

Current Social Prescribing Practices Across Greater Manchester

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Aim of project:

To map existing provision of social prescribing across GM, with an additional 'deep-dive' focus on Salford, contextualised against a wider set of best practices as identified in the literature

Method(s) used:

A mixed methods approach using secondary data sources, qualitative stakeholder engagement events and a GM wide survey provide a 'helicopter' perspective of social prescribing provision across GM.

Key Findings

Salford

Lark Hill Parent Forum	Signposting
Salford Community Leisure	Champion
Salford Health Works	Link Worker, Connector
Unlimited Potential	Signposting, Link Worker, Connector
Start in Salford - Inspiring Minds	Signposting
Stroke Association	Signposting
Salford Primary Care Together	Link Worker, Connector
Salford Primary Care Together - Homeless GP Practice	Link Worker, Connector, Champion
Salford Citizens Advice	
Gaddum	
Royal British Legion	Signposting
Focused Care CIC	
Big Life Group	Link Worker, Connector, Champion
Silverdale Medical Practice	Signposting
Salford Health Improvement Services	Link Worker, Connector, Champion
Social adVentures	Signposting, Link Worker, Connector, Champion
Langworthy Cornerstone	Signposting, Link Worker, Connector
Salford Carers' Centre	
Salford Mens Club	Signposting

Wigan

Eds Veterans Centre	
Driven	
Citizens Advice Wigan	
Community Link Workers	Link Worker, Connector
Royal British Legion	Signposting

Trafford

Trafford CCG - Derbyshire Rd South practice	
Firsway Health Centre	Signposting, Link Worker, Connector, Champion
Trafford Leisure CIC	
BHA for Equality (all GM)	

Bury

Speakeasy (all GM)	
Bury Multi-Agency Cancer Service	
Age UK Bury	Signposting, Link Worker, Connector
Citizens Advice Bury	
Bury's Exercise and Therapy Scheme	
REBUILD (Bury)	Link Worker, Connector
Royal British Legion	Signposting
Gaddum	
Bury Lifestyle Team	

Bolton

Art For You CIC	
Age UK Bolton	Signposting, Link Worker, Connector
Bolton Community and Voluntary Service	Link Worker, Connector
Groundwork	
Focused Care CIC	

Legend

- Signposting
- Link Worker, Connector
- Champion

Social Prescriber

- Receives referrals/ provides services
- Social Prescriber AND Service Provider
- Other

Rochdale

Link4Life	
Focused Care CIC	
Gaddum	
Big Life Group	Signposting, Link Worker, Connector

Oldham

Age UK Oldham	Link Worker, Connector
First Choice Homes Oldham	
Action Together	
Groundwork	
Focused Care CIC	
Southway Housing Trust	

