



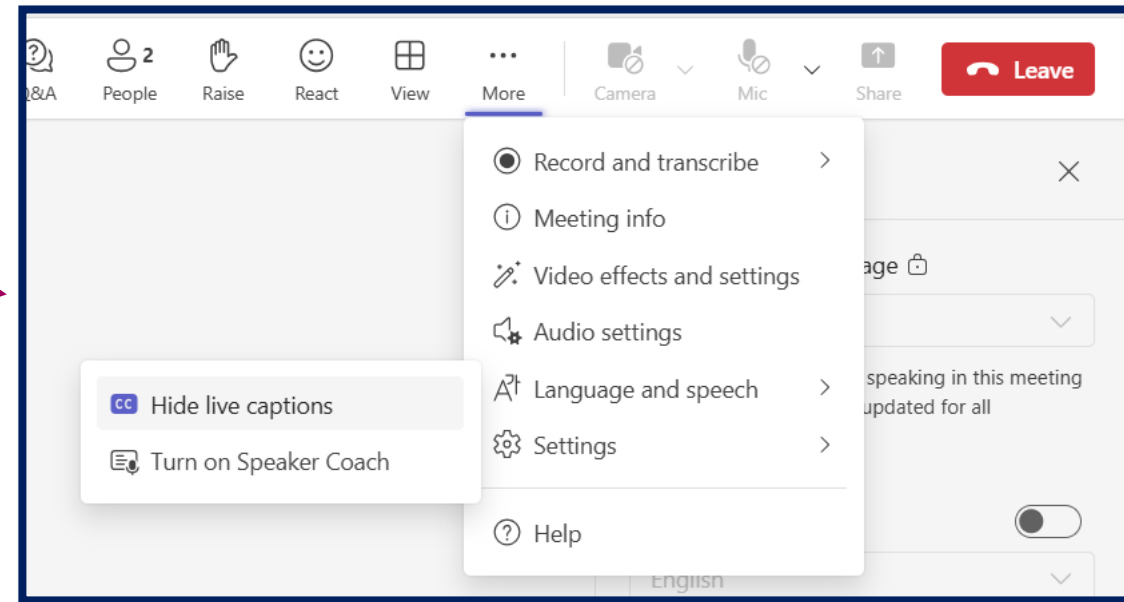
From Prescription to Participation:

A Social Prescribing and Physical Activity Webinar

More People More Active More Often

Webinar Housekeeping

- Please remain muted throughout the webinar
- Live captions are available for those who need this function
- Questions can be asked throughout, using the 'Q&A' function
- We encourage use of the 'Chat' function throughout the webinar
- This webinar will be recorded and distributed to those registered for the event



Herts Sport & Physical Activity Partnership

Vision: More People, More Active, More Often

- Established in 2003
- One of 42 Active Partnerships (AP) in the Active Partnership Network
- Work with a wide range of stakeholders, partners and organisations
- Core funding received from Sport England and Local Authorities
- Based at the University of Hertfordshire
- Approximately 35 staff and Board

Agenda

Explore how your physical activity offer can support health professionals, reach new audiences, and help tackle health inequalities.

1. Welcome and Introduction
2. What is Social Prescribing & Personalised Care – NASP PA Lead
3. Personalised Care Roles
4. Case Studies
5. Priorities, Recommendations, Next Steps



National
Academy
for Social
Prescribing

Social Prescribing – What Matters

Tracey Lines – National PA Lead

Tracey.Lines @nasp.info



Internationally accepted definition of social prescribing (2023)

‘a means for trusted individuals in clinical and community settings to identify that a person has non-medical, health-related social needs and to subsequently connect them to non-clinical supports and services within the community by co-producing a social prescription—a non-medical prescription, to improve health and well-being and to strengthen community connections.’

Muhl C, Mulligan K, Bayoumi I, et al. [Establishing internationally accepted conceptual and operational definitions of social prescribing through expert consensus: a Delphi study](#), *BMJ Open* 2023;13:e070184. DOI:10.1136/bmjopen-2022-070184

Social Prescribing across Government

- Government Strategy to tackle loneliness backed the roll out of Social prescribing (2018)
- 2019 Marked step change as NHSE incorporated social prescribing into the comprehensive personalised care model.
- GP DES contract states all PCN's must deliver the social prescribing element of personalised care.
- DEFRA and partners (2020) Green social prescribing national pilots
- DFT (2022) Active travel Social prescribing national pilots
- Beyond pills college of medicine campaign, launched 2022 and in December 2023 All parliamentary group was established.

Social Prescribing across Government

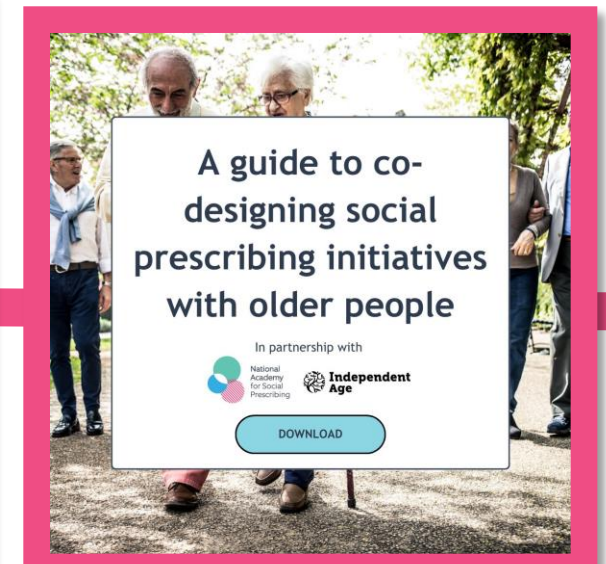
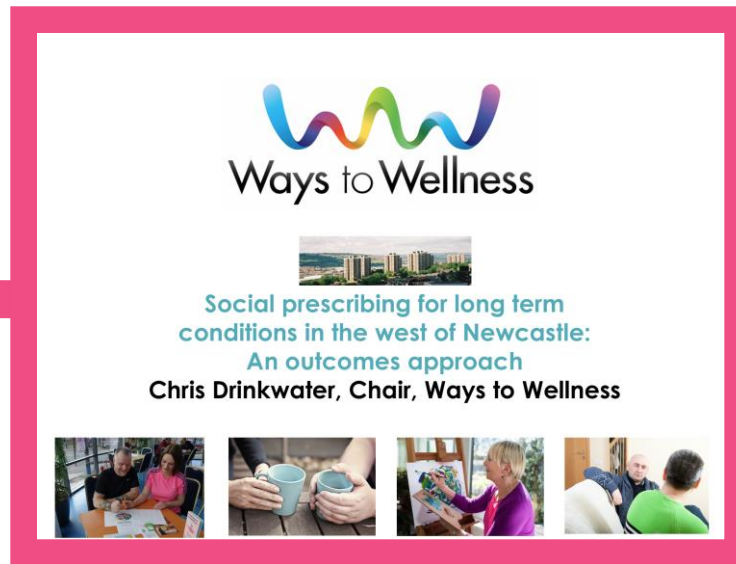
- **NHS Workforce plan (2023)** Expansion of personalised care roles across England.
- **‘Building an NHS Fit for the Future’** ministerial opening speech “*Through social prescribing, thousands of people up and down the country are benefiting from activities such as reading circles, choir groups, walking and football.*” (13th Nov 2023)
- New £2.5 billion **Back to Work Plan** to help up to 1.1 million people with long-term health conditions and disabilities, including ‘Work Well’ scheme. (16th Nov 2023)
- Select committee report on prevention calling for a **National social prescribing strategy with a focus on children and young people.** [Prevention in health and social care: healthy places \(parliament.uk\)](https://www.parliament.uk/publications/2023/10/prevention-in-health-and-social-care-healthy-places) (p19).

