

# AUKWSBH Health Forum SP Review Q1

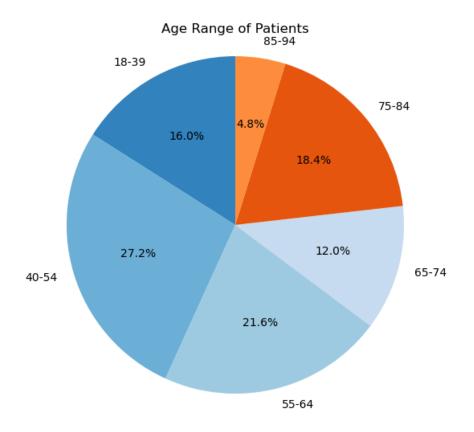
AUKWSBH currently hold the contract for Social Prescribing for the West Hove PCN. Only referrals from within the PCN, such as practice staff, can make a referral into the AUKWSBH SP team.

Took hold of the contract in April 2024 and recruited a new team of 4 to deliver the contract (equivalent to 2 FTE).

AUKWSBH received **125 referrals** throughout quarter 1.

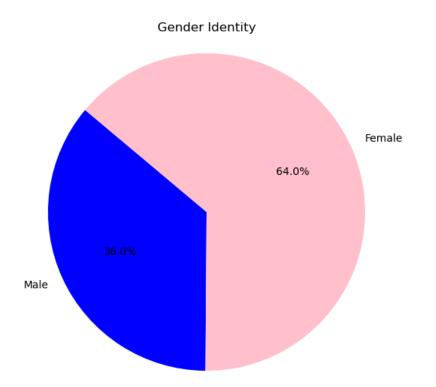
People Supported:

• The largest group of patients using the social prescribing service were aged 40-54 (27.2% of referrals).





• Referrals were predominantly female (64% of referrals) compared to 36% referrals for men.

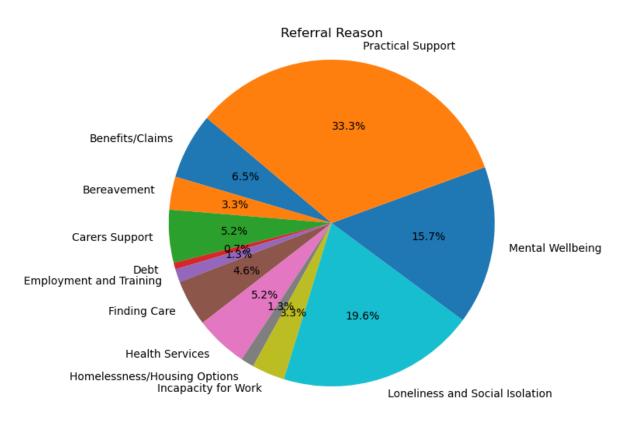


Reasons for Referral:

People were referred to social prescribing (SP) for a wide range of reasons (chart below). NB: people often have more than one reason for referral / more than one need.

The greatest reasons for referral were for Practical Support (33.3% of referrals), Loneliness & Social Isolation (19.6%) and Mental Wellbeing (15.7%).





#### Onwards referrals:

The top 10 onward referrals are outlined below

Onward Referrals and Signposts (top 10)	Q1 Apr-Jun
Age UK WSBH Information & Advice	2
Ageing Well	2
Community Connections	3
Brighton & Hove City Council	3
Local Food Bank	3
NHS Services	3
The Hangleton & Knoll Project	6
Healthy Life Styles Team Brighton	2
HOP50+ Cornerstone Cafe	2



St Vincents Tower House (Dementia Services)	2
---	---

#### Link Worker Insight on Patient Referrals:

#### 1. Weight Management (Ages 25-50):

 Referral Pathways: Patients can be referred directly to the Healthy Lifestyles Team (HLT) or engage with the HollyHealth App on their own. Some patients on the waitlist for social prescribing (SP) could benefit from being signposted to these resources directly, without coming to SP in the first place.

# 2. Referrals for Long-Term Health Conditions (Ages 25-55):

 Complexity: Patients with chronic conditions, often accompanied by mental health issues like depression or anxiety, require more than the standard six sessions due to the complexity of their needs, frequent relapses, and non-attendance at appointments.

# 3. Isolated Older Adults/Housebound Individuals (Ages 65+):

- **Engagement Barriers:** Many older, isolated, or housebound patients cannot participate in group activities due to a lack of transport and companions. Befriending, often isn't enough for people.
- Support Needs: These individuals frequently need help with life administration tasks but are reluctant to use their attendance allowance for paid support due to the cost of living.

# 4. Complex Family Issues & Carer Support:

- **Challenges:** Patients facing complex family issues, low income, or requiring carer support experience various difficulties, including social isolation, benefit disputes, and a lack of affordable respite care.
- **Support Needs:** Advocacy support is in high demand.

# 5. Barriers and Facilitators to Accessing Support:

- Key Barriers:
  - Lack of transport and personal assistance to help patients reach group settings.
  - Insufficient carer support and respite care options.
  - Limited advocacy services, with recent notifications that Mind and Possibility People no longer offer this service.
- Facilitators Needed:
  - Improved transport services and personal assistance for life admin tasks.



- Expanded home visit and buddying services, especially for those with mobility issues.
- Enhanced support for long-term engagement in social groups and appointments.