Tameside

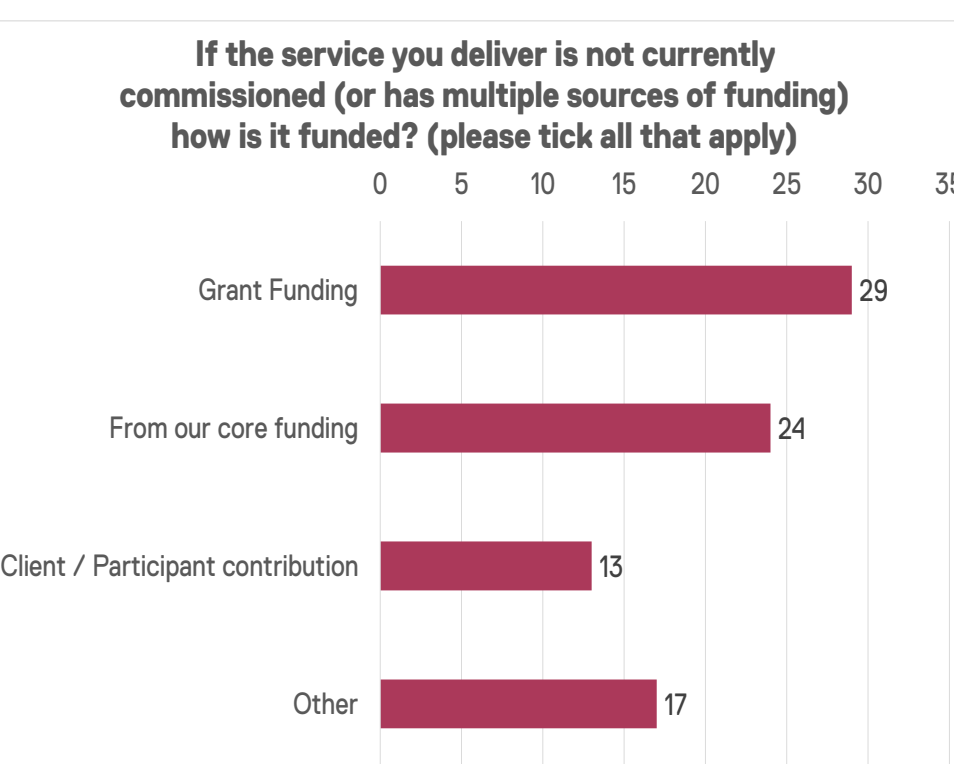
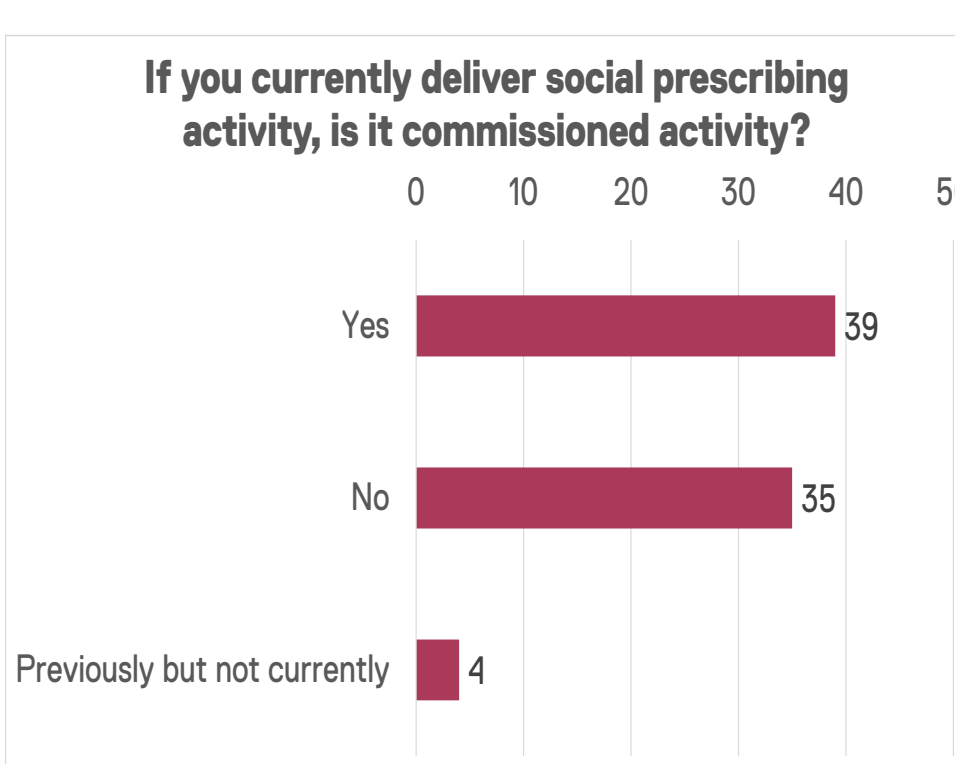
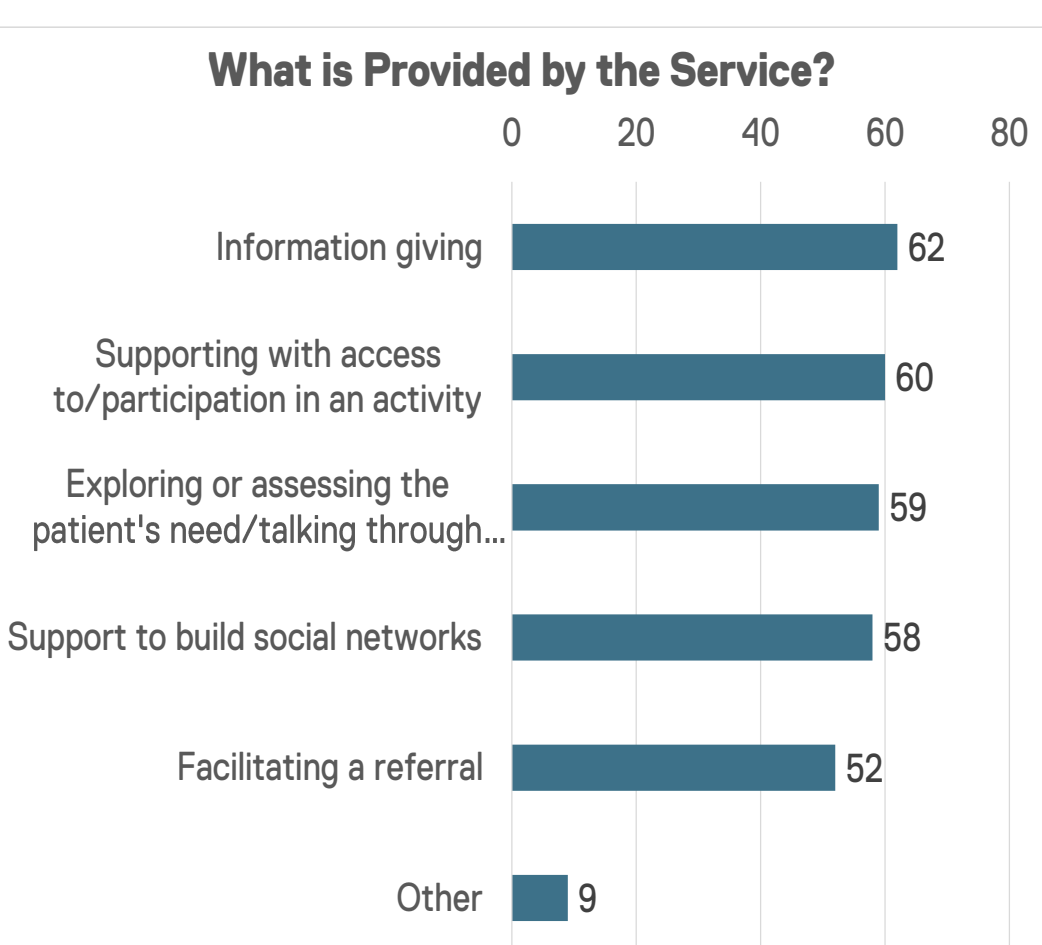