Who is Social Prescribing for?

Individual

A person with
non-medical,
health-related
needs

- Who has one or more long-term condition
- Who needs support with their mental health and wellbeing
- Who is lonely or isolated
- Have complex social needs affecting their well-being
- The list is growing.....



What is needed ?

Individual

A person with
non-medical,
health-related
needs



Raise the
profile

No Wrong
Door

Accessible
Activities

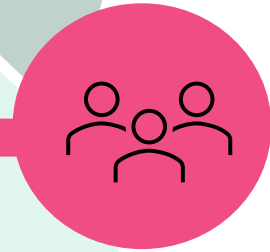
Individual

A person with
non-medical,
health-related
needs



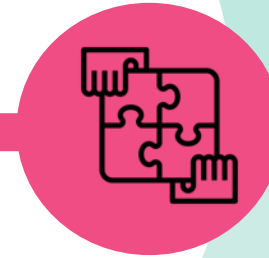
Data Tracking

Tracking individual
through the pathway
enabling learning &
improvement



Identifier

A person in a position to
identify that someone
needs support

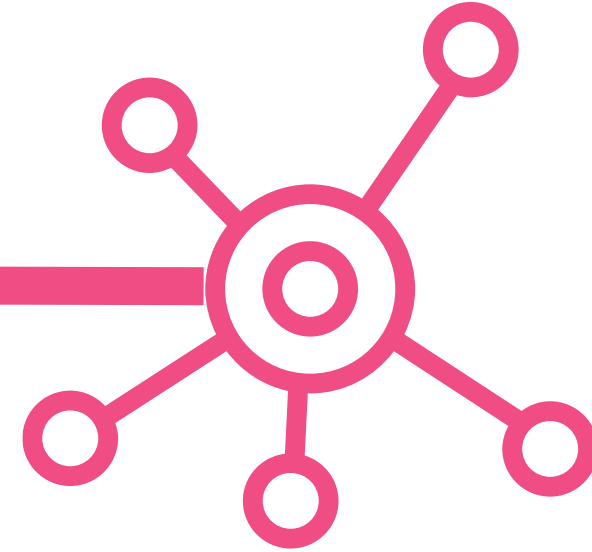


Connector

A person who has time to
have a “what matters to
you” conversation, and
co-produce a plan

Prescription

Opportunities, Activities
& Support Services that
help to improve
someone’s wellbeing



National, Regional & Local Organisations enabling smooth pathway

Who are they?



Identifier

A person in a position to
identify that someone
needs support



Social Prescribing Approach- Understanding What Matters



Connector

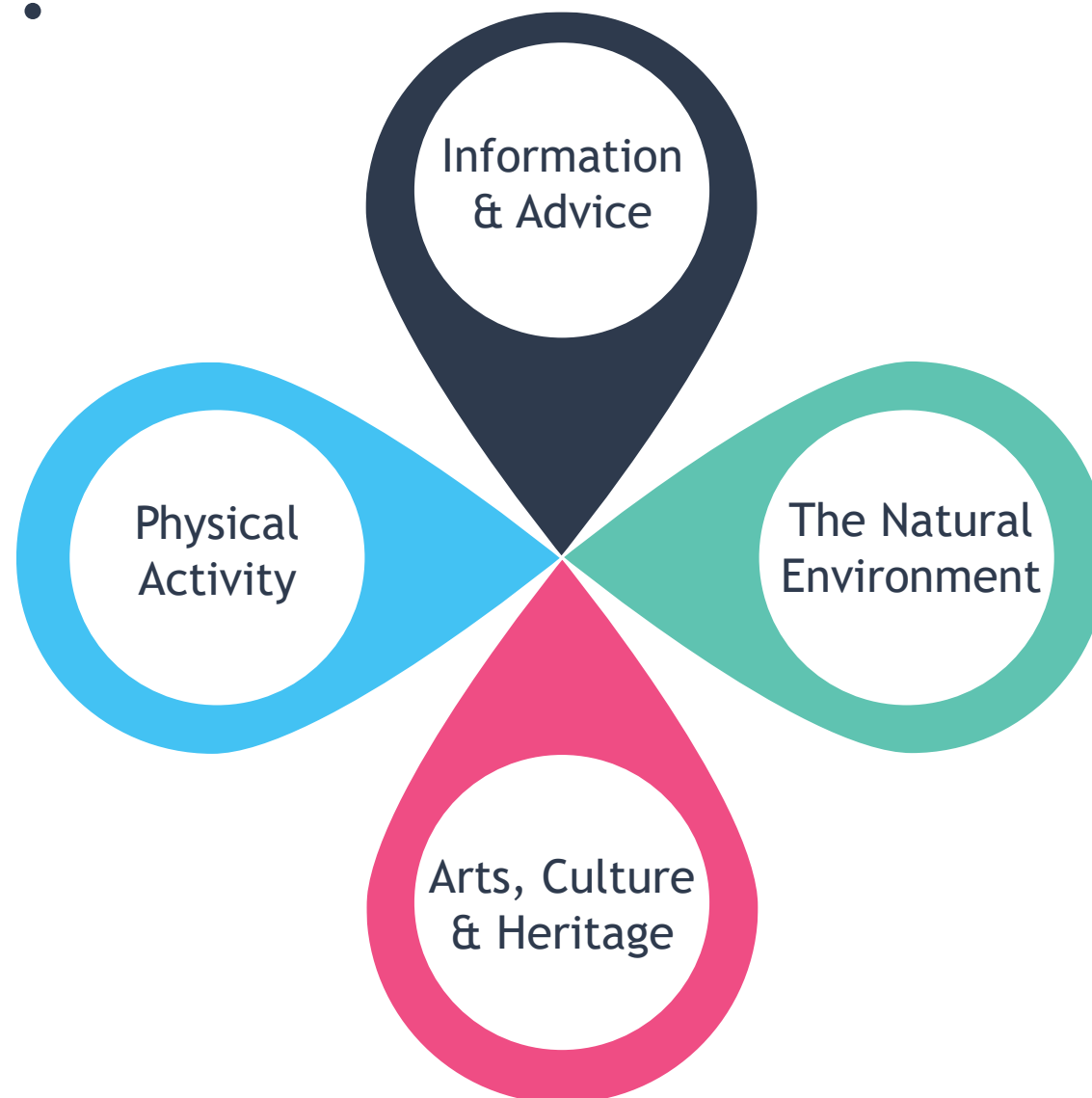
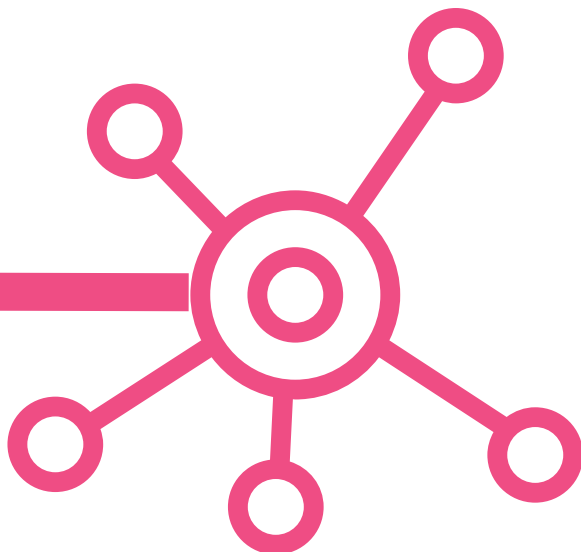
A person who has time to have a “what matters to you” conversation, and co-produce a plan



