

Impact case study (REF3)

Institution: University of East London (UEL)		
Unit of Assessment: 3 Allied Health Professions, Dentistry, Nursing and Pharmacy		
Title of case study: Social prescribing: using the strength of the third sector to promote health, tackle inequalities and reduce NHS costs		
Period when the underpinning research was undertaken: 2014 – 2018		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Merello Bertotti	Reader in Community Health	2019 – present
Caroline Frostick	Research Fellow	2014 – present
Gopalakrishnan Netuveli	Professor of Public Health	2013 – present
Angela Harden	Professor of Community and Family Health	2008 – present
Adrian Renton	Emeritus Professor at IHHD	2016 – present
Gail Findlay	Professor at IHHD	2016 – present
Tine Van Bortel	Professor at IHHD	2017 – 2019
Period when the claimed impact occurred: 2015 – 2020 (ongoing)		
Is this case study continued from a case study submitted in 2014? No		

1. Summary of the impact (indicative maximum 100 words)

Health inequalities have put pressure on primary care, which provides over 307 million patient consultations yearly. One of the solutions to these challenges is an intervention called 'social prescribing.' Through the creation of the 'social prescribing network' research, advice, conferences and training, IHHD has made a crucial contribution to the decision of the NHS to expand the intervention nationally in 2019. Resulting in, recruitment of 1,000 link workers to support 900,000 people across England.

2. Underpinning research (indicative maximum 500 words)

Increasing prevalence of long-term conditions, health inequalities and social isolation have led to the rapid demand for GP visits. Social prescribing (SP) contributes to solving these problems by enabling a GP to refer patients with health and/or social issues to a 'link worker' who provides 'holistic' support to patients and refers them to mutually agreed non-clinical activities (e.g. walking groups) and social services (e.g. housing), typically provided by the third sector.

Before this evaluation, SP offered substantial potential, but the programme lacked the evidence base and infrastructure for its development. In 2015, in collaboration with GP Patrick Hutt and Queen Mary University and commissioned by the Health Foundation (**R1, G1**), Bertotti and Frostick led a large-scale evaluation of SP in Hackney which was unique in size by international comparison. The mixed method evaluation included a quantitative study assessing outcomes from 700 patients. Due to the use of a matched control group for comparison, this is still one of the most rigorous evaluations of SP internationally. The evaluation showed positive results from qualitative interviews and impact on reduction in GP consultations and medication use (**R2, R3**). In 2019, Public Health England rapid evidence synthesis shortlisted this work from 524 other evaluations (**S6**).

A national Social Prescribing Network (SPN) in 2016 with another grant from the Health Foundation to improve the evidence base and examine models of SP was led by IHHD. The SPN grew from only 10 members in 2016 to 5,000 members in 2020 and unites a wide range of stakeholders. As part of its steering group, Bertotti and Frostick led research, advised commissioners and co-organised conferences. **(R4, S1, G2)**

Within the network, IHHD led on the analysis of the main NHS-funded economic evidence reviews of SP **(R5)**. 94 studies were analysed through a systematic search and assessment of the impact of SP on saving NHS costs. This was used as evidence in a range of government documents and is the one of the most widely cited publications on SP. IHHD completed a mixed method analysis of SP in Newham in 2014, funded by their Clinical Commissioning Group **(R6)**. The evaluation showed statistically significant positive outcomes in physical activity and mental wellbeing and led to the re-commissioning of the service.

