



BIRMINGHAM CITY
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The necessary factors for effective social prescribing

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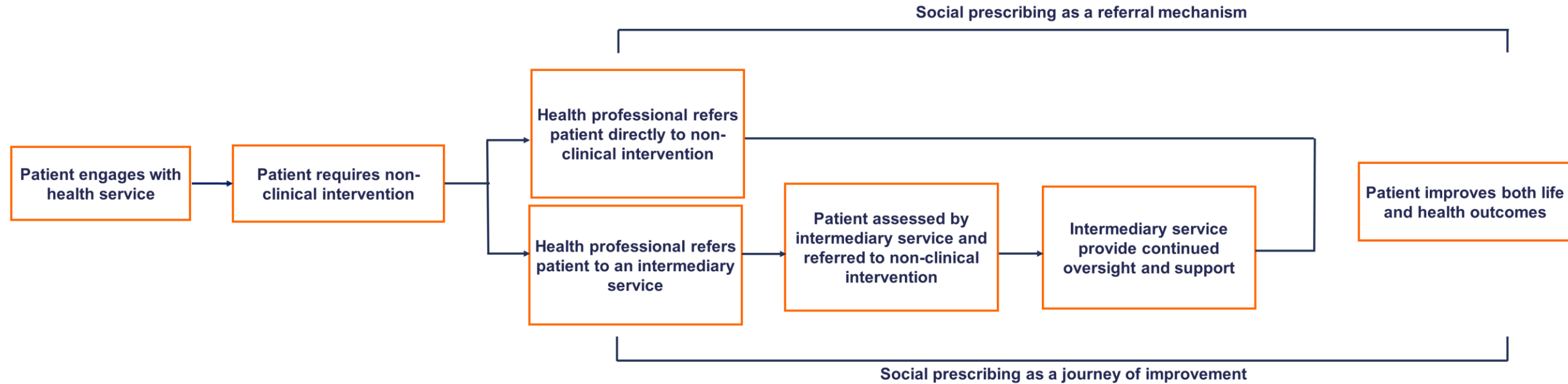
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Preliminary results

The results and ideas presented in the following presentation are preliminary.



What is social prescribing?



“Social prescribing is a process by which a healthcare professional refers patients with non-clinical needs to non-medical sources of support within the community, with or without an intermediary service, to improve health and wellbeing.”



Aims

To develop a novel understanding of key stakeholders' perspectives of social prescribing, specifically, the factors deemed necessary for its effective implementation.

- To explore stakeholder's understanding of the importance of social prescribing and the subsequent social interventions in the context of healthcare.
- To examine how social prescriptions are structured to address physical, mental, and social needs.
- To ascertain the level of involvement of general practise in social prescribing, and to understand the perceived impact of this.
- To determine the role of social prescribing facilitators.
- To consider the use of language surrounding social prescribing.
- To identify factors which are considered to negatively affect social prescribing.

