

## Key findings from the social prescribing survey conducted with voluntary and community sector organisations in Tower Hamlets 2017

### 1. Introduction

To inform the evaluation of the local social prescribing service, voluntary and community sector (VCS) organisations in Tower Hamlets were asked to complete a survey about their experiences of working with the social prescribing service in Tower Hamlets. This report shares the findings from this survey.

### 2. Methods

The survey was conducted using Survey Monkey. (Refer to **Appendix 1** for a copy of the survey questions). It was distributed by Tower Hamlets CVS<sup>1</sup> to all the VCS organisations on their database on 29 August 2017. The survey ran until 18 September 2017. 47 responses were received from 46 organisations across Tower Hamlets. See **Appendix 2** for a full list of the organisations which responded.

### 3. Results

#### 3.1 Awareness of the social prescribing service

The majority of respondents (74%, 34) had heard of social prescribing. 22 out of the 47 respondents had attended at least one networking breakfast, with many attending more than one. 12 had attended one of the social prescribing forums.<sup>2</sup> Respondents were asked whether they found these events useful for networking, promoting the services they offered and finding out more about social prescribing. Their answers are shown in **Figure 1**. The responses are overwhelmingly positive, but indicate that there may be a need to strengthen the use of networking breakfasts to share information about the social prescribing programme with participants.

**Figure 1: Benefits of attending Social Prescribing Forums and Networking Breakfasts**

Type of forum	Networking	Finding out about the social prescribing programme	Promoting your own service
Networking breakfasts	22 (100%)	10 (45%)	19 (86%)
Social prescribing forums	12 (100%)	9 (75%)	10 (83%)

#### 3.2 Referrals from social prescribing

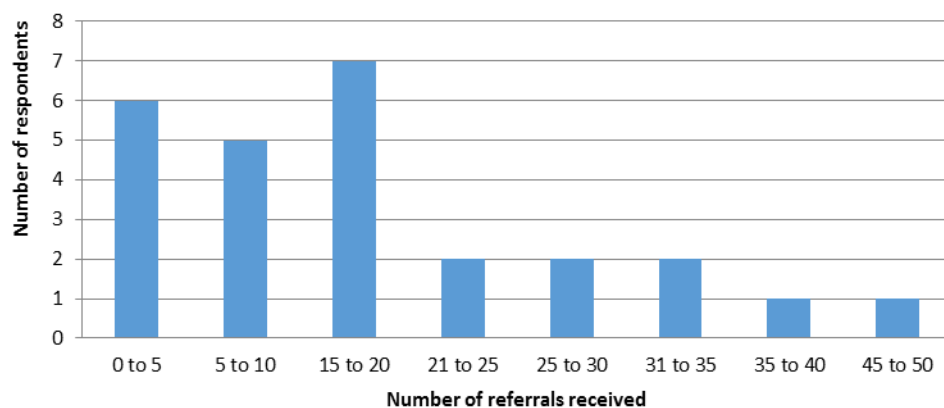
64% (30) respondents had received referrals from social prescribing. Of the 30 organisations that had received referrals, 26 were able to give an estimate of how many referrals they had received since the start of the borough-wide social prescribing programme in October 2016 (**Figure 2**). There

<sup>1</sup> Tower Hamlets CVS, Council for Voluntary Service <https://thcvs.org.uk/>

<sup>2</sup> Social prescribing forums and networking breakfasts are local events which allow Social Prescribers and VCS organisations to learn collectively about, and keep up to date with, each other's work. Social prescribing forums are borough-wide but the networking breakfasts are local to each Network area, allowing more local conversations.

was a large variety in the number of referrals received by different organisations, with the average number of referrals being between 15 and 20.