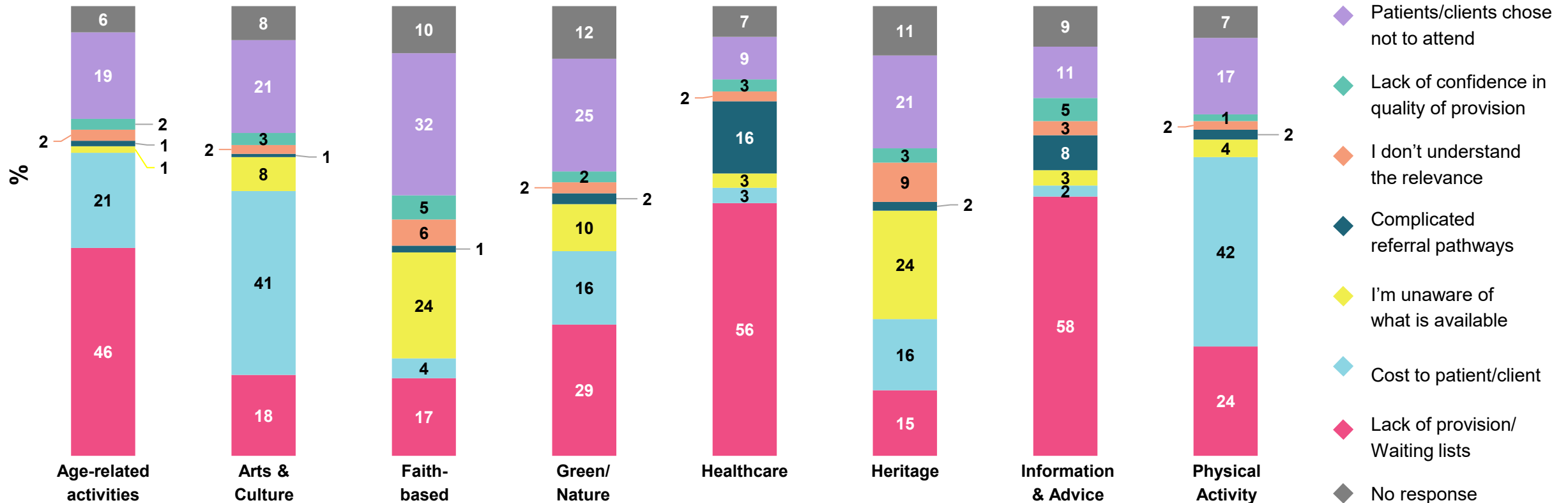
What are they?

Prescription

Opportunities, Activities
& Support Services that
help to improve
someone's wellbeing



Lack of provision / waiting lists is the most common referral barrier

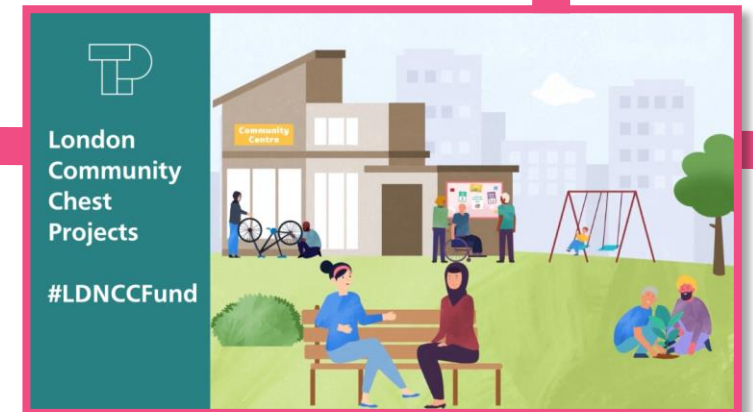
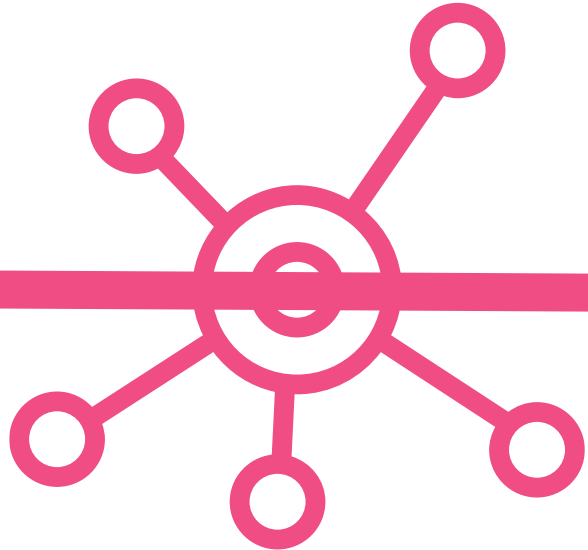


- The most cited barrier across nearly all types of provision is lack of provision/waiting lists, which is particularly a barrier for: Information & Advice Services, Healthcare Services, and Age-related Activities. This suggests that demand for these services exceeds supply, causing delays/access issues.
- Physical Activities and Arts & Culture Activities are particularly affected by cost barriers.
- Being unaware of what's available is particularly a barrier in relation to: Faith-based, Heritage, and Green/Nature Activities.
- Referral pathways are a major barrier for Healthcare Services, indicating that administrative and procedural barriers may prevent effective referrals.
- Heritage and Faith-based provision have the highest concerns about relevance, and some of the highest concerns about quality, suggesting scepticism about effectiveness or suitability.
- Across all categories, clients choosing not to attend is a notable barrier, especially for: Faith-based and Green/Nature Activities.

What do they need?

Prescription

Opportunities, Activities
& Support Services that
help to improve
someone's wellbeing



Targeted Groups

What / who does
the data identify

Pro-active Social Prescribing

- **Proactive social prescribing** is more than just social-prescribing, it goes one step further.
- Proactive social prescribing identifies **targeted groups** with unmet needs to offer improved access to social- prescribing so no individual goes without the support they require.
- In March 2022 in the **Directed Enhanced Service** for Personalised Care announced that proactive social prescribing was to be part of a broader social prescribing service. It identified that **Pro- active SP will**, support tackling health inequalities as well as ICS integration and population health management approaches.



Pro- active social prescribing relay who is in your team?



Primary Care

Personalised care roles
delivering group
sessions which includes
PA to identified target
groups.

Working with a provider/
small consortium of PA
providers working with
the MDT, ensuring
supportive activities and
encouraging further
participation, via self care

Provider /small
consortium of PA
providers working with
wider community
partners and
introducing and
supporting people on
their movement
journey.



