

Helping patients to stay healthy by prescribing less

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 @JamesCSanderson

@Pers_Care

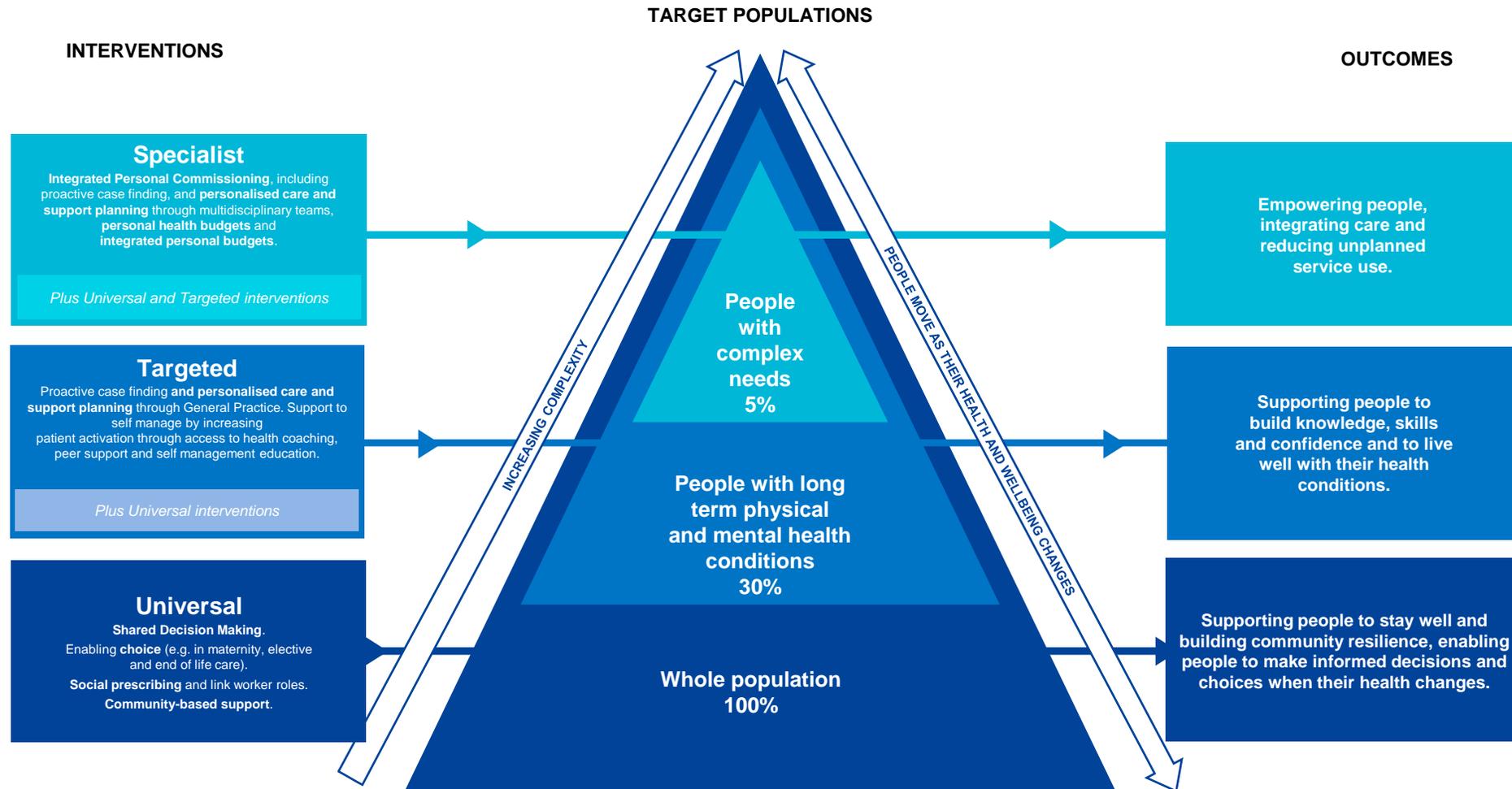
@NASPTweets

NHS England and NHS Improvement

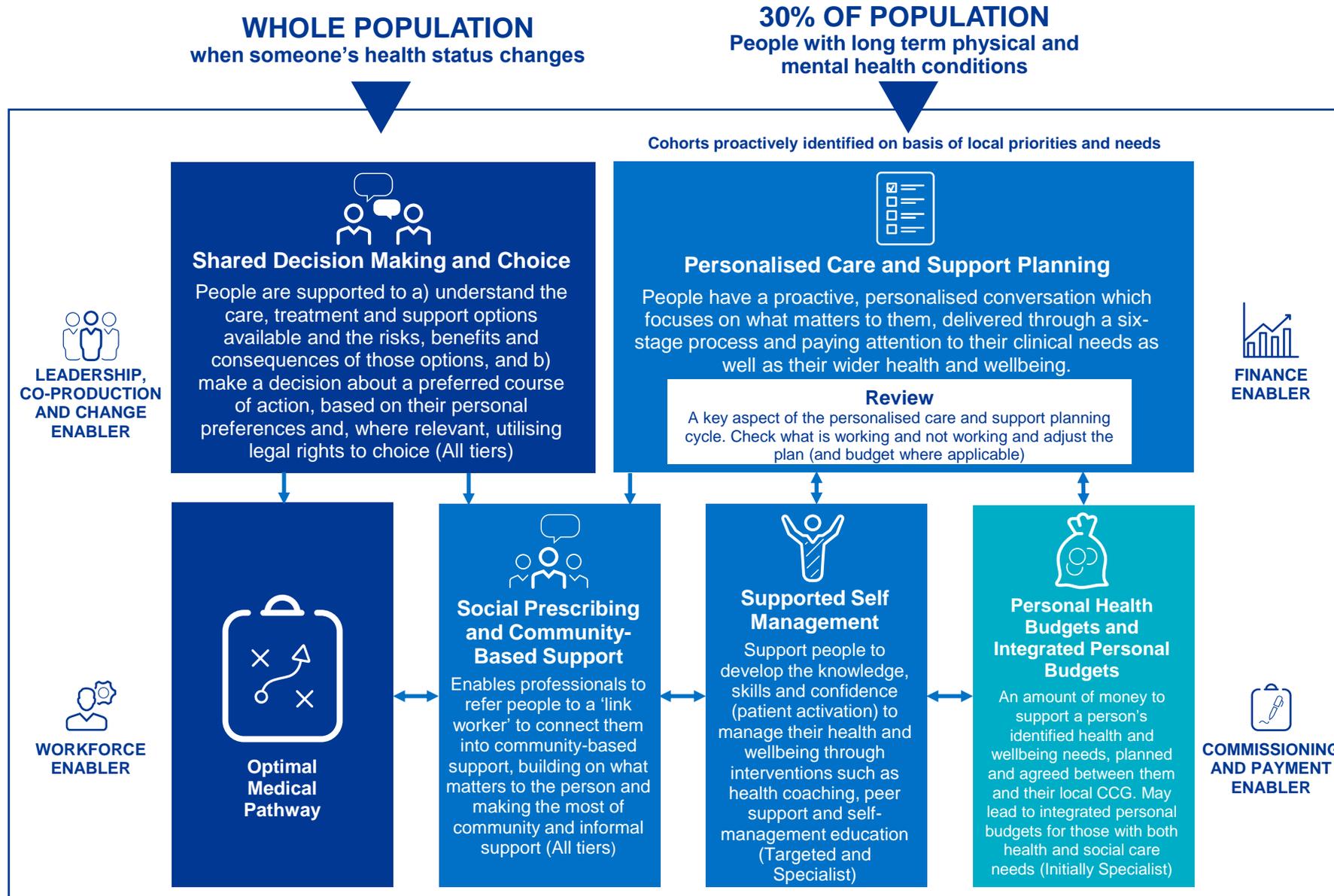


Comprehensive Model for Personalised Care

All age, whole population approach to personalised care



Personalised care operating model



What is social prescribing?

