

## The impact of social prescribing on health & social care

### **Overview**

NHS Bexley Clinical Commissioning Group (CCG) and the London Borough of Bexley Council are co-commissioning a service to deliver social prescribing through primary care, with an aim to realise savings and improve patient outcomes across the health and social care system. The proposed PhD would provide a unique opportunity for a candidate to work in an applied health setting, alongside clinical colleagues in NHS Bexley CCG, to conduct a formative, summative, and process evaluation of this new social prescribing model. The evaluation would capture patient outcomes and organisational processes to explore the impact of the new model and provide the necessary evidence to inform future commissioning decisions.

### **Supervisory team**

Dr Sarah Hotham (SH), Research Fellow & Chartered Psychologist, Centre for Health Services Studies (CHSS) will lead the supervisory team. SH will be supported by Dr Kate Hamilton-West a Senior Research Fellow & Chartered Health Psychologist at CHSS. Andy Fairhurst, Primary Care Transformation Manager, NHS Bexley Clinical Commissioning Group will lead the supervisory input from Bexley CCG. He will be supported by Dr Nikita Kanani, Chief Clinical Officer, NHS Bexley CCG.

### **Background**

#### **Social Prescribing**

Social prescribing (SP) was highlighted in 2006 in the White Paper *Our health our care our say* as a mechanism for promoting health and independence. It provides GPs with a non-medical referral option that can operate alongside existing treatments to improve health and well-being. These might include opportunities for arts and creativity, physical activity, volunteering, as well as support with employment, benefits, or legal advice. A recent systematic review of social prescribing in the UK found services produced a range of benefits including increases in self-esteem and confidence; greater sense of control and empowerment and improved mental wellbeing (Thompson et al., 2015). SP can be delivered via primary care from a GP, or through non-medical 'social prescribers' who assume the role of signposting, care navigation and personal support.

The Bexley SP programme, designed in conjunction with London Borough of Bexley Council (LBB) and Bexley Voluntary Service Council (BVSC), exemplifies the 'social prescribers' model. BVSC is the umbrella CVS sector organisation and represents over 800 charities, social enterprises and community groups in the borough. BVSC acts as lead project partner overseeing the work of three locality-based providers. Each locality provider employs a 'social prescriber', to whom primary care staff refers patients. The social prescriber is a

community care worker trained in motivational interviewing and provides one-to-one advice, support and recommendations of how CVS sector services can support the patient's wider health and wellbeing. This service is delivered in medical practices, in community settings and through home visits.

### **Integrating Primary Care & Social Prescribing**

Two recent NHS strategies, the GP Forward View (2016) and the Five Year Forward View for Mental Health (2016) highlight the importance of integrating non-NHS community-based initiatives and primary care services to provide better experiences and outcomes for patients.

The challenge of providing this type of improved integrated care model coincides with a time when the healthcare system is straining under increasing pressure. Primary care is at the forefront of this tension, with GP work-loads continuing to rise coupled with an insufficient workforce to adequately meet demand. The challenge is further compounded by inappropriate use of GP appointments. The Primary Care Foundation and NHS Alliance report 'Making Time in General Practice' (2015) identified that 27% of GP appointments are avoidable, including GP time being spent dealing with patients' social problems including debt, welfare and benefits issues, social isolation, housing, work, relationships and unemployment.

These two issues will be tackled by the Bexley CCG model through integrating primary care with the work of a vibrant community and voluntary sector, in order to address the underpinning social and environmental factors that support good health. The proposed PhD would require the candidate to work collaboratively with Bexley CCG, the London Borough of Bexley Council and Bexley Voluntary Service Council to evaluate the new model through a formative, summative and process evaluation of the full-scale programme rollout across Bexley.

### **Aims and Objectives**

This PhD provides an opportunity to better understand the contribution of an integrated SP model on patient outcomes, alongside collating new evidence regards the impact of the model on social care and NHS services outside of Primary Care. The latter of these objectives is especially pertinent as, while evidence for the effects on individual patient outcomes is emerging, evidence for commissioners on what savings can be realised and where in the system those savings sit is currently lacking.

The key objectives of the PhD would be:

- Assess the impact of social prescribing on use of primary care, social care and other NHS services.

- Identify the barriers and facilitators to the successful implementation of an integrated programme and the extent to which these influence patient outcomes.
- Identify the long-term impact on patients' health and well-being.
- Assess whether impacts differ to patients not referred to a social prescribing programme.

### **Importance of research**

There is a paucity of good quality evidence to inform the commissioning of SP programmes, with a need for future studies to be comparative by design and explore when, for whom, and how well a scheme works (University of York, 2015). This PhD will provide an opportunity to address the current weaknesses in the evidence by using a comparative design to evaluate patient outcomes, alongside providing much-needed evidence about the implementation of the new integrated model to inform the efficient, effective commissioning of future SP models and associated services.

Long-term healthcare plans in Bexley CCG are required to reinforce the national healthcare strategy with the vision to help residents stay in better health for longer, with the support of high quality community-based integrated care enabling individuals to self-manage their own mental and physical health. The proposed PhD research would directly influence the provision and implementation of this vision. Furthermore the research will provide novel evidence on the impact SP, with scope to influence future delivery across other healthcare providers.

### **References**

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