Data Flow- Focus Health utilisation and deprescribing

CYP- Connected to Thrive

The Big Five

- **Embed CYP social prescribing into national strategies and partnerships .**
- **Grow the workforce across the system.**
- **Support and deliver high quality social prescriptions and systems**
- **Investment, to create sustainability.**
- **Build awareness**



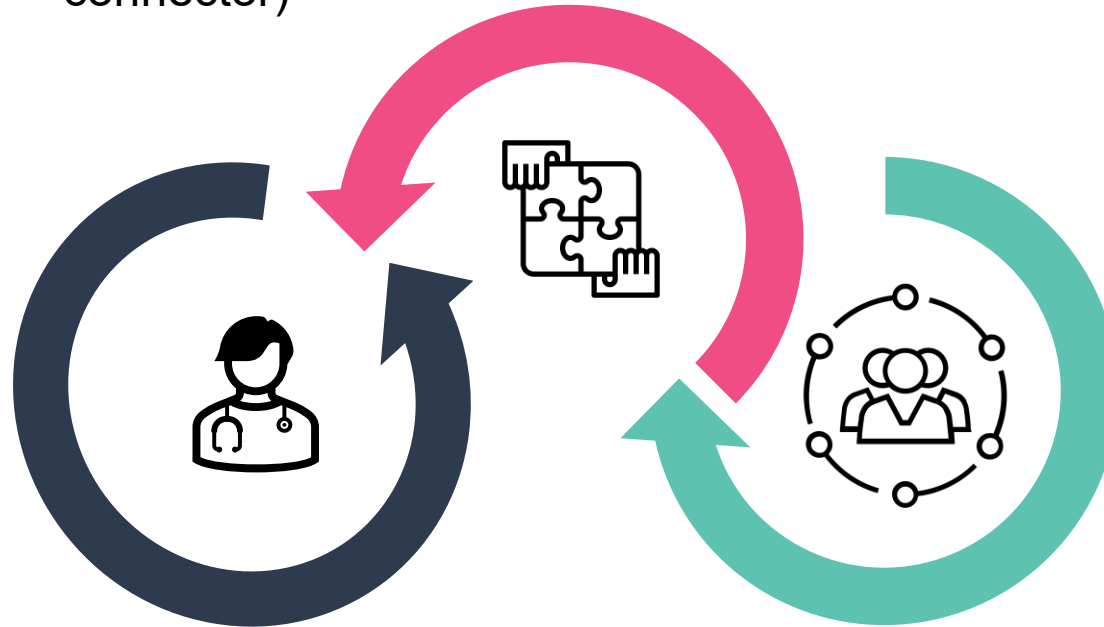
It's a very
different
approach to the
adult approach



Whole System Approach

The people giving people time to co-producing the prescription through shared decision making (i.e the Link Worker, Youth Worker, Mental health connector)

The people making the referral



People providing & supporting the social prescription

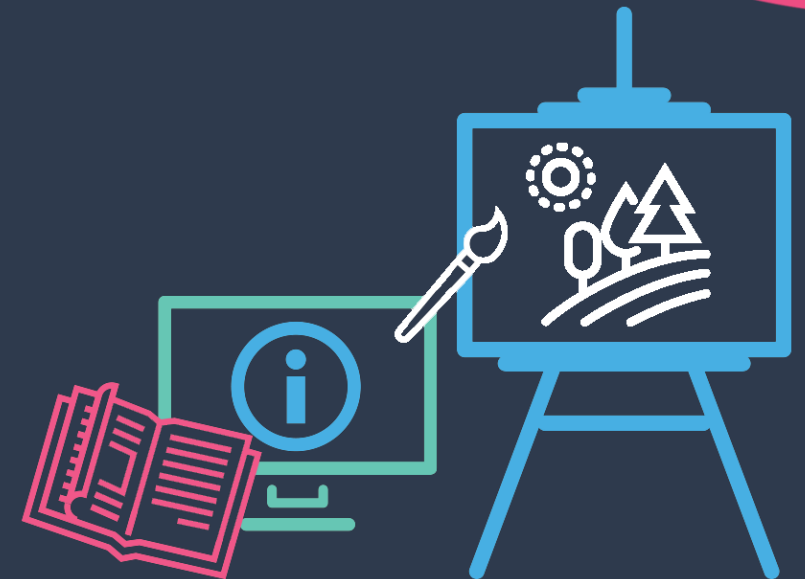


Multiple organisations working together to ensure seamless pathway



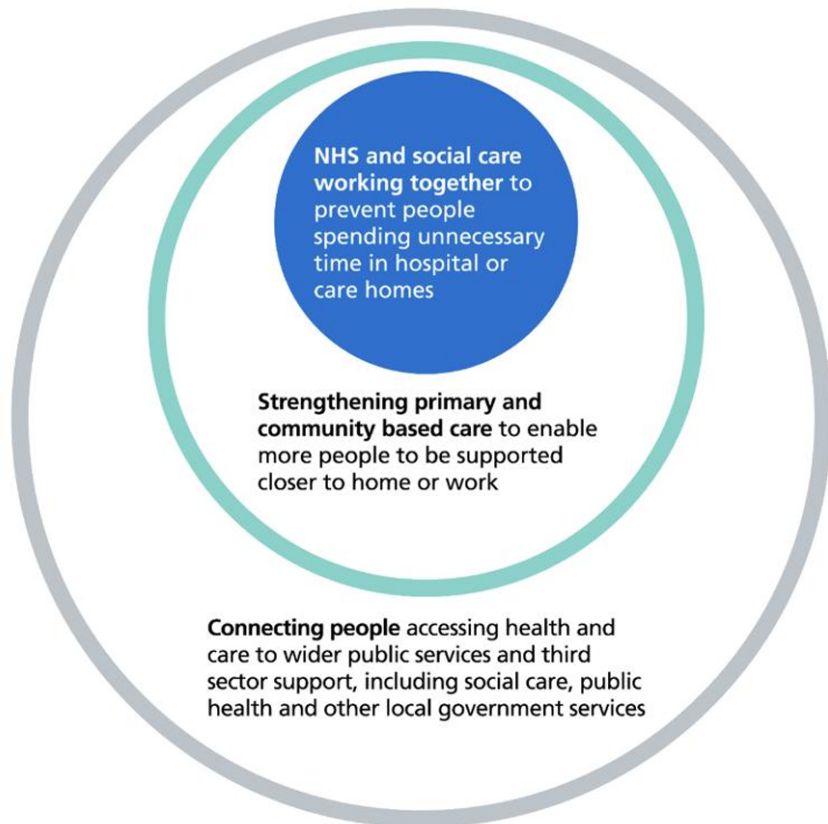
National
Academy
for Social
Prescribing

What's Emerging



NHS England Neighbourhood Health Guidance

Diagram showing the aims for all neighbourhoods over the next 5 to 10 years



Social Prescribing is listed as a function of neighbourhood multi-disciplinary teams (MDTs) with SPLW included in the list of team members

The transition to a neighbourhood health services will happen over the next 5 to 10 years as set out in this diagram. **Social Prescribing has an important contribution to make in all three.**

Focus in 25/26 on **priority social groups** including:

- Adults with moderate or severe frailty
- People of all ages with palliative care needs
- Adults with complex physical disabilities or multiple LTCs
- CYP who need wider input
- High intensity users

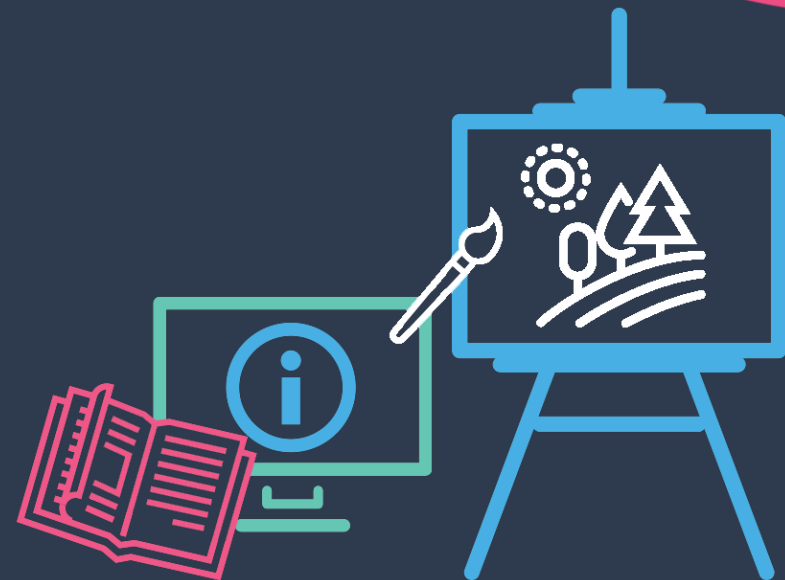


National Academy for Social Prescribing



Thank you!