**Figure 2: The estimated number of social prescribing referrals received by organisations responding to the survey, in the previous 10 months**



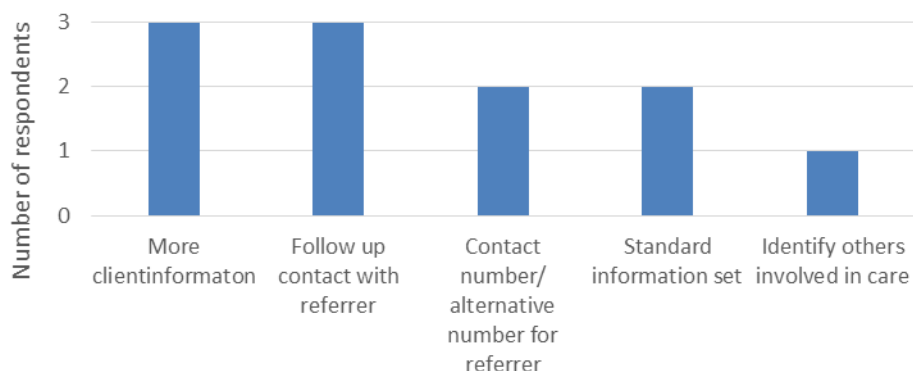
Respondents were asked how referrals are received by their organisation. 60% of the organisations who responded are 'open access' and 57% request written referrals, although some allow both. Other alternative referral methods named by respondents included self-referrals, email referrals, referrals from professionals or organisations including schools, the police and community mental health teams, door knocking in the community and other methods. Details of the referral mechanisms for specific services given by respondents were shared with the Social Prescribers to inform future referrals to those organisations.

### 3.3 Communication between Social Prescribers and VCS organisations referred to

Although not part of the local social prescribing pathway currently, respondents were asked whether they were given any feedback about people the Social Prescribers had referred to them and whether they had been asked to give feedback on the work done with the person referred by the Social Prescribers. This was to capture if anything was happening on an adhoc basis. One respondent had been invited to review meeting(s) about clients referred to them and 13 (28%) had been given feedback about clients referred to them from social prescribing. Nine (19%) respondents had been asked to give feedback on the work they did with people who were referred to them and of those who were asked to give feedback, the way in which they provided feedback was almost evenly split between written, verbal and other methods like face-to-face feedback.

Respondents were asked to comment on how information about individuals referred to them could be improved to support their work. Most of the respondents did not feel that there needed to be any changes to the information given in referrals from the social prescribers. 11 people made suggestions for how the information could be improved, which are summarised in **Figure 3**. See **Appendix 3** for the full set of comments received in response to this question.

**Figure 3: How respondents felt information about individuals referred to them through social prescribing could be improved to support their work**



Respondents were also asked about how communications about the work of the social prescribers could be improved. 18 responses were received. Suggestions can be grouped into the following themes:

- Use of online communications including Twitter, email or web based newsletters
- Communicating in more visual and creative ways like using infographics or advertisements that could be circulated through networks
- More regular communications about social prescribing, especially if the communication included an outline of the services on offer, outcomes achieved and tips for monitoring and evaluation.

### 3.4 Issues in delivering services to clients referred from Social Prescribers

Respondents were asked whether they had experienced any issues delivering services requested by Social Prescribers for their clients. Eight respondents commented on issues they had experienced, outlined in **Figure 4** below. Others commented that they had experienced no issues or mentioned positive aspects of the services, with one commenting on the usefulness of the Social Prescribers being based within the GP practice and having quick communication with the GP and access to useful information. Refer to **Appendix 3** for full text responses to this question.

**Figure 4: Issues some organisations have faced in delivering services to clients referred from Social Prescribing**

Issue	Number of respondents
Clients not interested/DNA	2
Funding to deliver service	2
Client not meeting service criteria	2
Capacity within service	1
Clients' needs too complex	1