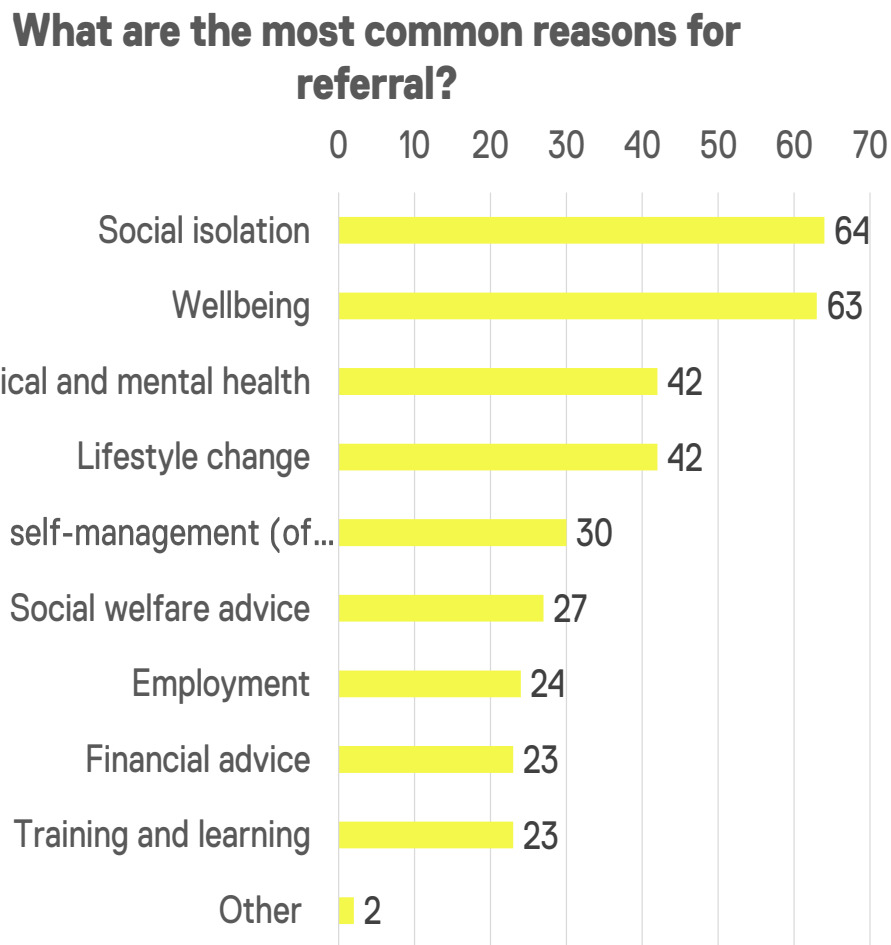
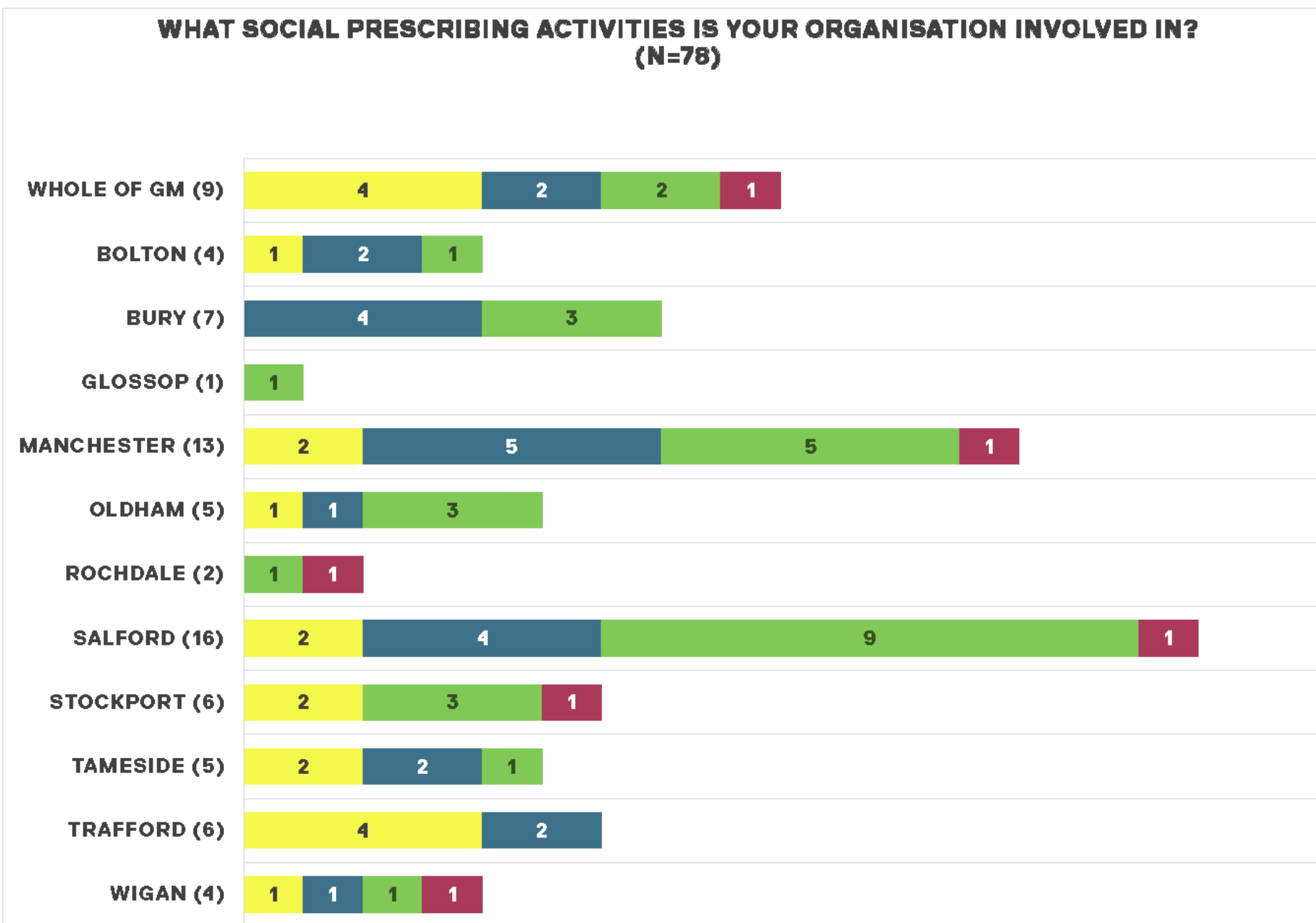
Action Together	
Tameside Cultural Service	Signposting
Tameside Adult Services	
Citizens Advice Tameside	
Hyde Neighbourhood	Link Worker, Connector
Focused Care CIC	

