

RAN Advice Forum Report

"Social Prescribers"

20th July 2022

Introduction

- 1 This was the second of our 2022 Advice Forums all of which are designed to help our member organisations build stronger links with the Health Sector in Reading.
- The Social Prescribing Service began in Reading 7 years ago on a small scale, working with GPs and other health services across Reading to signpost people into local support and activities. Since becoming part of the NHS 10 Year Plan, Social Prescribing has grown significantly in the last two years. Amber Holdway and Sarah Martin, the first two staff members of the Service, now manage a team of 8 Social Prescribing Link Workers and a Social Prescribing Coordinator to deliver the service across 5 of Reading's 6 Primary Care Networks.

The Presentation

- 3 Amber led the presentation, with contributions from several of her colleagues. The slides they used for the presentation, which give a wealth of valuable detail about the service and how it operates, are circulated alongside this report. They explain:
 - How people access the service
 - The criteria and main reasons for referral
 - How the service handles clients
 - The main services to which clients are signposted
- 4 The slides also contain:
 - Details of four case studies which illustrate the wide range of clients who are referred to the service, and the range of support that the service can offer them.
 - Information about a pilot support group the 'Tilehurst Wellbeing and Chat Group'they have been running for clients
 - Feedback from clients about the service. This has been very encouraging, with over 75% saying that Social Prescribing had had a positive impact on their wellbeing.
- In the year to the end of February 2022, the service accepted 657 referrals. They know that nearly half of those clients are now actively engaged with another service as the result of signposting or further referrals. They expect double that number of referrals this year, and continuing significant growth over the next 3 years. All the members of the Social Prescribing Team are employees, several part-time.

Discussion Groups

After the presentation participants broke into three discussion groups to discuss the Service, the links that currently exist between Social Prescribers and voluntary organisations, and how these links could be strengthened. The key points emerging from the discussions were as follows:

- Referrals mainly come to Social Prescribers from GPs or RBC's Adult Social Care Team. The Adult Social Care Team gets about 75 referrals a week and can process up to about 20 people a day. They triage people, sometimes develop care plans, and pass others on to other services or voluntary organisations - particularly Age UK and Communicare - as appropriate. Some of the people they refer on do not qualify for support from Social Services itself.
- Social Prescribers visit voluntary organisations to explain the service and develop links, and signposting from Social Prescribers to voluntary organisations generally works well. Clients get leaflets with the Social Prescribing Service contact details - 0118 937 2273; social.prescribing@rva.org.uk - and information about the services available. However:
 - A phone call before signposting to chat through the case can often save time and cut out inappropriate referrals. It can also minimise the risk that clients have to recite their issues more than once, and thus relive the trauma involved
 - There are sometimes barriers that have to be overcome:
 - The cost of transport, or the client's fear of going somewhere alone on public transport. There is a shortage of volunteering buddies who will accompany a client. Readibus is good, but it can take a long time to get someone a short distance.
 - Some referrals such as for mental health support or benefits advice - do not involve any cost to clients, but others - such as some forms of social interaction - can involve a charge
 - It would help Social Prescribers to know when a voluntary organisation is at capacity, or when its services have changed. The recent 'Thriving Communities' project had a monthly newsletter which was good at keeping people updated, but it no longer exists. It was suggested that the Social Prescribing team might do a monthly email to voluntary organisations asking about new developments.
- It can also be useful for voluntary organisations sometimes to draw on the knowledge of Social Prescribers by ringing them to discuss a case. This can help the organisation to identify other organisations to which to signpost clients, or even trigger a direct referral to the Social Prescriber. Social Prescribers are not supposed to take referrals from voluntary organisations, but in practice they sometimes do.
- Social Prescribers at present only seek feedback from the people they refer
 to a voluntary organisation. But if they also sought feedback from the
 organisations themselves it would be possible to see what impact the
 referrals had on the numbers and types of people supported by the
 organisation, which could underpin bids for additional funding.
- There is growing evidence of gaps in services particularly for practical help or befriending for men, particularly autistic men, and younger people. Would it be possible for the Social Prescribing Team and some of the voluntary organisations to work together to identify gaps and develop ways of filling them?

Conclusion

The Forum concluded with a brief plenary session to share the key points from the discussion groups, and a warm 'thank you' to Amber and her colleagues for producing an excellent Forum.

Richard Harrison - Chair, Reading Advice Network