

Social Prescribing

What is Social Prescription?

Sometimes called community referral, it is a means of enabling NHS primary care practitioners (GPs, Nurses and other Healthcare Professionals) to refer or signpost patients into a range of local, non-clinical services often through contact with a NHS Link Worker. In addition, patients may also self-refer.

The key aim of social prescribing is to break the cycle of misery, loneliness and sometimes illness that occurs when people's ability to socialise has had an impact on their wellbeing. It is designed to reduce medication dependency and/or reduce emergency hospital admissions.

What is a NHS Link Worker, and how will I know of them?

NHS Link Workers are being recruited by GP Practices to assist primary care practitioners by finding appropriate solutions for patients which GPs and Nurses do not have the time to undertake. Not every Practice will have a single dedicated Link Worker, but often they will work within GP clusters. Contact can be made via the GP Practice Manager.

NHS Link Workers will be able to bridge services provided by the NHS, Social Services and the Voluntary Sector.

NHS Link Workers will make contact (normally through the Shed Secretary) to offer a referral and to discuss whether it is appropriate for the person being referred and the Shed. This contact may be face-to-face, and contact will be made initially after 1 week and then at roughly 3 – 6 month intervals to ensure there has been no drop out or where the patient no longer wishes to have contact with the service.

There is a useful website describing Social Prescription and research at [The Kings Fund](#).

What could Social Prescription mean for your Shed?

The key point is that there is no one answer to this question, as each Shed must make their own decision as to whether they have the scope and ability to accept a referred person into Shed membership. However, there will be key issues which Sheds will need to consider, and a non-exhaustive list is included below.

- Firstly, does the Shed have the capacity and the space in which to work safely?
- Have a meeting which can either be face-to-face or by telephone with the NHS Link Worker and establish what the referred person's needs are likely to be.

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- Does any adaptation of the Shed working environment need to be made – e.g. raising the workbench height, provision of seating, Disabled Access?

What are the benefits to Sheds of Social Prescribing?

Social prescribing offers opportunities for Sheds to support individuals in the community for whom attending a community group could help improve their lives – particularly through increasing physical and mental health.

- This can help some Sheds increase their membership numbers.
- In some areas there will be additional funding offered to develop and strengthen the capacity of community groups, and this could include Men's Sheds.
- It will enable further awareness of Men's Sheds to be spread
- Involvement with Social Prescribing Schemes offers the ability for Men's Sheds to demonstrate their value to the local community, increasing support, either financially, or in other ways, such as support from individuals with skills, fundraising or administration, to support the development of the Shed.

How can you respond to Social Prescription opportunities?

UK Men's Sheds recognise the autonomy of Men's Sheds being a strength of the movement and recognises that Social Prescription may work for some Sheds, but not for others.

Saying Yes...

You can say 'Yes' to getting involved and seek opportunities to actively promote yourselves with social prescribing schemes locally and make the connections with social prescribers (or alternative roles with a similar function).

If you're not ready to seek out opportunities proactively and get involved with Social Prescription, you can still welcome people into the Shed who are given the Shed's details, or when you're approached by any social prescribers.

When is it appropriate to no... ?

It is also ok as a Shed to say no to getting involved with Social Prescription. It might be worth considering your reasons for saying no – is it because you aren't confident in your ability to manage Sheddors with potential health conditions you don't know much about? Are you concerned it'll change the culture within the Shed? You may still say no, but if it's something you can change, you may wish to consider doing so.

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There may be good and valid reasons why the Shed should not accept the referral. It is not possible to provide an exhaustive list, but Sheds need to be aware that:

- They should not be regarded as being service providers of respite care; most Sheddors are not trained or have appropriate insurance cover to provide such care. If a person requires a carer to undertake normal daily life, then the carer too should come along and participate in Shed life.
- If a person who has been accepted is unwilling to engage with the Shed and cooperate with its policies, then they should be excluded from Shed membership.
- If a person has an unmanaged mental health, drug or alcohol issues, then it would not be appropriate to admit them into membership of the Shed.
- It may not be appropriate to admit an End of Life patient into Shed membership, and those who are at high risk of harming themselves and/or others.

It is important for you to discuss within the Shed your approach to Social Prescription. This might include discussion at 'management group' level (this may be trustees, or another group with similar responsibilities). It might also be prudent to speak with the Sheddors in the Shed, so that you can discuss any concerns they may have, such as a change to the culture in the Shed, and to enable Sheddors to have their say. If doubts are harboured, seek advice. You can contact UKMSA on 0300 772 9626, or email admin@ukmsa.org.uk.

How to get the best out of Social Prescription opportunities?

Be clear about your Shed's message – refine your narrative to be able to easily explain your purpose, what you do, and - just as importantly – what you don't do, in your Shed.

Look for opportunities – proactively meet with Social Prescribers to actively promote your Shed as an opportunity for individuals to join. You can also discuss with these prescribers how you can best obtain support for various medical conditions before you are approached, to be able to give a considered response and a warm welcome to someone referred.

Consider carefully if there is any funding available in your NHS, Social Care or Voluntary sectors to support the development and sustainability of groups involved with Social Prescribing. Funding can be a great boost to the Shed, however, carefully consider if there are any expected outcomes or outputs, interventions or methods that are a condition of the funding, and be confident in your Shed's ability to deliver. Such funding may also carry education, upskilling or training with it.

Educate yourselves on various health conditions that are most likely to be encountered within the Shed, and how you can best support individuals. This could be enabled by asking local medical or

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social care professionals, such as GPs or local hospital senior doctors, specialist voluntary sector service providers to give information, advice or training regarding different conditions – some of which Shed members may already have anyway. This should only be done within reason and ideally following discussion in consultation with people from the above groups. Sheds cannot be expected to be healthcare experts and staying within the Shed's boundaries of risk management and good safety is very important here. As one Shed states 'We care, but we're not a care service.' See the links at the end of this guide for various agencies and charities where you can learn a little more about common health conditions some of which may sound risky for the Shed, but by educating yourselves and seeking professional advice and training, you will be able to support where appropriate..

Ensure your policies, such as health and safety or membership conditions, are clear and up to date. If you do this before you engage with social prescription, you are less likely to be having to identify 'gaps' whilst managing enquiries which can increase your stress levels.

Some Sheds have times for various Shed sessions to cater for different needs, such as a dedicated Shed session, supported by volunteers, to provide a Shed opportunity for individuals with dementia. Consider whether such sessions offer potential for the Shed to expand its reach and whether it is deliverable. Once again, local third/voluntary sector organisations can be very helpful here and working with them can build up the capacity and capability of the local community, its services and its Shed(s).

Helpful Resources

UKMSA are working on developing further information sheets on health-related issues, which will be available on the UKMSA website as soon as they're available.

While we're working on it, you can [follow this link to see a list of websites](#) which have information regarding health conditions you may encounter in your Shed.

The Healthy London Partnership has an informative short video on Social Prescribing which can be viewed at youtu.be/O9azfXNcqD8