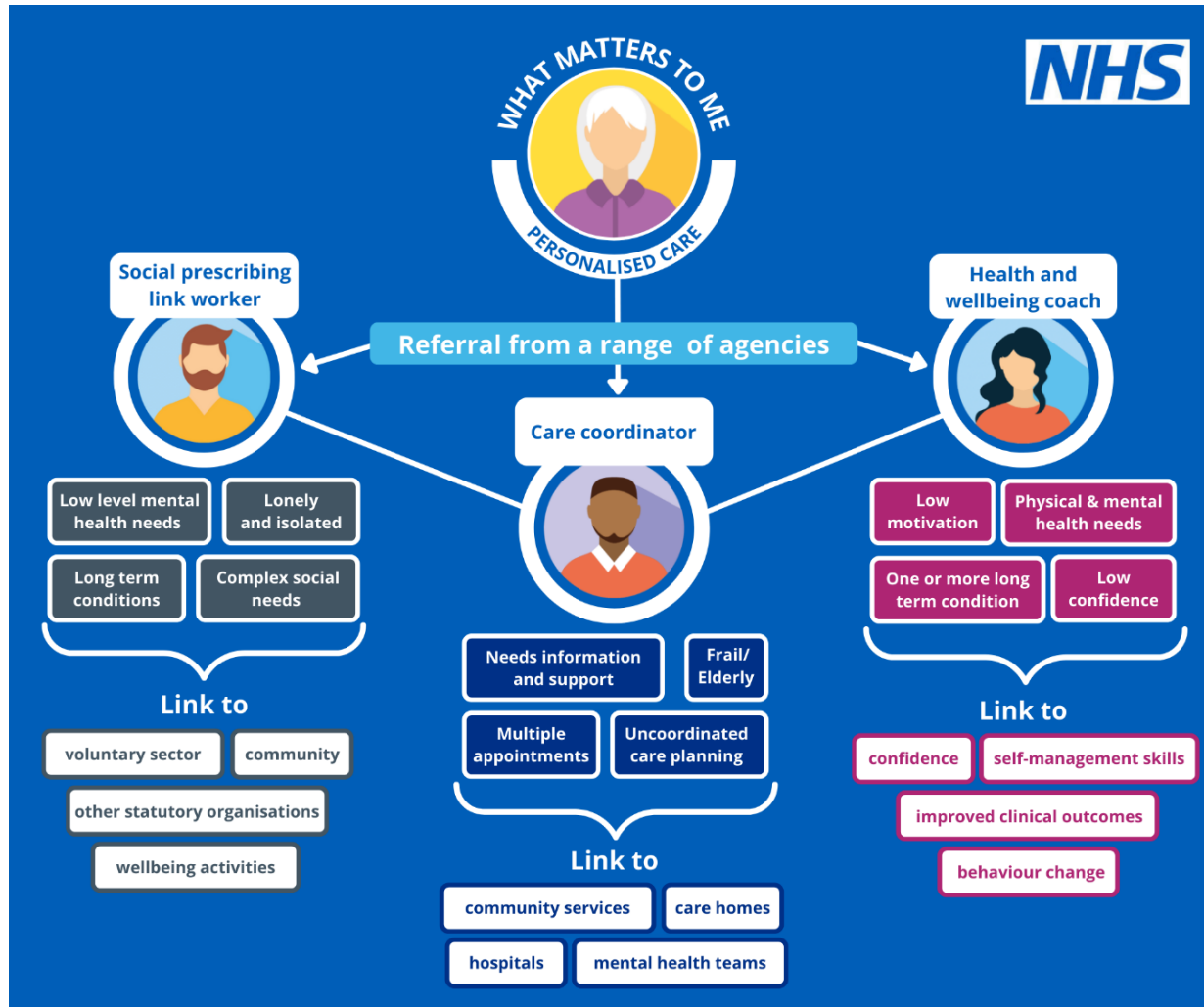
Tracey.lines@nasp.info



Personalised Care Roles



Personalised Care Roles



- Care Coordinator
- Health & Wellbeing Coach
- Social Prescribing Link Worker
- Children & Young People (CYP) Social Prescriber
- *And even more!*

Caroline Goodchild

Social Prescriber – Hatfield Primary Care Network



Social Prescribing

“Patients with social prescriptions get better and feel better faster than those treated with medicine alone.”

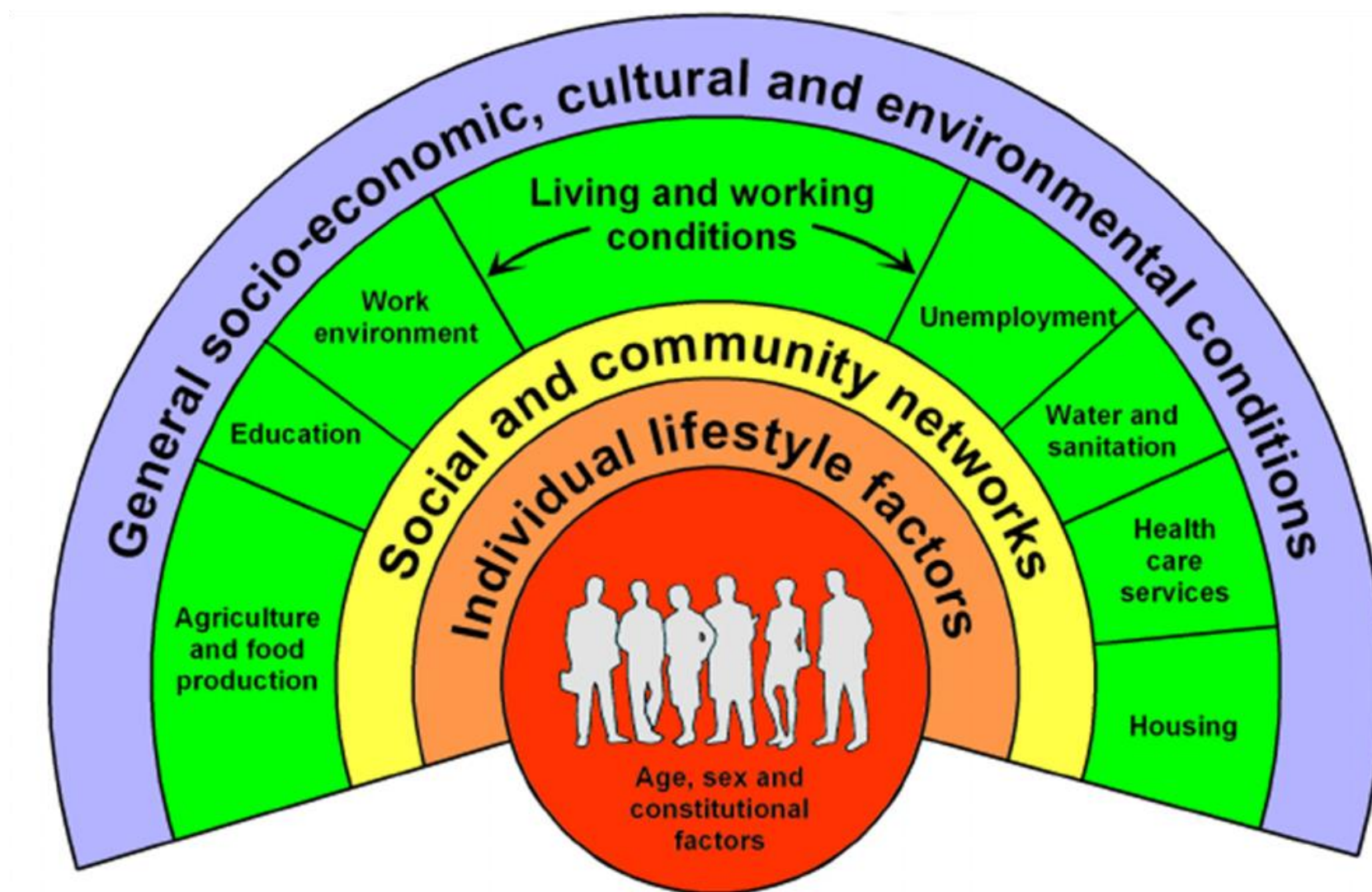
Person centred,
Can be complex at times,
Ever changing dependent on patient
needs.