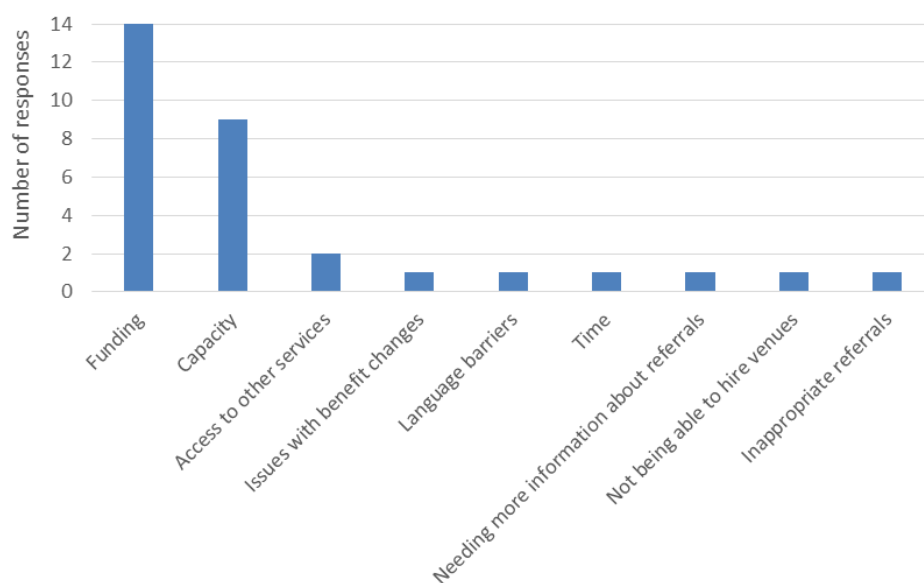
### 3.5 Challenges to delivering services more broadly

Respondents were also asked to describe factors which may affect their capacity to deliver services more broadly (not just to clients referred via social prescribing) (**Figure 5**). This is important since it will also impact on their ability to provide services to social prescribing referrals. The biggest issues



respondents disclosed were funding and staffing levels. Refer to **Appendix 3** for full text responses to this question.

**Figure 5: Factors which impact on an organisations' ability to deliver services**



### 3.6 Other comments

A free text section at the end of the survey allowed respondents to share any other comments that had not been covered by the survey questions. Some respondents used this as an opportunity to share positive comments about the current service. Respondents were also keen to know more about the social prescribing service and build a professional relationship with the Social Prescribers. A couple commented that it would be useful to perhaps track referrals and give feedback, to share the responsibility of the clients.

*'The Social Prescribers at [names of GP practices] have been absolutely excellent. They have referred people to me and always supported me to get further information if I need it and access to the GP for evidence for applications. I am very happy with this service it is vital as well as I have supported older people who I otherwise would not have got access to.'*

A couple of respondents commented on the lack of money that comes from receiving referrals and how this impacts on the capacity within the organisations to continue to provide the service, although it is not clear whether there was felt to be a particular issue with receiving referrals from the social prescribing service or if this is an issue with all referrals.

*'The referrals come with no money, which has long term implications for our service'*

*'It is vital that voluntary sector services are funded or they will cease to exist and social prescribers will be unable to refer anywhere.'*

#### 4. Conclusions

Respondents who had worked with the Social Prescribers on the whole provided positive feedback on their relationship with the service. The survey was sent to a wide range of local VCS organisations, which was not limited to organisations that were known to have received referrals from the Social Prescribers. As such, it is not surprising that only three-quarters of respondents had heard of social prescribing. Overall, however, respondents were keen to find out more about social prescribing and to work more closely with the Social Prescribers around the social prescribing clients referred to them. Those who had attended any of the local social prescribing forums and networking breakfasts provided positive feedback, particularly on their value for networking. The data did, however, indicate that more could be done at these events to use them as an opportunity to share more information about the local social prescribing service.

Where improvements to the current engagement with the VCS were suggested, these included receiving more regular updates about the local social prescribing service, for example through email newsletters and for Social Prescribers to have a more in-depth understanding of the local VCS service provision and referral criteria to ensure all referrals made are appropriate.

The two greatest challenges faced by the VCS in terms of their ability to provide local services are funding and capacity. These are likely to be ongoing issues, which may impact on their ability to provide the necessary services to support social prescribing clients in the future.



