

**PUBLICATION** 

# Cabinet paper: National framework for social prescribing

Cabinet paper CAB(22-23)86

First published: 18 August 2023

Last updated: 18 August 2023

### **Contents**

**Decision required** 

**Summary** 

**Context** 

**Impact** 

**Proposal** 

**Milestones** 

**Communications and publication** 

**Decision required** 

# **Decision required**

### Cabinet is asked to:

- Agree the proposed structure of the National Framework for Social Prescribing
- Note the timescales for its development at paragraph 23.

# **Summary**

- 1. Social prescribing is an umbrella term that describes a person-centred approach to linking people to community-based, non-clinical support. It is a way of connecting people, whatever their age or background, with their community to better manage their health and well-being. It aims to empower individuals to recognise their own needs, strengths, and personal assets.
- 2. From a health perspective the case for non-medical support through social prescribing is clear. Social prescribing can improve mental wellbeing, reduce anxiety and depression, enhance self-esteem, reduce loneliness and isolation; it can play a vital role in maintaining healthy body weight, and it can help people live better, for longer.
- 3. Within Wales, as in other countries, there has been a lack of standardisation and consistency in the approach to social prescribing. This lack of standardisation has resulted in the potential confusion amongst both public and the workforce who deliver or encounter social prescribing on the benefits it can offer; and impaired communication between sectors, professionals and with the public.
- 4. To provide reassurances on the consistency and quality of delivery across

Wales and to respond to the issues raised as part of the consultation exercise, this paper seeks agreement on the proposed structure of the **National Framework for Social Prescribing**, which outlines the model of social prescribing in Wales, helps to develop a common understanding of the language used to describe social prescribing, and ensures consistency of delivery regardless of the setting.

- 5. Support for the proposed national framework and supporting work programme, will allow Welsh Government to meet its Programme for Government commitment to introduce an all-Wales framework to roll out social prescribing to tackle isolation, and provide effective, high-quality, and sustainable healthcare.
- 6. There are existing funding streams that support social prescribing, for example the Health and Social Care Regional Integration Fund (RIF), more information of which can be found in the section on Finance Requirements. The proposed national framework for social prescribing does not intend to dictate how social prescribing is delivered in different communities, rather it will agree a common vision of social prescribing in Wales and support its growth by setting out effective, high-quality standards across the 'whole system'.

### **Context**

- 7. Social prescribing across Wales is not new. Social prescribing interventions have been developed and established in a bottom-up way across Wales, with individual contracted providers, clusters involved in health and care, third sector and statutory organisations developing different delivery models.
- 8. It is woven into the very fabric of what Welsh Government does in terms of empowering people and communities, whether it's part of the National Clinical Framework, the successor to 'Together for Mental Health', or 'Connected

Communities' our strategy to tackle loneliness and isolation.

- 9. Social prescribing can support improved mental wellbeing, the importance of which will be reflected within the mental wellbeing chapter of the successor to 'Together for Mental Health', currently in development.
- 10. In keeping with the Social Services and Well-being (Wales) Act 2014, social prescribing has prevention at its core, contributing to a reduction in loneliness and isolation, delaying the development of people's needs for care and support; reducing the needs for care and support of people who have such needs; and enabling people to live their lives as independently as possible.
- 11. Whilst the primary care model of social prescribing, in which individuals are referred from general practice, is the dominant model in some systems, more community-based models have emerged in Wales. Within Wales, social prescribing practitioners are not just located in health care settings, but also sit within partner organisations. For example, third sector organisations, housing associations, local authorities, or educational settings. Sources of referrals into social prescribing practitioners are also cross-sectoral and not limited to healthcare/primary care.
- 12. Officials engaged with almost 1,000 stakeholders to develop a Welsh model of social prescribing that was issued for consultation. The consultation, which ran 28 July to 20 October 2022, received over 190 responses, which together with feedback received via online stakeholder events held during the consultation period, has directly shaped the proposed national framework. In addition, there has been a series of positive and constructive meetings between officials across Government to understand and develop potential areas of collaboration.
- 13. A baseline study of social prescribing in Wales in 2021, showed there had been a clear year on year increase in referrals and use of social prescribing over the previous 3 years from around 10,000 in 2018/19 to just over 25,000 in

2020/2021. However, there is inconsistency in the number of organisations in each local authority providing social prescribing services across Wales and variability in the approaches used. Our consultation exercise on the proposed national framework also found a lack of clear leadership, cohesion and/or collaboration amongst partners in social prescribing, with more effective partnership working needed to ensure sustainability and to avoid duplication.

14. The Deputy Minister for Mental Health and Wellbeing held a series of ministerial bi-lateral meetings to raise awareness of the proposed framework. Officials will follow-up actions raised at the bi-lateral meetings regarding joint working to strengthen work programmes and development of the proposed framework. For example, topics raised include the potential use of Invest to Save, the use of time credits, links to the Higher Education sector, and the use of social prescribing within the farming community.

