

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

Wigan

- Eds Veterans Centre
- Driven
- Citizens Advice Wigan
- Community Link Workers
- Royal British Legion

Trafford

- Trafford CCG - Derbyshire Rd South practice
- Firway Health Centre
- Trafford Leisure CIC
- BHA for Equality (all GM)

Bury

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

Bolton

- Art For You CIC
- Age UK Bolton
- Bolton Community and Voluntary Service
- Groundwork
- Focused Care CIC

Rochdale

- Link4Life
- Focused Care CIC
- Gaddum
- Big Life Group

Oldham

- Age UK Oldham
- First Choice Homes Oldham
- Action Together
- Groundwork
- Focused Care CIC
- Southway Housing Trust

Tameside

- Action Together
- Tameside Cultural Service
- Tameside Adult Services
- Citizens Advice Tameside
- Hyde Neighbourhood
- Focused Care CIC

Stockport

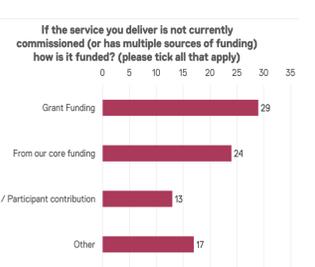
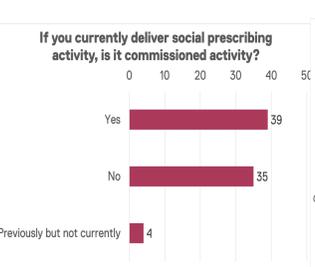
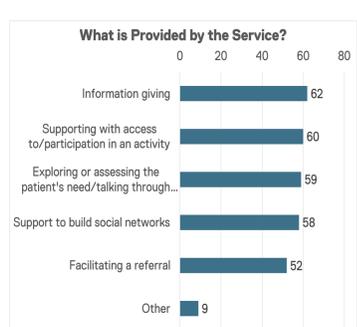
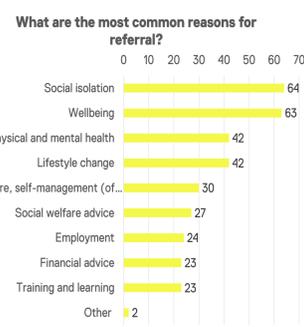
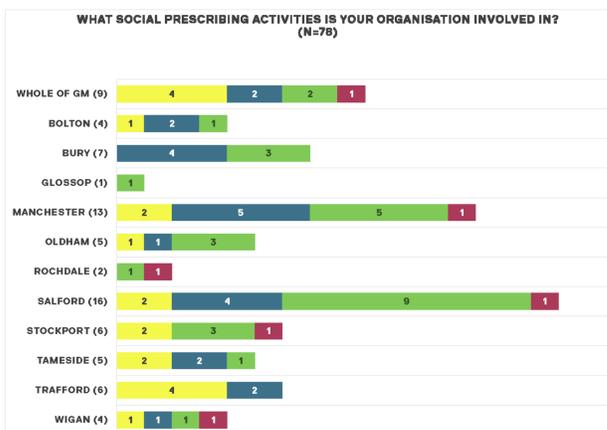
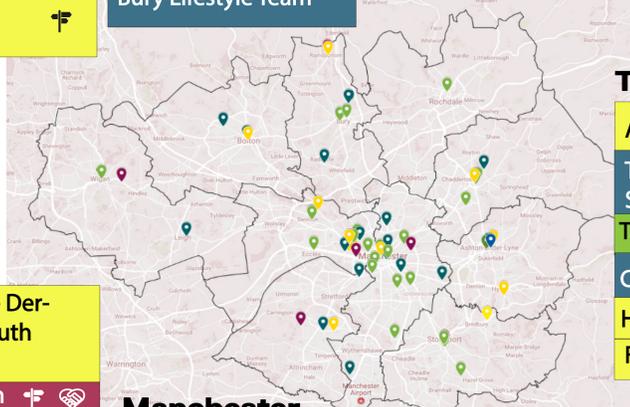
- Alvanley Family Practice
- Stockport and District Mind
- Viaduct Care CIC
- Public Health Healthy Communities Team
- Pure Innovations / Well-being Independence Network
- Focused Care CIC
- Gaddum

Manchester

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

Legend

- Signposting
- Link Worker, Connector
- Champion
- Social Prescriber
- Receives referrals/provides services
- Social Prescriber AND Service Provider
- Other



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 (WEMWBS 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