## 5. Appendices

### Appendix 1: Copy of the questions asked in the survey

Question	Sub-question/ question format
Organisation name	Free-text
What types of services do you deliver (e.g. welfare advice, housing support, befriending)?	Free-text
If your organisation delivers more than one service please list the services provided...	Free-text
How do you receive referrals?	Open access
	Written referral
	Other (please specify)
Have you heard about the Tower Hamlets social prescribing programme?	Yes/ No
Have you knowingly received referrals from any of the following social prescribers since 1st October 2016 (Names of Social Prescribers and practices covered given)	Yes/ No
If yes, how many referrals have you received?	Free-text
Were there any issues in being able to deliver the service requested (please comment)?	Free-text
Were you asked to give feedback on the work done with the person referred by the Social Prescribers?	Yes/ No
If yes, was this....	Written
	Verbal
	Other (please specify)
Were you given any feedback about people the social prescribers referred to you?	Yes/ No
Were you invited to attend any review meetings about people referred by social prescribers?	Yes/ No
Tell us about the factors that may affect your capacity to deliver services...	Free- text
How could information about individuals referred to you be improved to support your work?	Free-text
Have you attended any of the following?	E1 social prescribing networking breakfast
	E2 social prescribing networking breakfast
	E3 social prescribing networking breakfast
If yes, was it useful for (tick all that apply)...	Networking
	Finding out about the social prescribing programme
	Promoting your services



Question	Sub-question/ question format
	Other (please specify)
Did you attend a social prescriber's forum on either of the following dates?	1 March, Bromley-by-Bow Centre
	11 May, Professional Development Centre
If yes, was it useful for (tick all that apply)...	Networking
	Finding out about the social prescribing programme
	Promoting your service
	Other (please specify)
How could communications about the work of the social prescribers be improved?	Free-text
Any other comments?	Free-text
If you would like to be part of the social prescribing mailing list, to keep you informed about the work of the social prescribers, the networking events and opportunities to promote your organisation's services, please provide your details below...	Name
	Address
	Email



**Appendix 2 List of organisations responding to the survey**

Organisation name	What types of services do you deliver?	If your organisation delivers more than one service please list the services provided...
African Community School	Education and training	Supplementary education, accredited adult learning classes, parenting class, family learning and summer programme for children
Bowhaven	Adult mental health day centre	1-1, therapeutic groups, drop ins, legal advice,
All Hallows Bow-Fern Street Settlement	Family and children support	Parenting, ESOL, toddler groups, young teens support
Bromley by Bow Centre	Advice	Advice, health and wellbeing, employment and skills
The Paradise Zone Youth Centre	Youth work	Youth & children's work
Upskill	Education training volunteer and employment advice	Employment support and job retention also training and education advice
Safer London	Support for young people and training	CSE and gang involvement support
Ability Bow	GP referral exercise service	-
Tower Hamlets Council	Social care	Care act assessment, safeguarding
Shadwell Debt Advice Centre (John Carr's Charity)	Debt advice	-
Macmillan Social Prescribing Service (Bromley by Bow Centre)	We provide support over the phone and face to face for people over the age of 18 yrs that have, or have had cancer. We are a listening and reflecting service that supports people to connect with local services where appropriate.	We deliver short term one to one support using a social prescribing model. Alongside this main part of delivery we often invite partners in to deliver wellbeing sessions for clients (e.g. yoga, dance, self management courses)
Womens health and Family service	Befriending	Befriending, advocacy, health awareness
Rejuvenate UK CIC	Creative projects	Film, music, animation, media, advertising, environmental projects creating products from waste, circular economy based business models
Women's Environmental Network	Nature based health and wellbeing projects (Green Care)	Tower Hamlets Food Growing Network, TH Green Care Partnership
Volunteer Centre Tower Hamlets	Volunteer brokerage, training, advice	Volunteer brokerage for residents
Linkage Plus-Peabody	Generic advice and referrals, outreach, run social activities	Community centre activities and Linkage Plus, daycare centre, coffee bar
Alzheimers Society	Post-diagnostic support: information about living well	Dementia adviser; carers' support; monthly social club (coffee club); monthly Singing





