

Agenda Item No.

Meeting: Health and Wellbeing Board

Date: Tuesday 5 March 2024

Classification: Part 1
Key Decision: No

Title of Report: Social Prescribing in Southend on Sea.

Executive Director: Michael Marks, on behalf of the Director of Public Health **Report Author:** Simon D Ford, Health Improvement Practitioner Advanced

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Executive Councillor: Councillor James Moyies

1. Executive Summary

Social prescribing connects people, facilitated by a Social Prescribing Link Worker (SPLW), to non-medical local support to promote good health and wellbeing and reduce health inequalities whilst supporting our collective approach with population health management.

Social prescribing is an NHS priority supported by a wide range of organisations including Southend on Sea City Council.

Social prescribing digital tools enhance the key elements of the social prescribing process.

The purpose of this report is to provide an update on the current position of social prescribing across the City, after the programme has been embedded.

2. Recommendations

It is recommended that Health and Wellbeing Board: Note the content of this report.

3. Background

National Context

Social prescribing is an essential component of the NHS Long-Term Plan's commitment to universal personalised care and increasing access to community advice and support for the entire population.

Through social prescribing, local agencies such as local voluntary services, social care and health services refer people to a social prescribing link worker

(SPLW). SPLWs give people time, focusing on 'what matters to me?' to coproduce a simple personalised care and support plan, and support people to take control of their health and wellbeing and support partner agencies to implement a more coordinated approach with population health management.

It is an approach that connects people to activities, groups, and services in their community to meet the practical, social, and emotional needs that affect their health and wellbeing.

The benefits of social prescribing can only be described as 'endless' - It:

- is a holistic approach focussing on individual need and provides pathways to change,
- promotes health and wellbeing and reduces health inequalities in a community setting, using non-clinical methods,
- facilitates social connection,
- supports link workers and patients to find community support and activities,
- addresses barriers to engagement and enables people to play an active part in their care,
- uses and builds on the local community assets in developing and delivering the service or activity,
- aims to increase people's control over their health and lives, focussing on improving mental health and physical well-being, and
- reduces the burden on the NHS, namely primary routes of care such as GPs and fewer hospital admissions, fewer outpatient appointments and reduced reliance on medical prescriptions.

Social prescribing works particularly well for people who have one or more long term conditions, who need support with their mental health, who are lonely or isolated or who have complex social needs which affect their wellbeing.

Implementing social prescribing supports local areas to address health inequalities, it provides healthcare professionals with a referral option to respond to the social causes of health inequalities at the individual level and it supports people who struggle to make their own connections. Social prescribing can promote improved health and wellbeing and has the potential to reduce existing health inequalities, for example isolation, loneliness, poor nutrition, physical, and mental health.

Social Prescribing Digital Platforms

Digital social prescribing is a way of enhancing the key elements of the social prescribing process. These include:

- Making community-based and online support more accessible through digital pathways,
- Developing an online triage function for social prescribing, so those with the most appropriate needs are directed to a link worker,

- Developing community directories so that they are accurate, up-to-date, and provide a baseline source of knowledge of the local area, and
- Case management software, which enables a social prescribing service to understand the impact of their referrals on their client and the local voluntary and community sector.

The overarching benefit of a social prescribing digital platform is to ensure referrers, social prescribing link workers and providers work is effective, administrative tasks are minimised, paperless and automated where possible to ensure the maximum of time is spend with residents on interventions to improve their health and wellbeing.

Local Context: Social Prescribing Link Workers

Social prescribing has been offered in Southend since January 2020. Covid-19 changed the nature of its initial delivery with its focus, at the time, on vulnerable at-risk residents who needed to isolate as a result of infection or to prevent infection.

Post pandemic, the social prescribing offer has focussed its delivery to connect people to activities, groups, and services in their community to meet the practical, social, and emotional needs that affect their health and wellbeing.

In Southend, eight social prescribing link workers are supporting general practice within the four Primary Care Networks (coterminous with the Council's four localities).

Currently, six of the SPLWs from these Primary Care Networks (PCNs), namely Southend Victoria, West Central, Southend East are hosted by the Southend Association of Voluntary Services (SAVS). Two SPLWs are hosted by their Primary Care Network (SS9 PCN).

Southend-on-Sea: Social Prescribing Outcomes

Resident outcomes for social prescribing are currently reported by SAVS in quarterly reports, biannual long reports, and an annual report.

Data from the PCN that host their own social prescribing link workers is under review and development for reporting from spring 2024. <u>A snapshot of SS9 PCN data is presented below for the quarter of October to December 2023 only.</u>

We have summarised the SAVS social prescribing link worker data for the period April 2023 to December 2023 and SS9 PCN data for the period October 2023 to December 2023. Once we have aligned all the data recording points, information will be presented on annual basis in the future.

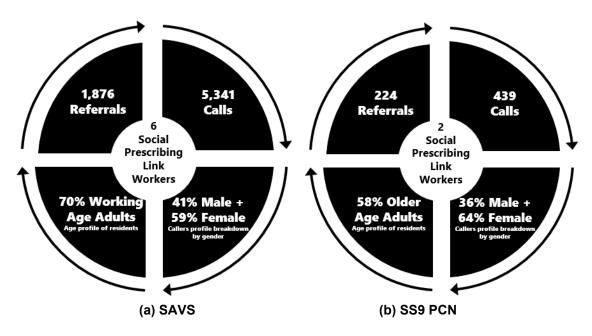


Diagram: a) SAVS Social Prescribing Link Worker outcomes (April 2023 to December 2023) Diagram: b) SS9 PCN Social Prescribing Link Worker outcomes (Oct 2023 to Dec 2023) All Data Sources in this report are from SAVS and SS9 PCN

The data and information below relate to the social prescribing service delivered by the SAVS hosted social prescribing link workers on behalf of three Primary Care Networks.