Who are we?

- We are a team of 5 covering 4 Hatfield surgeries (55,000 patients).
- We work directly with between 800-1000 patients per year – diverse range of patients.
- We work in the community in a variety of settings linking patients to activities and support locally.
- We work closely within our PCN team.

The wider determinants of health



Source: Dahlgren and Whitehead, 1991



Social Prescribing

- Person Centred (what matters to each individual patient)
- Meet the health and wellbeing of patients for practical and emotional support.
- Working and building strong relationships with other organisations and community groups
- Reduce GP visits
- 5 Steps to mental wellbeing
- Reduce hospital admissions
- Help and support patients to stay safe and independent in their own homes.
- Loneliness - Befriending service, meals on wheels, aids and adaptations, walking service, cleaning and shopping service, AA, groups and activities, ACS referrals, Dementia support, bereavement support
- Safety - Pendent alarms, stay safe and well visits, blue badges, bus passes

Social Prescribing

- Filling out forms and applications (benefits and housing)
- Grants
- Accessing opportunities for volunteering and work
- Working with families and children's services
- We can work with patients for some time, there is no quick fix
- Listening – regular welfare calls and a listening ear
- Have to be creative – using emails or phone if they are agoraphobic
- Meal planning and health walks
- Access to outdoor activities - walking with patients
- Accessing food banks
- Going to the gym, attending badminton or bowling etc

Examples

- Referral for Blue badge for patient – visit at home to then find they have no food, no social contact, hoarding and MH issues,
- Referral for help to access groups – patient was previously homeless since the age of 14, social anxiety, agoraphobia, MH issues – no support and no family – have to work slowly building up trust, opening mail and helping with admin, then going out for walks before considering social groups etc.

Examples

We get patients out walking and talking, Health walks, Lets Cook project, healthy eating group, Park run, local bowling or swimming groups... even no strings badminton and walking football.



Social prescribers are like detectives – once we make contact with the patient (either face to face or on the phone) more issues become apparent – housing issues, hoarding, neglect, frailty, safety issues at home, lack of food, loneliness, social isolation, anxiety, help with bills etc.

Often these issues are not part of the initial referral.

Ines Pereira

Children & Young People Social Prescriber

Watford FC Community Sports & Education Trust



**COMMUNITY SPORTS
& EDUCATION
TRUST**

WatfordFC
community



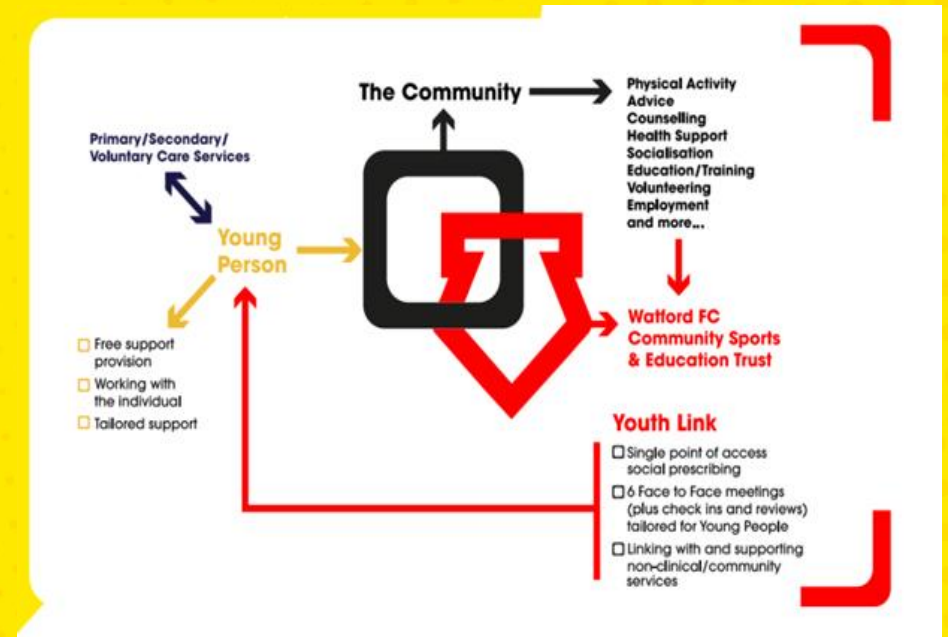
**COMMUNITY SPORTS
& EDUCATION
TRUST**
REGISTERED CHARITY NO: 1102239



Youth
Link

Youth Link

- Youth link is a social prescribing service that supports young people aged 10-18
- It is a Tier 2 intervention/prevention programme
- Providing ongoing support for paediatrics department at WGH
- Delivered at Watford FC Stadium



Our Organisational Chart

Programme Aims

- ✓ Provide Young people with support and direction
- ✓ Educate young people's awareness of mental health
- ✓ Empowering young people to understand and how to cope with daily life stresses



Who is Youth Link For?

- ✓ Children and young people aged 10–18 years old.
- ✓ Individuals registered with a doctor within the West Herts area (Watford/Three Rivers/Dacorum/Hertsmere/St Albans).
- ✓ Low to moderate mental health doubts, issues and/or condition.
- ✓ Inclusive for children and young people with SEND Needs.



The Sensory Room



'I'm excited for these sessions because I get to look at the pitch, but I can also talk to you about things that I don't want my parents to know.' (Child A)



'I had three talking therapy sessions today and I have cancelled them as I prefer to see you, you make it an enjoyable environment' (Child B)

Louise Reilly

Broxbourne Alliance Primary Care Network – Health & Wellbeing Coach



Case Studies



Case Study 1:

Ines Pereira

Watford FC Community Sports & Education Trust



**COMMUNITY SPORTS
& EDUCATION
TRUST**

Case Study S:

Child S was referred into youth link by a CAMHS crisis practitioner as he had presented himself in A+E with concern about persistent low mood, suicidal thoughts without action plan or intent.

At school he experiences bullying by his peers and doesn't have many friends. This in turn has caused many panic attacks and anxiety due to his low self-esteem and negative self-image.

Child S Shared his love of football and wanting to play again to his link worker. She then signposted him to Kicks where Child S attended a football session on a weekly basis. This helped Child S tremendously by improving his relationships, self-esteem and confidence.

Child S is currently studying Coaching at West Herts college and is looking at work experience options with the trust.



