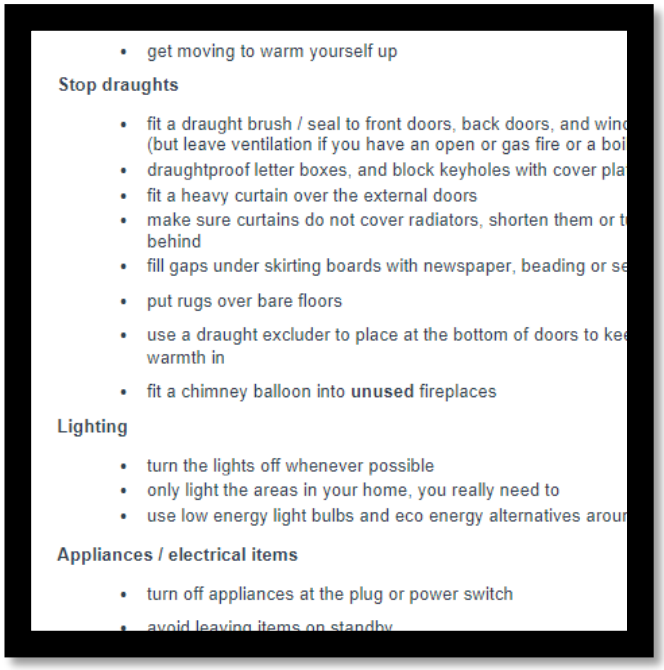
Step 2 – Practical energy support & advice

- We discuss **energy needs** and see if we can give **practical advice** to reduce energy usage
- We discuss appropriate **energy tariffs**, to ensure clients get the best deal
- Refer to specialist organisation that can help with energy, such as **Switched On Portsmouth**



- get moving to warm yourself up

Stop draughts

- fit a draught brush / seal to front doors, back doors, and win (but leave ventilation if you have an open or gas fire or a boi
- draughtproof letter boxes, and block keyholes with cover pla
- fit a heavy curtain over the external doors
- make sure curtains do not cover radiators, shorten them or t behind
- fill gaps under skirting boards with newspaper, beading or se
- put rugs over bare floors
- use a draught excluder to place at the bottom of doors to kee warmth in
- fit a chimney balloon into **unused** fireplaces

Lighting

- turn the lights off whenever possible
- only light the areas in your home, you really need to
- use low energy light bulbs and eco energy alternatives arou

Appliances / electrical items

- turn off appliances at the plug or power switch
- avoid leaving items on standby

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Step 3 – Staying Safe

- We help our clients to stay safe in their home in several ways:
- Support through the **Priority Services Register** for utilities
- A **Carbon Monoxide Awareness** conversation, ensuring they have a working CO monitor
- Check to see if a referral to SGN for **lockable cooking valves** may be appropriate

Step 4 – Reducing expenditure

- We help with energy costs through measures such as:
- **Social tariff** applications such as support from Portsmouth Water, Southern Water, Southeast Water, and other providers
- **Charitable support** – varying by local area, such as grants and fuel voucher
- Other energy measures – such as the **Warm Home Discount**, **Fuel Poor Network** referrals, or **energy efficiency upgrades**.
- Identifying debt through debt assessments and referring into specialist debt advice services, such as our money advice teams

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5 – Income Maximization

- We **identify missing entitlement**, such as **means-tested benefits** and **disability benefits**.
- Provide **support** such as **food bank** or **other charitable referrals**.

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6 – Wrapping Around - Identifying Other Issues

- Advise on **related issues** to reduce stress, such as **employment**, **family, needs and carer's assessments** and **consumer**
- **Signpost** and **refer** into support in the community, such as local groups and wellbeing services

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How do you refer in?

- **The person** you have been imagining – **could they benefit** from any of those services?
- Quick and easy to use **referral form** on the Citizens Advice Hampshire website:

  https://citahants.org/partners/home-and-well/
- If you need another system – speak to us. We'll be happy to help.

Come and say hello

- **We have a stall**
- Speak with the team
- **Say hello**
- Find out more about what we do
- Take the first step to working with us

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A firsthand account…

The Client's Journey

NB The Home and Well Client's Journey has been nominated for a Charity Film Award – details of how you can vote is on the Home and Well webpage.

The New Generation of Social Prescribing

Ready Steady Go programme

PEEER project

Sarah Shameti (Youth Worker) and Fern Symonds(Young Person)

Impact of living with a long term health condition

- Depression
- Anxiety
- Educational difficulties
- Relationship issues
- Low self esteem
- Social isolation, family dependency
- Professional restriction

Kidney M Iorga 2013
Epilepsy R Rodenburg 2011
Diabetes S Khandelwal 2016

PEER Youth Service

11 – 25 years

- PEEER Events
- Duke of Edinburgh Award
- ASDAN – nationally approved accreditations
- Peer support
- Youth club
- 1:1 support and advocacy
- Transitional support
- Social prescribing not prescribed!
- Art therapy
- Patient voices for service improvement
- Community partnership projects

Social Prescribing

The provision of a supportive pathway to accessing community activities and connecting with others to improve emotional or physical health

RE generation.