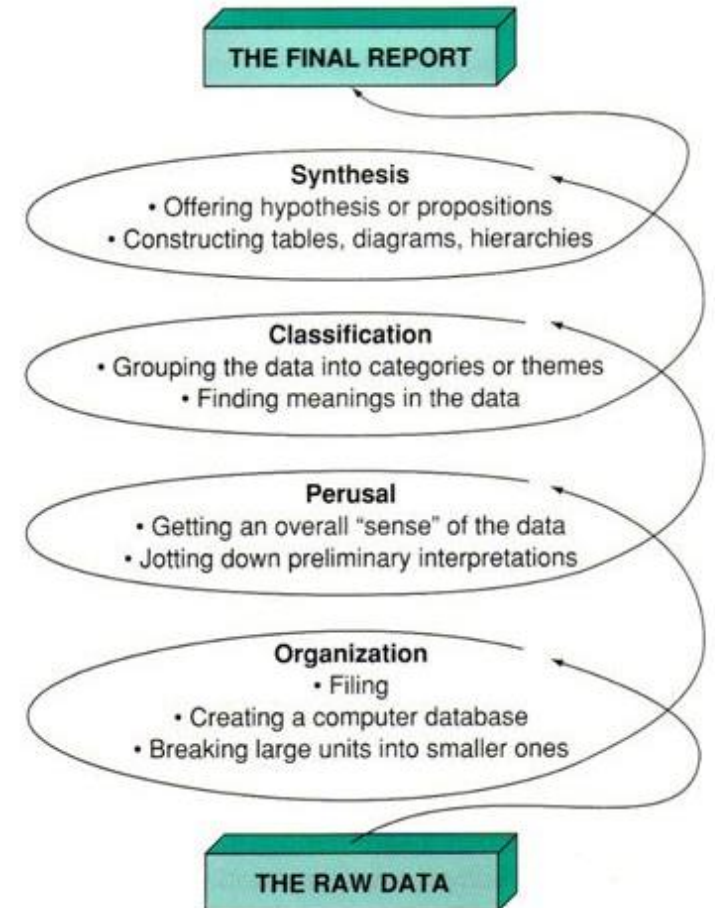


Method

Participants: General practitioners (18), Social prescribing facilitators (15), Service users (18)

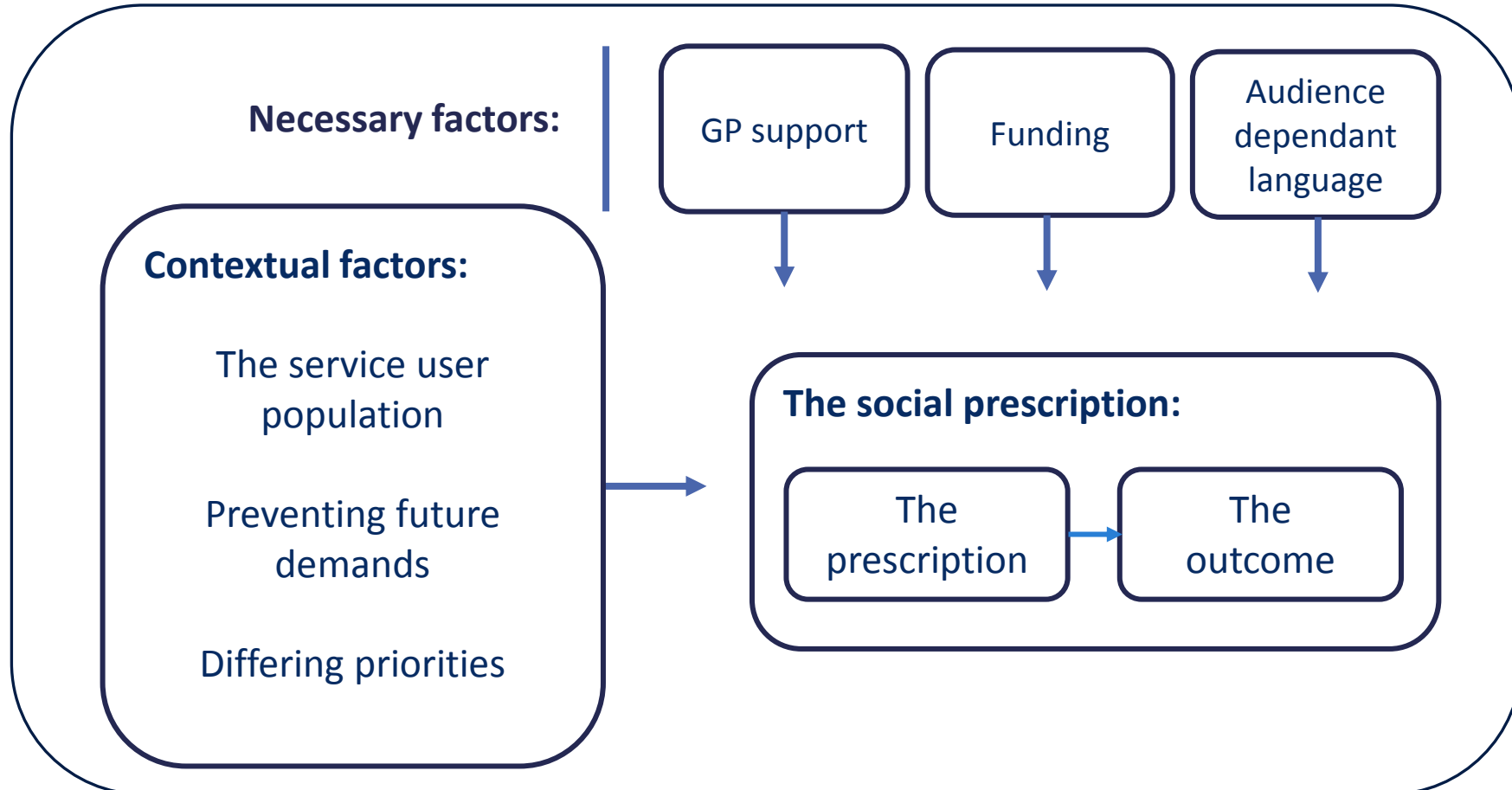
Methods: Semi-structured interviews (face-to-face & telephone) or focus groups (face-to-face).