Case Study 2:

Louise Reilly

**Broxbourne Alliance Primary Care Network –
Health & Wellbeing Coach**



Recommendations & Next Steps



Upskilling Opportunities

Feel more confident and knowledgeable on the individual needs of your participants by upskilling with training for long-term health conditions

e.g., mental health, MSK, respiratory, diabetes, dementia etc

Training/Resource	Link	Category
Moving More – Condition Specific Resources	https://www.movingmore.co.uk/resources/	Long Term Health Conditions
Activity Alliance, Disability Inclusion elearning	https://learn.activityalliance.org.uk/catalog?pagename=eLearning	Disabled People
Live Longer Better Masterclass Webinars (Active Ageing)	https://www.livelongerbetterinherts.co.uk/previous-masterclass-webinars/	Older Adults
We Are Undefeatable in Hertfordshire	https://www.youtube.com/watch?v=cjUXavzwCPU&list=PLoe2ciCUXT4eYY-RBjYIoDIEkOV2krDdb	Long Term Health Conditions
UK Coaching/Mind Mental Health Awareness for Sport & PA	https://www.ukcoaching.org/our-courses/courses/elmaspa3/	Mental Health
Macmillan Cancer Support, PA Resource	https://www.macmillan.org.uk/cancer-information-and-support/treatment/preparing-for-treatment/physical-activity-and-cancer	Cancer



Understanding the Participant

This could be achieved via a pre-activity self-assessment questionnaire or use the questions below in conversation:

1. Do you have any health conditions or injuries we should be aware of when planning activities?

2. How would you describe your current level of physical activity?

Not active at the moment

Lightly active (short walks, light stretching)

3. Are there any activities or movements you find difficult or need to avoid?

4. Have you taken part in any community activities, exercise classes, or groups before?

Yes, regularly

Occasionally

Not yet

5. What types of activities have you enjoyed in the past (if any)?

6. How motivated do you feel right now to take part in activities?

Scale 1 (Not motivated at all) to 5 (Very motivated)

7. What are the main reasons you'd like to join these sessions? (tick all that apply)

To improve my physical health

To improve my mental wellbeing

To meet new people and connect socially

To build confidence

To try something new

Other (please say)

8. What would a successful experience in these sessions look like for you?

9. Do you have any worries or concerns about joining?

10. Do you have any access, mobility, or communication needs we should be aware of?

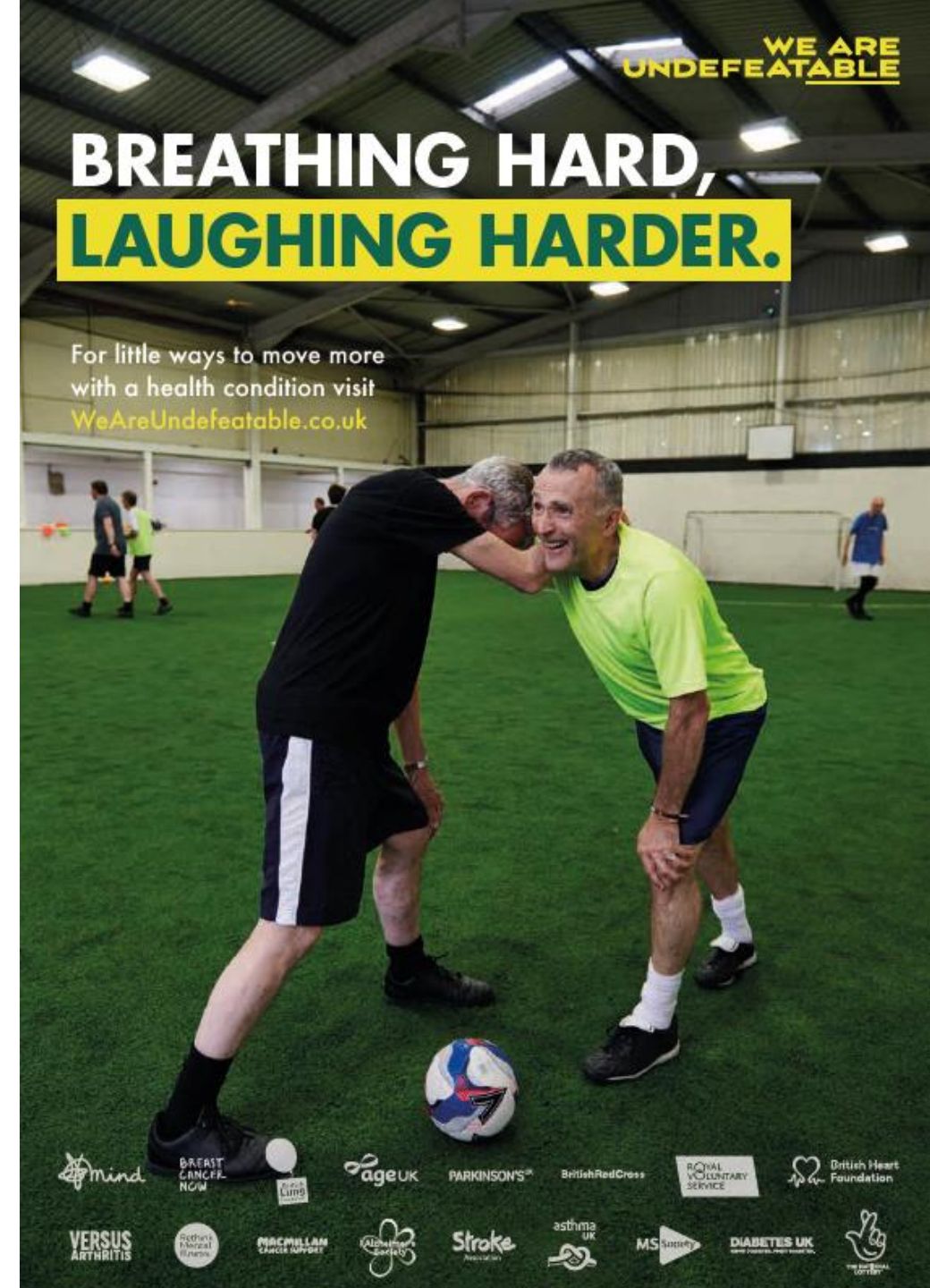
11. Is there anything that would make it easier for you to take part? (e.g., transport, timing, support needs)

Promotional Messaging

General Guidelines:

- Age friendly promotional messaging advice
- Health literacy - not too much jargon
- Think about your imagery
- What is the ask? Is it just for activity only or can people volunteer with you...?
- User friendly comms
- Remember that there is an average reading age of 8-9yrs
- Moving to a model that is more 'community/fitness/wellbeing/social'

Herts Sport & Physical Activity Partnership



Inclusive Activities

Designed to help you remove barriers and make physical activity inclusive to

Activity alliance – Disability inclusion

Access Sport – Disadvantaged & Disabled Young People

Buddle – Advice for all club/community organisations

Mind – Mental Health

Neurodiverse Sport – Neurodiversity

UK Coaching – Clubs Sector

Women in Sport – Women/Girls

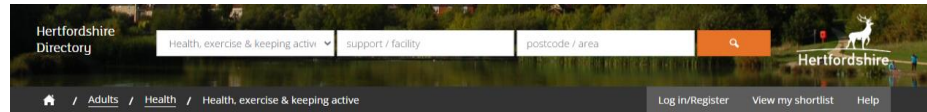
British Blind Sport – Sight Loss

UK Deaf Sport – Deaf People



Referral Pathways: where to promote your activities:

Herts Directory: <https://directory.hertfordshire.gov.uk/>



Health, exercise & keeping active

The [Moving More](#) website has been designed to help people in Hertfordshire be more physically active.

[Hertfordshire Health Walks](#) are also a great way to increase your physical activity with FREE walks for all interests and abilities, including gentle walks for beginners. Visit our website to find a walk near you.