Organisation name	What types of services do you deliver?	If your organisation delivers more than one service please list the services provided...
	with dementia, signposting and referrals to many other services/activities etc.	For The Brain group; BAME support ; BAME social club twice monthly.
St Hilda's East Community Centre - Boundary Women's Project	Low level skills development including English and IT, overcoming social isolation and exclusion, building work related skills - CV, interview skills, providing training and work experience targeting employment, increasing health levels of good health within the borough to name a few.	There are approx. 15 different project providing a wide range of service and provision across all aspects of the community and serving very young children up to the elderly.
Quaker Social Action	Funeral planning advice	Financial capability training, furniture re-use project
SimpleGifts	Befriending, ESOL, volunteering	ESOL, after-school clubs, lunch club, volunteering
St Joseph's Hospice	Support groups, health and wellbeing workshops, information and support centre	-
Mytime Active	Child weight management services	-
Groundwork London	Home Energy & Wellbeing advice visits	-
My time active MEND	Weight management	MEND
The Working Well Trust	Employment support	Employment support, wellbeing support, volunteer, training support
THAI Boxing Fighters Academy	Fitness wellbeing mental health related	-
THFN	Befriending and advocacy for older people	Outings
Setpoint London East	Workshops to school	-
I am tower hamlets	Physical activities	-
Orchid-Cancer.org.uk	Exercise education programmes for prevention of mental health problems and cancer	Mental health and cancer prevention and palliation
Spitalfields City Farm	Gardening/ volunteering/ animal husbandry	Volunteering/ animal care/ environmental play/ environmental education
Rethink Mental Illness	Carers support services	-
Toyhouse	Family support	Many! Please see our timetable
Urban Ramblers	Recreational, walking, exercise for people with mental health issues	-
Better leisure	Leisure activities	Libraries; children's services

Organisation name	What types of services do you deliver?	If your organisation delivers more than one service please list the services provided...
Alzheimers Society	Advice, support and sign posting for people with dementia and their carers	Dementia carers support, dementia cafe, dementia advisor
LinkAge Plus - St Hildas	A service for people over 50	-
Excelcare Homecare Division	Homecare	-
Tag	Child care and community resources	Community activators and development
Neighbours in Poplar	Support for vulnerable older people living in their own homes	Befriending, advocacy, social activities, shopping, centre management
Island Advice	Advice - benefits/ housing/ debt	-
Social Action for Health	Welfare Advice service	Good Moves courses, self-management courses, maternity engagement, patient leaders programme and general community research
Positive East	Support services for people living with HIV, HIV testing	welfare right and housing advice, support with social services, peer support, support groups, health and wellbeing seminars, mindfulness, gym and holistic therapies, support around adherence related issues , HIV testing
N.abled	Health & Wellbeing	Exercise, nutritional therapy, physiotherapy, coaching
Streets of Growth	Youth intervention coaching with high risk young adults (16-24 years)	Life skills coaching, career coaching and family intervention support, employment and enterprise skills training
Green Candle Dance Company	Dance classes for people with dementia and carers, dance classes for people over 55.	1. Remember to Dance - dance classes for people with dementia and their carers. 2. Green Candle Senior Dancers - for people over 55.
Hackney Playbus	Play and learning for children under five, health messages and links with support services for their parents and carers, community engagement and the opportunity for families to meet each other and build support networks. Our service is mobile and can go to where it is needed.	Play and learning for children, information about child development, health messages and signposting for parents and carers. Community building through bringing families together around the needs of their children.

