

Health Connections, Stewartry, Dumfries and Galloway

Background

Healthy Connections Stewartry is a social prescribing project in the Stewartry area of Dumfries and Galloway with the aim of improving individual health and wellbeing and reducing inequalities. The project is jointly co-ordinated by Dumfries and Galloway Health and Wellbeing and Stewartry Health Improvement Team.

In its 2011 action plan, Dumfries and Galloway Health and Wellbeing committed to the establishment of a social prescribing approach. This was one element of a broader focus on supporting local people to experience good mental health and wellbeing. Healthy Connections contributes to this by linking people to non-clinical services.

Initial developments included identifying two GP practices and a multi-agency steering group. The multi-agency steering group has overseen planning, implementation and evaluation of the pilot. Implementation of Healthy Connections began in May 2013. Learning and evidence generated by the pilot are being used to inform the wider roll-out of the project across the region.

Planning Healthy Connections Stewartry

It took a year to plan and develop the project before launching. This involved engaging with stakeholders to establish partnerships, designing an evaluation framework and developing pathways. Every element of social prescribing was carefully researched via available evidence, resources and learning from elsewhere.

Early engagement with practices was key to supporting the project. The referral utilised the SCI gateway computerised referral system which ensured the secure storage and transfer of confidential patient information. Patient consent was gained prior to referral and for evaluation purposes.

Community development approaches were used to engage the local community in shaping the programme to create an identity and for marketing.

The pilot took an assets-based approach to developing pathways by establishing partnerships with existing services. Eight pathways were designed: arts, physical activity, financial advice, employability advice, volunteering, self-management, library-based activities, and listening skills.

Prior to implementation GPs and local community services were introduced to one another so that working relationships and trust could be established. Flexibility within Healthy Connections has enabled pathways to expand, increasing the number of referral options and resources available to suit individual needs.

Learning and findings from the project in Stewartry are informing the roll-out of Healthy Connections across Dumfries and Galloway. The project is in the process of

being developed in GP practices in Wigtownshire and Nithsdale. Within Stewartry the project will be introduced in two more GP practices.

Evaluation

The evaluation of the project was overseen by the steering group with students from the University of Glasgow carrying out the majority of the research. Participation in the evaluation across all partners involved has been good. This reflects the enthusiasm for Healthy Connections and a genuine willingness to support the project.

The evaluation process focused on four different elements of the social prescribing project. These were: a process evaluation, partnership working, implementation and sustainability, and impact on individual wellbeing.

The framework included both qualitative and quantitative research. Some of the key findings were:

- The process evaluation has found that communication, leadership and flexibility have been key strengths within the project. The findings underline the importance of considering the process carefully at the outset and suggest the time taken to plan the project was well invested.
- Early and ongoing engagement with partners and the community have also been highlighted as important factors. This has helped partners to develop a sense of ownership and ensured plans were well-informed and achievable.
- GPs consider medical and social models of care can be used to complement one another. The important consideration is how to create the best environment to match care to need.
- Community resources have welcomed the ability to complement traditional clinical service, but are aware potential demand may lead to future capacity issues.

Evaluation challenges

- The impact on individual wellbeing outcomes and prescribing will take time to ascertain. Initial wellbeing scores, although based on small numbers, show improvement for those individuals. By their nature, social prescribing projects include signposting as an option. This adds a further level of complexity in measuring impact.
- Quantitative research has been difficult for a range of reasons, including the lack of a suitable tool. While findings from qualitative research are highly valued by a range of partners including GPs, there is a need for quantitative information and clear evidence of impact. Other methods are being sought in preparation for future development and roll-out.

Key learning from implementing Healthy Connections

- The project has benefitted significantly from the level of flexibility built in at the outset. Ensuring all partners understood the aims and objectives of the project, and establishing the parameters within which flexibility was an option

were key to delivery of a consistent, sustainable project that could be evaluated.

- The time for planning has proven invaluable. This enabled potential barriers to be identified and avoided. It also allowed important relationships to be established. Although the national and local policy context provided an environment that supported the development of the project, building relationships benefited significantly from the careful research carried out by the project leads.
- Involving key partners at the very beginning of development process has been hugely beneficial. This helped ensure pathways were well-thought out, and that robust systems and processes are in place. It has also enabled partners to gain a sense of ownership and investment in the project.
- Strong leadership has been an essential component of the Healthy Connections project. This has underpinned development of the project, its ongoing delivery and management, the evaluation process and roll out to other areas.
- It is acknowledged by project partners, stakeholders and the independent evaluations carried out by the students from Glasgow University that a culture change from both primary care and patients will be required to embrace social prescribing as a viable option to traditional clinical approaches. This culture shift will require time and investment to ensure maximum impact for individual health and wellbeing outcomes.

Contact

Claire Thirlwall, Dumfries and Galloway Council

claire.thirlwall@dumgal.gov.uk

Sharon Walker, NHS Dumfries and Galloway

sharon.walker4@nhs.net