[View all content in this category](#)

Personal Training

Exercise Classes

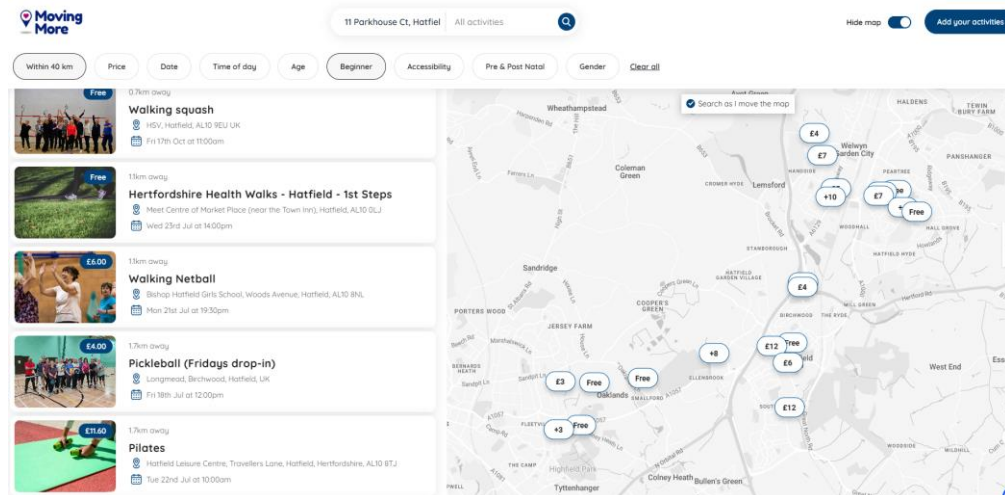
Sport

Sports Facilities

Walking and Cycling

Weight Management

Moving More Activity Finder: <https://www.movingmore.co.uk/>



East Herts Frontline: <https://eastherts.hertsfrontline.org.uk/>

Broxbourne Frontline: <https://broxbourne.hertsfrontline.org.uk/>



[MAP](#) [ABOUT](#) [LIBRARY](#)

FIND LOCAL SUPPORT FAST!

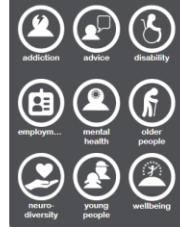
[SIGN IN / REGISTER](#)

HELP NEEDED

POSTCODE OR TOWN

SEARCH

QUICK VIEW



Herts Help: <https://www.hertshelp.net/hertshelp.aspx>

hertshelp
call - email - text - online

0300 123 4044
info@hertshelp.net

Our Services
For professionals

HertsHelp

We're here to listen and help you find independent support, guidance and information to get the most out of life.

Struggling to cope



Care and carers



Living healthier



Transport, bus passes and blue badge



Home services and equipment



Cost of living



Community Assets

Libraries

Community Centres

Faith Centres

GP Practices

Parks, green spaces

Blue spaces



Transport

Community Transport Hertfordshire:

- To support people to live independently and access services through the use of community transport.
- Search and Filter functions to find local community transport services within Hertfordshire.
- <https://www.communitytransportherts.org/>



SEARCH

Find All
Car
Schemes

Find All
Door to Door
Minibuses

Find All
Minibus
Hire

Find All
Community
Buses

Filter Mileage Distance



Transport

HertsLynx:

- Hertfordshire County Council's Demand Responsive Transport (DRT) service, offering a flexible way to travel by bus.
 - Passengers choose from a variety of pick up and drop off locations across Herts.
 - Passengers can either use the app, booking website or phone to make a booking:
- **Download the HertsLynx App available on Android Playstore and Apple Store**
 - **Online: Hertslynx (bookings.hertslynx.co.uk)**
 - **By phone 01992 555513**
 - **<https://www.intalink.org.uk/hertslynx>**



Cost of Sessions



Discount

Do you offer free taster sessions or discounts to make sessions affordable?

payment options

Can people pay in installments if they need to?

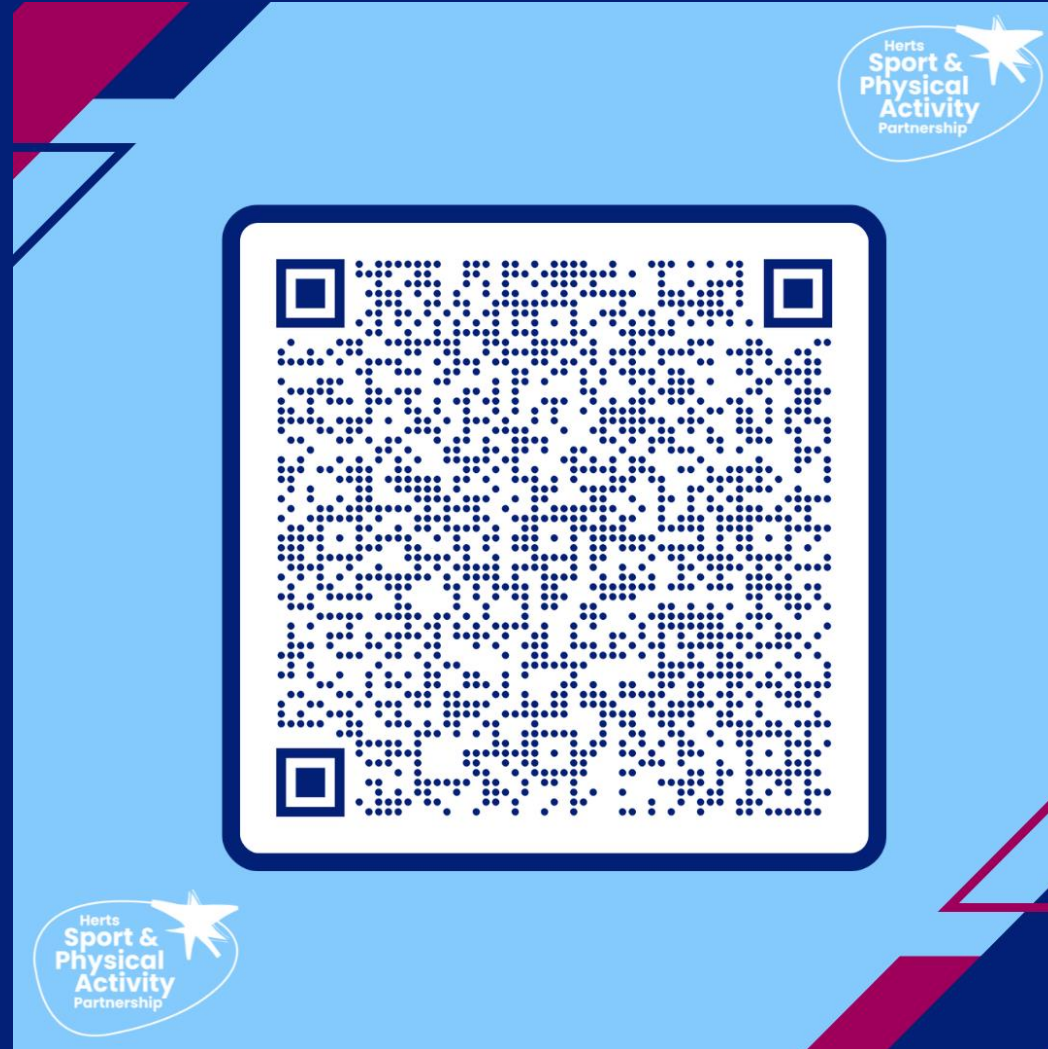
commitment

Payment options that allow for flexible attendance if someone cannot attend every week

Questions?



Feedback Form



Please take some time to fill out our feedback form with your thoughts on today's webinar

Thank you



Contact details:

General – hsphealth@herts.ac.uk

Thomas Horey – t.horey2@herts.ac.uk

Zoe McKeating – z.mckeating@herts.ac.uk