# **Impact**

- 15. Social prescribing aims to empower individuals to recognise their own needs, strengths and personal assets, and connect with their own communities to access support which will help to improve their health and wellbeing. For example, we know that people who are lonely and/or socially isolated are at greater risk of premature death, of being inactive, heart disease, stroke and high blood pressure. They are also more likely to experience depression, low self-esteem, sleep problems and an increased response to stress.
- 16. Through its early preventative approach, social prescribing could help ease the burden on more front-line specialist services. There is variable evidence to suggest that social prescribing reduces the footfall to GP surgeries by 15% to 28% (Social Prescribing: an alternative approach to reduce the reliance on the NHS and social care services in Wales). One review reported an average 28% reduction in demand for GP services following referral (A review of the

evidence assessing impact of social prescribing on healthcare demand and cost implications). Results ranged from 2% (Wellspring Healthy Living Centre, Bristol) to 70% (Hackney Well Family Service) reduction in unnecessary GP visits. A mixed methods study found that patients used primary care services less, with a reduction of 25% in appointments (The social cure of social prescribing). Findings from the evaluation of the Rotherham Social Prescribing pilot pointed to an overall trend of participants' reduced use of hospital resources before and after social prescribing. These included: inpatient admissions reduced by as much as 21% and accident and emergency attendances reduced by as much as 20% (The Social and Economic Impact of the Rotherham Social Prescribing Pilot).

- 17. The evidence varies so much because the impact of social prescribing depends on the type of model used, the social prescribing practitioner and their backgrounds, the locality, and the assets available within the community (Social Prescribing: an alternative approach). Given that estimates show around 20% of patients consult their GP for what is primarily a social problem (Social prescribing could help alleviate pressure on GPs), the potential for social prescribing to reduce impact on frontline services is evident if alternative routes are more easily and widely available. The proposed core data set will allow us to strengthen the evidence base and inform 'invest to save' options.
- 18. We know there is a crucial link between health and wellbeing and employability, and there is the potential for increased availability of social prescribing to help people secure employment by creating opportunities to improve health and wellbeing; improving skills, confidence and networking; and directly support people to access volunteering opportunities and organisations who can help navigating job application processes.
- 19. There is potential for social prescribing to support people whilst they are on a waiting list. There are already examples in local health board services where social prescribing related activities such as art classes have been used to improve socialisation and feelings of loneliness and started to introduce effective

pain management techniques in a peer group setting.

# **Proposal**

20. The proposed format of the national framework for social prescribing is as below, further detail on the component parts can be found in Annex B.

5 complementary guidance documents:

- 1. Explainer video and Glossary of Terms
- 2. Skills competency Framework for social prescribing practitioners
- 3. National specification for social prescribing
- 4. National standards for community assets
- 5. Core data set

Underpinned by 4 rolling programmes:

- i. Awareness raising programme
- ii. Skills programme
- iii. Improving technology programme
- iv. Research and evaluation programme
- 21. A full Integrated Impact Assessment (IIA) has been completed to provide a rounded assessment of the impact and development of a national framework for social prescribing. The IIA will be updated to reflect feedback from the consultation exercise and published alongside a written statement on the national framework this summer subject to cabinet agreement.
- 22. Issues concerning inequality and inequity will be built into all aspects of the framework, for example within the competency framework there are several areas of skills and knowledge for social prescribing practitioners. These include knowledge of the impact of social inequalities on health; and working in a

culturally competent way that values diversity; equality and inclusion; respecting the beliefs, practices and lifestyles of people who use social prescribing services; and how these may affect their experience of the service. Additional steps will be taken to collect data on groups accessing social prescribing so that we could better understand who is and importantly who isn't accessing social prescribing so appropriate targeted action takes place.

### **Milestones**

23. Subject to approval from Cabinet regarding the proposed format of the national framework for social prescribing, planned milestones to include:

### **Completion date of milestones**

- Summer 2023: Written Statement setting out plans for the national framework and supporting work programmes
- Summer 2023: Publication of consultation feedback analysis report

### National framework complementary guidance

- Autumn 2023: Explainer animation
- Autumn 2023: Glossary of Terms
- Summer 2024: National specification for social prescribing
- Autumn 2023: Competence framework for social prescribing practitioners in Wales
- · Summer 2024: Core data set

### Ongoing work programmes

- Ongoing: Awareness raising programme
- · Ongoing: Skills programme
- Autumn 2024: Improving technology programme
- · Ongoing: Research and evaluation programme

# **Communications and publication**

- 24. The launch of the national framework of social prescribing will comprise:
  - Deputy Minister for Mental Health and Wellbeing Written Statement summer 2023
- ii. Publication of the consultation feedback analysis report and impact assessment
- iii. Explainer video and examples for use on Welsh Government social media channels of what social prescribing is and what the national framework will mean for people
- iv. National conference in autumn 2023 showcasing the benefits of social prescribing, and promotion of the national framework for social prescribing including showcasing developed components of the framework.

# **Decision required**

Cabinet is asked to agree the proposed.