Stockport

Alvanley Family Practice	Champion
Stockport and District Mind	Link Worker, Connector
Viaduct Care CIC	Link Worker, Connector, Champion
Public Health Healthy Communities Team	Signposting, Link Worker, Connector, Champion
Pure Innovations / Well-being Independence Network	
Focused Care CIC	
Gaddum	

Manchester

Communities for All Ltd (All GM)	
PARS service GMMH	
Wai Yin Society (all GM)	
GreaterSport	
Age UK Manchester	
Royal British Legion	Signposting
LGBT Foundation (all GM)	
Citizens Advice Manchester	
Gaddum	
Big Life Group	Signposting, Link Worker, Connector
TLC-St Lukes & St Lukes Art Project	
Debdale Eco Centre	
Yaran Northwest CIC	
Ethnic health forum	
Southway Housing Trust	
Tree of Life Centre	



Conclusions:

A wide variety of services and models currently exist across GM that can be described as social prescribing. They mirror the variety found nationally among types of models and terminology, which often describe very similar methodologies and services in very different ways. Whilst the survey is a preliminary step to mapping the sector, it has provided useful information about the number, type and commonalities between SP provision. The next steps are to verify and amplify area by area through regional meetings.

Challenges:

- Evidence base
 - Limitations of CBA, SROI, RCT
 - Difficulties of using formal wellbeing and other health measures (WEMWS etc)
- Funding
 - Too short term, uncertain
 - Need to fund referral process, but also VCSE organisations receiving referrals
- Reduction of available resources within both NHS and VCSE
- Difference between GP/NHS approaches and discourse and that of both community members and VCSE organisations (different 'life worlds' as AllTogether Better frames it)
- 'Leap of Faith' from GPs and maintaining ongoing engagement

Enablers:

- Some only need basic signposting and referral, for all others the more holistic the service, the better the outcomes and satisfaction tend to be.
 - Need for face-to-face contact
 - Usefulness of home visits
- Relationships are central at all levels of service (CCGs & funders, GPs, link workers and/or champions, VCSE sector, community members)
- Regular communications/feedback facilitating relationships and continuous adaptation
- Flexibility of provision – adapting both referral processes (some people still prefer phone and online) and services provided, both in terms of content and location
- Long term resources and secure staff
- Up to date resource mapping – facilitated by knowledgeable staff

Key emerging issues from the first GM plenary:

- What would it take to come up with a very simple shared outcomes framework based around wellbeing for patients? There is a need to push back against some of the RCT kind of demands and just work to create very crude measures of broad reductions in NHS access (in thinking about NHS impacts), and how to evidence the impact on the VCSE sector
- What is needed to shift commissioning and investment models on NHS, what is possible now and what are the barriers (ie more around how GPs are paid, how things are commissioned etc)?
- What is needed to get long term funding, particularly for the VCSE side -- ie shifting how other funders are working
- Importance of moving to more holistic work, building networks, but without becoming overwhelmed



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