Social prescribing enables all local agencies to refer people to a link worker.

Link workers give people time and focus on what matters to the person as identified through shared decision making or personalised care and support planning. They connect people to community groups and agencies for practical and emotional support.

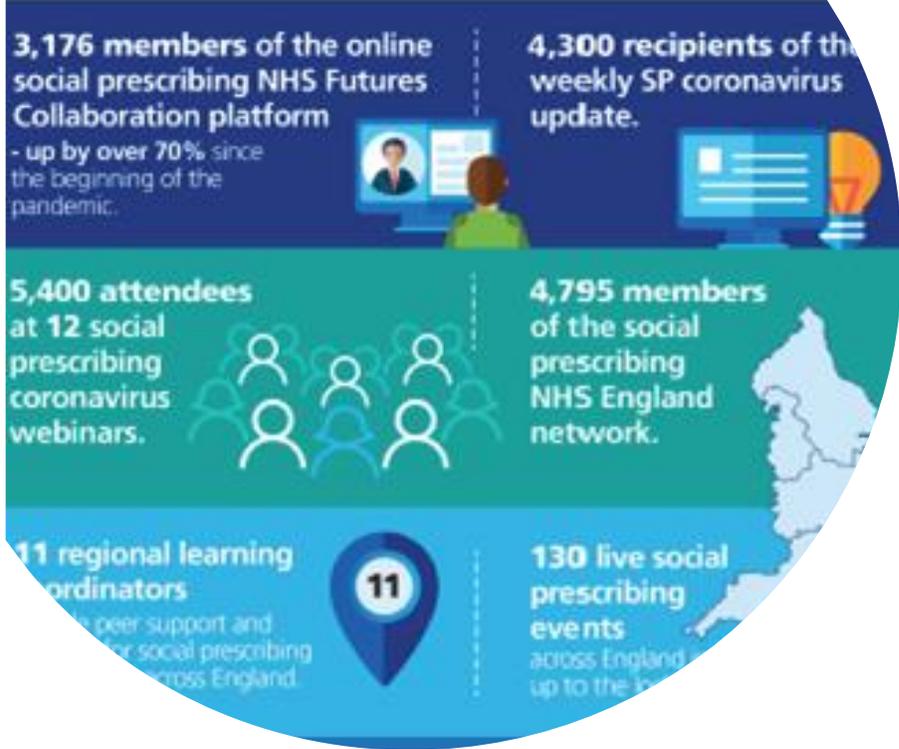
Link workers collaborate with local partners to support community groups to be accessible and sustainable and help people to start new groups.