3. References to the research (indicative maximum of six references)

- R1.** Bertotti, M., Frostick, C., Findlay, G., Harden A., Netuveli, G., Renton, A., Carnes, D., Sohanpal, R., Hull, S. 2015. Social prescribing: integrating GP and community assets for health. City and Hackney Clinical Commissioning Group. <https://www.health.org.uk/improvement-projects/social-prescribing-integrating-gp-and-community-health-assets>
- R2.** Carnes, D., Sohanpal, R., Frostick, C., Hull, S., Rohini, M., Netuveli, G., Tong, J., Hutt, P., Bertotti, M. 2017. The impact of a social prescribing service on patients in primary care: a mixed methods evaluation, BMC Health Services Research 17, Article 835. <https://doi.org/10.1186/s12913-017-2778-y>
- R3.** Bertotti, M., Frostick, C., Hutt, P., Sohanpal, R., Carnes, D. 2018. A realist evaluation of social prescribing: an exploration into the context and mechanisms underpinning a pathway linking primary care with the voluntary sector. *Primary Healthcare Research and Development* 19(3), 232-245. <https://doi.org/10.1186/s12913-017-2778-y>
- R4.** Bertotti, M., and Frostick, C., 2016. *From isolation to interaction: developing a network, to share learning, develop outcome measures, and endure the potential of social prescribing meets the needs of the NHS*. The Health Foundation. NHS City and Hackney CCG, GIFTS ref:7603.
- R5.** Polley, M., Bertotti, M., Pilkington, K., Kimberlee, R. and Refsum, C. 2017. *A review of the evidence assessing impact of social prescribing on Healthcare demand and cost implications*. Technical Report. University of Westminster. <https://westminsterresearch.westminster.ac.uk/download/e18716e6c96cc93153baa8e757f8feb602fe99539fa281433535f89af85fb550/297582/review-of-evidence-assessing-impact-of-social-prescribing.pdf>
- R6.** Bertotti M., Watts P., Akhter, I., Eselebor, D. 2014. *Changes in health outcomes in diabetic and pre-diabetic patients in the Newham Community prescribing pilot project: analysis of pre and post data*. Newham Clinical Commissioning Group.
- G1.** Marcello Bertotti, Caroline Frostick, Tine Van Bortel Gopalakrishnan Netuveli, Angela Harden, Shine Award, Health Foundation, GBP68,550.
- G2.** Marcello Bertotti, Caroline Frostick, Spending improvement: supporting dissemination, Health Foundation, GBP37,806.
- G3.** Marcello Bertotti, Caroline Frostick, London Borough of Waltham Forest, GBP35,770.
- G4.** Marcello Bertotti, Richard Kimberlee, Marie Polley, Karen Pilkington, Social prescribing: economic evidence review, NHS England, GBP75,000.
- G5.** Marcello Bertotti, Caroline Frostick, Social prescribing training academy: scoping exercise, NHS England, GBP11,992

G6. Marcello Bertotti, Chiara Lombardo, Mapping and review of navigation delivery roles across the health and social care system, Greater London Authority, GBP11,992.

4. Details of the impact (indicative maximum 750 words)

Informing changes in national health policy

The leading contribution to the establishment of the Social Prescribing Network enabled IHHD to reach a national audience of stakeholders, to drive the progression of social prescribing at 12 research and policy conferences. They reached a large audience of 80-400 participants for each event including commissioners from the NHS and local authorities, practitioners from the third sector, healthcare professionals such as GPs, nurses and service users (**S1**).

The economic evidence review of social prescribing (**R5**), which was used as rationale for extending social prescribing nationally, has been cited in the 2018 Department for Media Culture and Sports Loneliness Strategy, and the 2019 NHS Universalised Personalised Care Plan among others (**S2, S3**).

As part of the steering group for the Social Prescribing Network, Bertotti and Frostick played a decisive role in the development of the groups research activities, which were cited 11 times in the 2017 All-Party Parliamentary Group on Arts, Health and Wellbeing. One of the Inquiry Report recommendations was:

“The Social Prescribing Network should support clinical commissioning groups, NHS provider trusts and local authorities to incorporate arts on prescription into their commissioning plans and to redesign care pathways where appropriate” (p. 155). (**S4**)

Bev Taylor (previous National Social Prescribing Lead for NHS England and current Operations Director of the National Academy for Social Prescribing) commented:

“The University of East London has helped make a significant contribution to building the social prescribing movement across England and to develop learning for social prescribing link workers through the following:

1. *Evaluation of local social prescribing schemes such as the evaluation of social prescribing in City and Hackney (London) which provided one of the first large and robust evaluations of social prescribing in the field. The learning from this was shared with regional social prescribing networks across England;*
2. *Working collaboratively with Bromley By Bow Centre and Connexus to pilot and develop accredited learning for social prescribing link workers;*
3. *Contributing generally to the creation of regional social prescribing networks, where commissioners and practitioners can learn from each other.*

This work has been appreciated by partners and is an important part of the jigsaw, which has helped to create the conditions for the NHS to make significant long-term investment in social prescribing through the NHS Long Term Plan”. (**S5, S6**)

Informing changes in regional health policy

Bertotti and Frostick had a significant influence on the development of social prescribing in London. Bertotti was involved in the drafting of the social prescribing vision for London 2018-2028 (**S7**). The evaluation of social prescribing in City and Hackney was used throughout the 2017 Healthy London Partnership (representing all the NHS Clinical Commissioning Groups in London) document looking at steps towards implementing self-care (**S8**) to consider the business case for social prescribing.

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Our evaluations of social prescribing in East London - Hackney and City, Waltham Forest, and Newham - have raised the profile of social prescribing in those areas and produced evidence, which influenced re-commissioning. For example, UEL features in the City and Hackney social prescribing collaboration that won the Social Prescribing National Award in 2019 (**S9**). Moreover, findings from IHHD's evaluation of social prescribing in Waltham Forest were included in a Mayor of London funded document to inform the development of the social prescribing strategy for London (**S10**).