Ready Steady Go programme

PEEER project

SoCo music project

ASDAN

IN FOCUS education & development

DofE THE DUKE OF EDINBURGH'S AWARD

THEATRE FOR LIFE

Hampshire FA

Energise Me

Supported by the Thriving Communities Fund, made possible thanks to

National Academy for Social Prescribing

ARTS COUNCIL ENGLAND

Historic England

Money & Pensions Service

NATURAL ENGLAND

NHS CHARITIES TOGETHER

NHS

SPORT ENGLAND

SOUTHAMPTON Children's Hospital

University Hospital Southampton NHS
NHS Foundation Trust

RE generation.

Ready Steady Go programme

PEEER project

- Professional referrals and Self referrals into service – increased accessibility for young people
- Social Prescribing….Not prescribed
- Support…Support…….Support

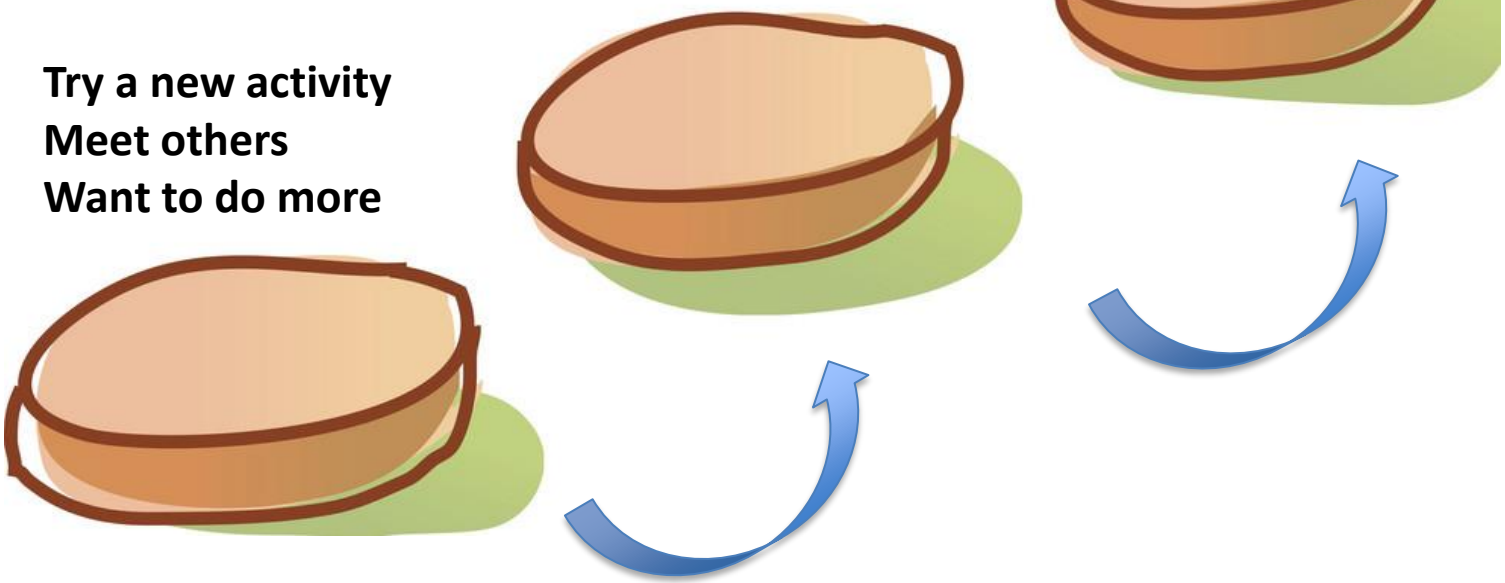
Ready Steady Go programme

PEEER project

Independent engagement
Increased accountability
Improved health outcomes

Want to progress
Feel supported
Increase familiarity

Try a new activity
Meet others
Want to do more




Mean WEMWEBS scores
70.0
60.0
50.0
40.0
30.0
20.0
10.0
0.0
Mean WEMWEBS score
44.8
51.4
Before
After
Before and After

everyone ACTIVE

Energise Me

Ready Steady Go programme

PEEER project

SOUTHAMPTON Children's Hospital

University Hospital Southampton NHS
NHS Foundation Trust

Ready Steady Go programme

PEEER project

www.readysteadygo.net/peeerevents

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07920 711716

Hants & IoW Social Prescribing Network

Wishing you all a Happy and Healthy Winter Season

Hants & IoW Social Prescribing Network Webpage Addresses:-

- **Community First**:- https://www.cfirst.org.uk/wellbeing/hspn/
- **Gosport Voluntary Action**:- https://www.gva.org.uk/groups/social-prescribing/

For more information contact Jane Bray:- healthforums@cfirst.org.uk