Social prescribing and community based support: not just a 'nice to do'

- **Manifesto commitment:** 26k extra workforce roles in primary care by 2023, inc **4.5k SP link workers**
- **NHS Long Term Plan (LTP):** Universal Personalised Care across the country reaching **2.5m people by 2023/24**. 900k people benefitting from social prescribing by 2023/4
- **GP 5-year contract:** commits to social prescribing link workers as **part of PCNs**
- **PCN Link workers numbers:** **up from 300 to 1,275+** in 9 months - on track to exceed the LTP commitment of 1,000 PCN link workers by Apr 2021
- **COVID 19 pandemic:** SP link workers – part of the operating guidelines for general practice. Referrals since Mch 2020 have surged with demand highest in deprived neighbourhoods*.

*Social Prescribing Observatory. RCGP and University of Oxford.



Support for social prescribing

- [SP and community-based support summary guide](#)
- [Reference guide & technical annexes for PCNs](#)
- [Interactive Welcome & induction pack](#) for SPLWs
- [Handout for practice staff](#) to give to people referred
- [Themed fortnightly webinars](#)
- [Regional Learning coordinators](#) – facilitate SPLW peer support and learning
- [Online learning programme](#) – no charge
- [Online SP collaborative community](#) for SPLWs – access via england.socialprescribing@nhs.net
- Access to GP supervision
- [Competency framework](#) (Oct 2020)
- [Enhanced supervision and support offer](#)



Social prescribing as part of personalised care in PCNs



Social Prescribing Link Workers	Health & Wellbeing Coaches	Care Coordinators
<p>Give people time – over several sessions</p> <p>Help them to identify the wider issues that affect their health & wellbeing,</p> <p>Use personalised care & support planning and health coaching skills,</p> <p>Support people to address their issues by helping them connect with;</p> <ul style="list-style-type: none">• local groups or agencies for practical and emotional support• activities that promote wellbeing e.g. arts, sports, natural environment. <p>Tend to work with people experiencing loneliness, complex social needs, mental health needs or multiple LTCs.</p> <p>Identify and nurture community assets by working with partners such as VCSE, local authority and health</p>	<p>Proactive identification and caseload management of people with LTCs.</p> <p>Guide and support people with LTCs to reach self-identified health and wellbeing goals</p> <p>Use specialist coaching and behaviour change techniques, usually over a number of sessions.</p> <p>Tend to work with people with physical and mental health conditions, and with one or more LTCs such as type 2 diabetes, COPD, or at risk of developing a LTC.</p>	<p>Proactively identify patients who need support to:</p> <ul style="list-style-type: none">• prepare for follow-up clinical conversations with primary care professionals• be actively involved in managing their care and to make choices that are right for them• develop personalised care & support plans• understand and manage their condition, ensuring changing needs are addressed. <p>Provide coordination and access to other appropriate services and support.</p> <p>Tend to work with people with multiple appointments, frail/elderly and people with LTCs.</p>

A social revolution in wellbeing: our strategic plan 2020-23

1

Make some noise - raising the profile of social prescribing

In order to expand social prescribing, we need to get the message out there – that connecting people for wellbeing is vital for people and communities.



2

Finding resources

To develop innovative funding partnerships we need to work with national, regional and local leaders across sectors and invest directly in social prescribing.



3

Building relationships

Social prescribing relies on strong, mature relationships at national and local levels across multiple sectors.

4

Improve the evidence

We need to build a consensus about what we know and don't know, improve accessibility and visibility of evidence.



5

Spread what works

To promote learning on social prescribing and share good practice we need to develop library of open access resource and a national and international collaborative.



Introducing Thriving Communities

Champions the work of local community, faith groups, voluntary organisations and social enterprises supporting communities most impacted by COVID19, working alongside social prescribing link workers.

This programme has four parts and will help share learning, gain new ideas, access funding and develop partnerships across sectors:

- Thriving Communities Network – free and open to all
- ‘Learning Together’ regional support – Jan-July 2021
- Thriving Communities Fund – applications open 23 November 2020
- NHS Charities Together Community Partnerships Grants - £30m available

Thriving Communities is supported by a team of regional voluntary sector partners and national partners: Sport England, Money and Pensions Service, Natural England, NHS Charities Together, Arts Council England and NHS England and NHS Improvement.

Personalised Care Institute



[Access Personalised Care Institute](https://personalisedcareinstitute.org.uk)