### Appendix 3: Full text responses to survey questions

#### Response to question: How could information about individuals referred to you be improved to support your work?

- *Sharing of information in advance*
- *We have only received referrals from local groups*
- *I contact the referrals so get my own info*
- *Information is generally good and includes both info on the issues the client needs help with and things to bear in mind to support the client effectively e.g. client communication preferences, mobility issues, language barriers etc.*
- *As we have had no referrals through social prescribing, I can't answer this*
- *A section for notes is provided and [Name of Social Prescriber] has always written in them*
- *Provide another number MIGHT be useful*
- *When I ask for information the Social Prescribers are always excellent at providing this so I don't think it can be improved*
- *It works well*
- *Follow up with the person who refers them*
- *Perhaps a standard front sheet of contact information of person being referred by the social prescriber (name, age, address, GP, etc)*
- *I think we could work much more closely together but we are really not all that sure what the social prescribers do that is different from other services*
- *Identify carers who provide support affected by mental health minor to major*
- *We receive a comprehensive background on the clients referred*
- *It would be helpful to have occasional check-up meetings, perhaps every 2-3 months*
- *It supports the wider community*
- *We have not had any referrals so cannot comment*
- *I already have a referral form that the prescribers fill in - this works amazingly*
- *Communication from referrers*
- *Brief summary on individual risk factors little history*
- *More of the voice of the young person*
- *Fully complete the referral form and someone to contact for additional information if needed*
- *Our referral forms are good enough, however, we receive referrals which do not fit our brief, so it would be useful if referrers understood our work better*
- *Need to explore community services to meet needs first*
- *Too early to say*
- *[Name of Social Prescriber] normally sends comprehensive information via an encrypted email it is a system that has worked for us*
- *We get all the info we need*
- *Streamlining referrals - a bit of support or training for projects on best practice to work with referrals. Often we might just get a phone number, a more standard set of information might be helpful - perhaps a statement from individual about what they want from the referral*
- *There was enough info given so n/a*

**Response to question: How could communications about the work of the Social Prescribers be improved?**

- *We don't know how it works*
- *I feel I've had really good information so far, from the forums*
- *More advertising*
- *Works great for us*
- *I like the infographics and so on that are produced. It would be useful to know more about the depth and breadth of support provided*
- *We are not aware of receiving any information about social prescribing, so it should be easy to improve communications*
- *Online Materials / Directory*
- *I had not heard about it. However this year we are delivering services in Hackney and Waltham Forest but not in Tower Hamlets*
- *Any new information is always helpful by email*
- *More consistent during support and coherence for the services*
- *Twitter?*
- *I think that their remit and aims need to be made clearer to other organisations*
- *Give some data on outcomes and how they are to be measured*
- *Individual Social prescriber could invite us re: promoting services like us*
- *More publicity within the wider communities to understand it better*
- *There is already a very good awareness of the prescribers - I work with [name of Social Prescriber] mainly, along with [name of Social Prescriber] and a couple of others. They are such a dynamic set of people that lead the service so well and keep everyone really really well informed*
- *E-mail updates about their work*
- *News realms advertisement in all community spaces including voluntary and other*
- *Further contact networking mailing list*
- *Continue with what they are doing*
- *They have a better understanding of what we do*
- *To communicate with social care staff*
- *It needs to become more mainstream and include children & families*
- *More face to face meetings including client though this would have time constraints*
- *A monthly newsletter*

**Response to question: Were there any issues in being able to deliver the service requested (please comment)?**

- *There have been some challenges finding capacity where clients need home visits or very urgent support. The level of demand for our advice services mean that we have to operate on either a drop in or waiting list basis for the majority of clients. Finding availability for faster or more tailored support can be very challenging*
- *Unable to contact six residents and about three that were not interested in the service anymore*
- *Most people didn't answer their call or didn't turn up to the meeting*
- *I had to refer on for some and also have used the Social Prescribers to contact the GPs for further information/ letters which has been very helpful having them in the surgeries*



- *Generally not. Although sometimes clients come to us with issues that it's difficult for us to find support with. e.g. clients having housing issues, clients with complex social care issues, cognitive issues*
- *Funding (we receive no funding to deliver our service so patients have to pay privately for our service)*
- *Yes. One was for an age of child of 10 but our service is for under 5s*
- *No we have always worked quite closely and very well with social prescribers*
- *Lack of funding for projects to deliver service*
- *One, as criteria wasn't met, but explained to both referrer and client who understood why we couldn't deliver the service*