Analysis: All interviews were voice recorded, transcribed, and then thematically analysed using NVivo; Creswell's data analysis spiral was used to inform the analysis procedure.





Results:





Necessary factors *GP support*

*“I am concerned about the fact that we call it social prescribing, and that it’s accessed or signposted through health professionals. Because that’s us **medicalising or bringing into the medical model things that are social.**”
(GP_011)*

*“I think one of the things about supporting, and I think why this service works so well, is that **it is very heavily connected to the GPs.** So I think people trust their GPs, so if a GP says there's a service here that we work very closely with, we think you would really benefit from this, they'll trust that GP then to access this service. Whereas if it was separate, it just wouldn't be...you wouldn't have that trust...”(F_002-004)*

*“I mean, it sounds wonderful, it sounds like that would be the best of both worlds because you’d have that relationship with the GPs but then you’d have the **experts that were able to do it in that field** which...and would already kind of know the links and be up and running and be able to take that road” (GP_008)*



Necessary factors

Funding

*“whoever funds **it has to invest money** for it to be done properly. It isn't something that, oh, it's just a bit of social prescribing, it doesn't actually need investment. It can't be that tokenistic. And I know other social prescribing projects where they haven't been funded hardly at all, very little amounts of money, there's just way...you might as well just not bother, because there's just no way.” (F_002)*

*“I think we've been really, in a way, quite ambitious in what we've been trying to prove and what we've been recording on **the dreaded spreadsheet** because it's just got bigger and bigger”. (F_031)*

*“**one person** can't be everywhere at once”
(F_009)*

*“**third sector** are constantly scrabbling around for **funding** and it's only going to get worse, if that's (social prescribing) being relied on to be the solution, I'm not sure that that's necessarily sustainable.” (GP_008)*



Necessary factors

Audience dependant language

“If you said social prescription, they'd go what the hell, social prescription, they wouldn't even know. Or a social intervention, they wouldn't put it as a label. They just see this as a service that's going to help them to improve their quality of life and get some issues resolved.” (F_002)

*“I think that prescribing term is just a medical...it's **to fulfil some credibility with medical professions**”. (F_032)*

*When asked if they had heard of ‘social prescribing’ all service users replied **“no”***

*“The trouble with social...the term social prescription is ‘social’ has connotations of deprivation in the welfare state and that is an issue...Socialism has in the near liberal era become a bit of a dirty word and therefore social prescribing could be kind of thought of as part of that and **so will probably turn off...turn people off.**” (GP_007)*



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