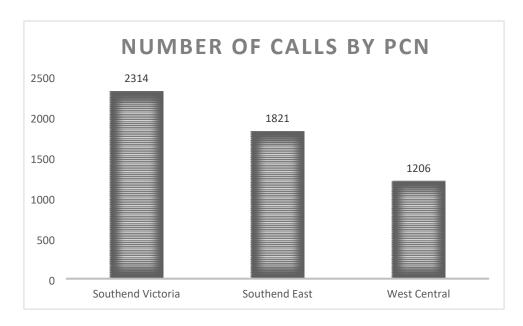


Chart: Number of calls by Primary Care Network (SPLWs hosted by SAVS)

The social prescribing link workers identified trends in the needs of residents referred into the service. The word map below describes the most common. The bigger and bolder the text, the more often these issues were raised.



Diagram: SAVS SPLW trends in needs of residents referred into the service (April 2023 to September 2023).

The top five themes are:

- 1. Housing includes homelessness, problems with houses, poor living conditions, problem neighbours, problems with the housing system;
- 2. Mental Health including suicidal ideation, anxiety, depression, hoarding;
- 3. Finance and Poverty includes problems with benefits and allowances; general problems with lack of money; food and fuel poverty;
- 4. Carers, support for and need for;
- 5. Loneliness and isolation in all ages.

Resident Signposts

Residents are often given signposting support to access local organisations. This enables the resident to make direct contact with an organisation. The word map below indicates the 50 most used. The bigger and bolder the text reflect the higher proportion of signposts made.



Diagram: SAVS SPLW top 50 signposting support to local organisations (April 2023 to September 2023).

Resident Referrals

Residents also give consent for their information to be shared with an organisation for formal contact from the organisation. The word map below shows the 50 most popular.

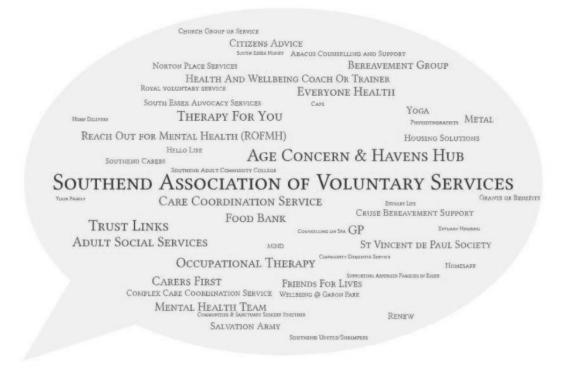


Diagram: SAVS SPLW top 50 referral organisations (April 2023 to September 2023).

Appendix one includes SAVS 2023 Quarterly Reports and an SS9 Report.

Livewell Southend Social Prescribing Digital Tool

The Council is supporting the development of its own social prescribing digital tool, in conjunction with wider partners, to enhance the delivery of the service. The digital tool will be the platform through which social prescribing referrals will be sent, received, processed, recorded and appropriate information sent back to referrer and their system.

The tool will connect to <u>Livewell Southend</u>, the Council's local health and wellbeing website providing advice and guidance as well as information on local health and wellbeing services.

The tool will also facilitate data collection, performance reporting and outcomes reporting, once implemented.

4. Reasons for Decisions

4.1. The NHS Long-Term Plan has committed to universal personalised care and increasing access to social prescribing for the entire population. The ICB and Council are working together in developing a more effective population health management approach.

5. Other Options

5.1. Primary Care Networks could employ their own Social Prescribing Link Workers and host them in-house.

6. Financial Implications

6.1. Primary Care Networks directly fund the Social Prescribing Link Workers. The Public Health Grant funds the Livewell Southend social prescribing digital tool.

7. Legal Implications

7.1. There are no legal implications arising directly from this report.

8. Policy Context

8.1 Social Prescribing contributes to the Councils Ageing Well & Living Well Strategies and the wider South East Essex Alliance and partner organisation ambitions, in reducing inequalities and improve population health and wellbeing.

9. Carbon Impact

9.1. There are no carbon impact implications from this report.

9.2.

Equalities 10.

10.1. In line with the Government ambitions social prescribing is for the entire population and further work is in development to ensure direct population referrals to this service.

11. Consultation

11.1. A case study approach is detailed in the SAVS social prescribing longer and annual reports.

12. **Appendices**

12.1. Appendix 1: SAVS Quarterly Reports and an SS9 Report.

13. **Report Authorisation**

This report has been approved for publication by:		
	Name:	Date:
S151 Officer	Joe Chesterton	26/02/2024
Monitoring Officer	Susan Zeiss	n/r
Executive Director(s)	Michael Marks	26/02/2024
Relevant Cabinet Member(s)	Cllr James Moyies	22/02/2024

Appendix 1

SAVS Quarterly Reports and an SS9 Report.