**Response to question: Tell us about the factors that may affect your capacity to deliver services...**

- *Funding*
- *Funding*
- *Funding*
- *We have only a small team to potentially cover all the people in TH who are diagnosed with dementia, and their families/friends - we have to prioritise the recently diagnosed at busy times but encourage referrals for all affected*
- *Largely funding and staff capacity*
- *Loss of funding*
- *Language barriers*
- *Historically we were commissioned by Children's centres in Tower Hamlets however budget cuts has prevented this continuing. We are currently looking for funding from elsewhere in the hope that we can once again deliver services in Tower Hamlets for children in need of support whose families for a range of reasons are not engaging with their local Children's Centres or any early years services*
- *Time*
- *High levels of problems with new benefit changes*
- *Access to other services. Access to evidence from GPs for applications made on behalf of service users. Sometimes there is a 3 week waiting list as I work alone in the Sundial providing the Linkage Plus Project*
- *Funding, under-funded or badly run services that we refer to*
- *Not having access to hiring out a venue*
- *We are not commissioned or funded to deliver our service so this affects are capacity to deliver services to those on lower incomes referred to us*
- *We work with Link age Plus and have very exacting targets to reach. We are used to delivering on target*
- *Services limited to people living with and directly affected by HIV*
- *We receive referrals only from one practice [Name of Practice] we are low count referral despite many social operating in TH*
- *Insufficient volunteers*
- *We now have only 1 part-time staff member*
- *Factors in capacity to deliver services are time and resources*
- *Would need more information please*

- *If I had to attend meeting with regard to people that they refer. The system currently works really well, with prescribers referring women onto my service, then being encouraged to attend by both myself and the prescriber*
- *Funding*
- *Not having some case study of referral*
- *None at this moment*
- *We receive these referrals but do not receive any resources to support our work with the people referred, which means that we are stretched and over capacity*
- *Inappropriate referrals*
- *Our funding for any specific service means we can only receive applications that fit the agreed criteria. Funding is a major factor*
- *Capacity we have 2 workers each working 4 days per week it affects the number of referrals although the need is high*
- *Funding*
- *Lack of funding has meant that our Supported Volunteering Service has been suspended. We still offer a general brokerage service but less support is available to individuals and referrers than before*
- *Green Care programs are underfunded so lack capacity to deliver high quality services for people in serious crisis*

**Response to question: Any other comments?**

- *We will be attending the social prescribing meeting on Wednesday 20th September*
- *My team members would love to know about it. I am a fundraiser*
- *As a Dementia Adviser my role involves a lot of signposting and referring too – if social prescribers come across clients with memory conditions we could sometimes provide some joint-working, or could offer advice around working with people with dementia – eg how do we help them to remember their appointments with us, etc etc.*
- *We have a great working relationship with [name of Social Prescriber]*
- *Hackney Playbus would be an ideal project for social prescribing as we have a proven record of creating friendship and support networks. We are looking for funding to work in the borough and hope that we will be able to engage with this initiative if we are successful*
- *The Social Prescribers at [names of Practices] have been absolutely excellent. They have referred people to me and always supported me to get further information if I need it and access to the GP for evidence for applications. I am very happy with this service it is vital as well as I have supported older people who I otherwise would not have got access to*
- *The communication about the services has at times been confusing. It is a valuable service but I think more needs to be done to ensure that their aren't inappropriate referrals (people with extremely high needs) and the deliver staff wellbeing is protected*
- *It's amazing how all services work together to keep people in Tower Hamlets healthy and look after their wellbeing. When an individual is referred there should be a follow up with all those involved so the patient knows everyone is working together and they want the best for them*
- *It would be useful to have a list of other referral organisations that social prescribing team refer into so we can also signpost between ourselves*
- *Promote social prescriber event to the public*
- *I've been working with [name of Social Prescriber] to develop and create a new walking group in the Shoreditch end of LBTH, I have to say that she is so dynamic, approachable and open to*

*ideas! It's a shame that LBTH lost the Health Trainers who were based at Osmani, but somehow, having the prescribers brings new hope to how we can develop the gap left from losing that service and initiating new activities. They just need to be given more resources and support in order to enable this to happen*

- *It is good this survey is on offer*
- *Needs to be highlighted to all service providers perhaps having a track records and follow up with outcomes along with agency being referred to feedback from them accountability on all sides*
- *Good service and good for client and referrals*
- *The referrals come with no money, which has long term implications for our service*
- *Little experience to comment much as we are not a service provider to individual adults, but to families i.e. parents and children*
- *Hope to continue working closely it is a valuable tier of care*
- *It is vital that voluntary sector services are funded or they will cease to exist and social prescribers will be unable to refer anywhere*