Impact on the capacity building of social prescribing

The evaluations of social prescribing and other research work were used to inform the co-design and co-delivery of the only accredited Level 3 qualification in social prescribing, training link workers on how to best support social prescribing service users. Five cohorts of link workers have been trained and the course received very positive feedback. (**S6, S9**)

5. Sources to corroborate the impact (indicative maximum of 10 references)

Informing changes in national health policy

S1. Key presentations to the sector:

- a. Wakefield, 7 July 2016. First event organised by the social prescribing network hosted commissioners, some voluntary sector organisations and social enterprises, and link workers, c.a. 60 people.
- b. Dublin, 8 March 2018. The event was attended by over 60 people including the Health Service Executive, researchers, local commissioners, VCSE sector and social prescribing users. This supported the creation of the social prescribing network in Ireland.
- c. Belfast, 16 January 2019. The event was attended by more than 200 people including commissioners, the voluntary sector, healthcare professionals based in Northern Ireland.
- d. London, 21 May 2019. Social Prescribing Youth Network National Conference, University of Westminster. Bertotti co-organised this conference and presented an evaluation framework to 90 delegates from all over the UK.
- e. London, 11-12 July 2019: Bertotti and Frostick co-organize the second international conference on Social Prescribing held at University of Westminster. This had 300 participants from countries including Ireland, Netherlands, United States, Portugal, Canada, Australia, New Zealand, Italy, Finland, Austria, Singapore, and South Korea.

S2. Department for Digital, Culture, Media and Sport. 2018. *A connected society. A strategy for tackling loneliness – laying the foundations for change*. Reference to (**R5**) on p.25.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/750909/6.4882_DCMS_Loneliness_Strategy_web_Update.pdf

S3. National Health Service. 2019. Universalised personalised care plan. Implementing the comprehensive model. Reference on p.51 and 52. <https://www.england.nhs.uk/wp-content/uploads/2019/01/universal-personalised-care.pdf>

S4. All-Party Parliamentary Group on Arts, Health and Wellbeing Inquiry Report. 2017. *Creative health: the arts for health and wellbeing*. 11 citations and recommendation 6 on p.155, <https://www.artshealthresources.org.uk/docs/creative-health-the-arts-for-health-and-wellbeing/>

S5. Testimonial letter from Bev Taylor (previous National Social Prescribing Lead for NHS England and current Operations Director of the National Academy for Social Prescribing).

S6. Public Health England. 2019. *Effectiveness of social prescribing: An evidence synthesis*. This is a rapid evidence review including (**R2**) on p. 13 and p.16. <https://phe.koha-ptfs.co.uk/cgi-bin/koha/opac-retrieve-file.pl?id=9c033e58d33d6eb6f59dae978c0f7839>

Informing changes in regional health policy

S7a. Healthy London Partnership and Mayor of London. 2018. Social prescribing: our vision for London 2018-2028 Improving lives, improving

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health. <https://www.london.gov.uk/sites/default/files/social-prescribing-our-vision-for-london-2018-2028-v0.01.pdf>

S7b. <https://www.london.gov.uk/what-we-do/health/social-prescribing>

S8a. Healthy London Partnership. 2017. *Social Prescribing. Steps towards implementing self-care – a focus on social prescribing*. p.12 (footnote 17) about reduction in A&E attendance, p.22 (footnote 45), and p.11. link to IHHD video about City and Hackney social prescribing. <https://www.healthylondon.org/wp-content/uploads/2017/10/Social-prescribing-Steps-towards-implementing-self-care-January-2017.pdf>

S8b. Social prescribing in City and Hackney on the Health Foundation website. <https://www.health.org.uk/improvement-projects/social-prescribing-integrating-gp-and-community-health-assets>

S9. NHS 2019. Hackney Social Prescribing service wins national award. <http://www.cityandhackneycg.nhs.uk/ch-news/hackney-social-prescribing-service-wins-national-award/86704>

S10a. Bertotti, M., Frostick, C., Tong, J. Netuveli, G. 2017. *The social prescribing service in the London Borough of Waltham Forest. Final Evaluation Report*. University of East London.

S10b. Health London Partnership. 2018. *Deliverable 2: VCSE Sector Engagement and Social Prescribing*, funded by Healthy London Partnership, NHS, Greater London Authority, p. 21 mentions **S10a**.

https://www.london.gov.uk/sites/default/files/social_prescribingvcsereport.pdf