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Social Prescribing, Social Value and Social Return on Investment (SROI)

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RCSI UNIVERSITY OF MEDICINE AND HEALTH SCIENCES

Overview

- Social Prescribing
- Social Value and Wales School for Social Prescribing Research (WSSPR)
- Why is social value important?
- Social Return on Investment (SROI)
- Projects and outputs
- Vision

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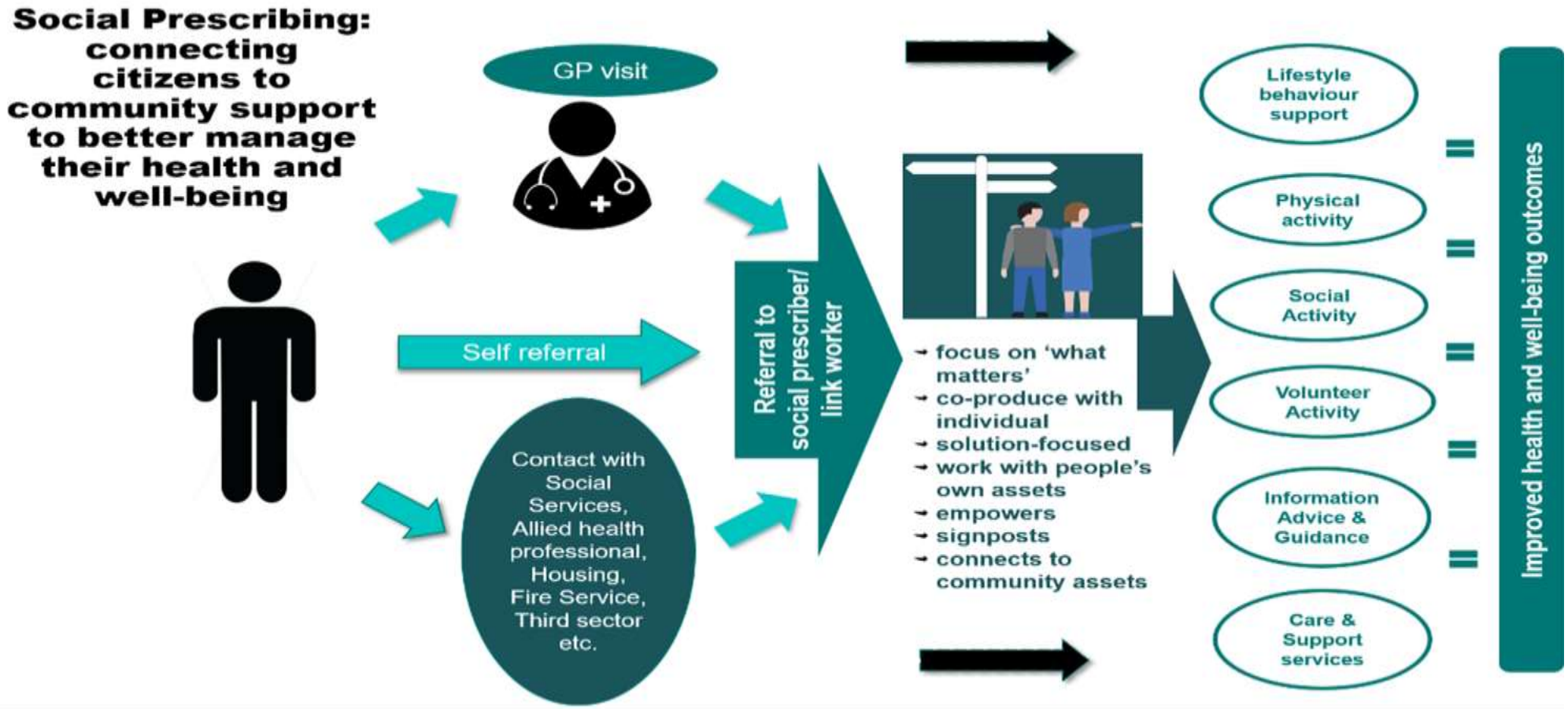
What is Social Prescribing



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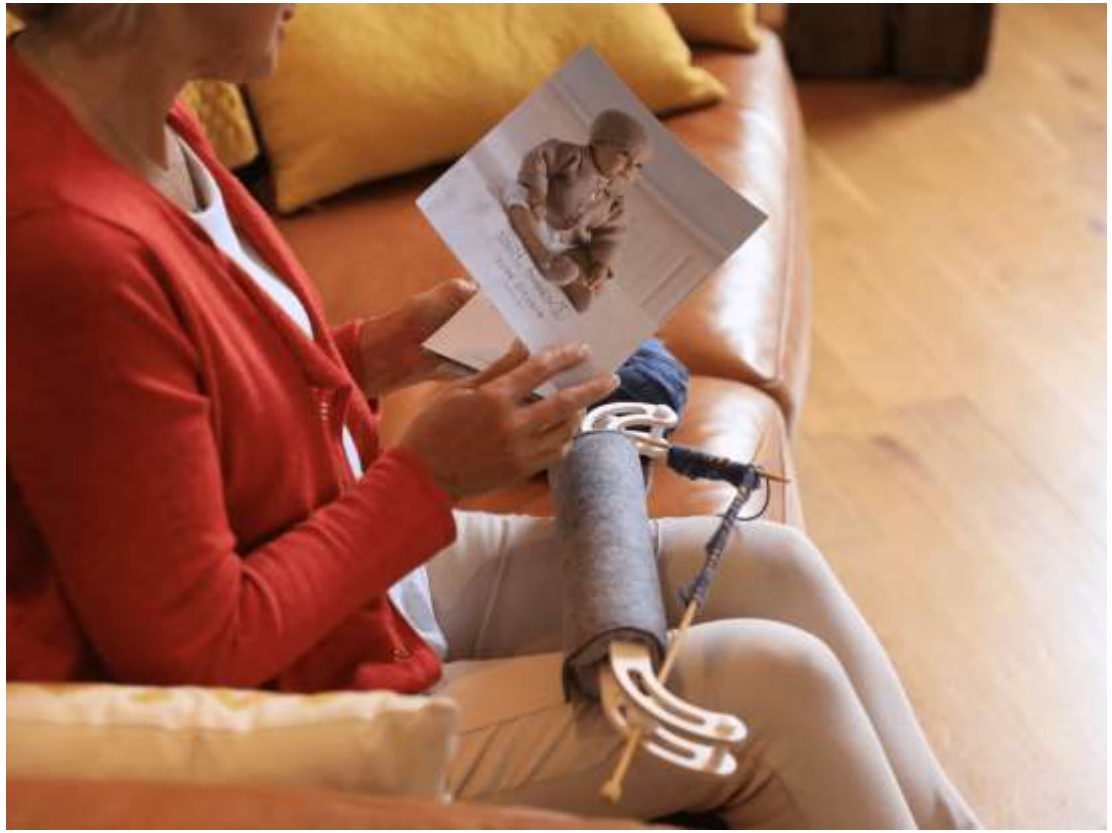
Why social prescribing?

- It’s the social in the biopsychosocial approach to the management of long-term conditions which is often forgotten.
- Empowers the individual to take an active role in promoting their wellbeing.



What Matters?

'What matters' conversation

Circumstances - What prompted you to contact us?

Outcome - What do you want to achieve? How will you know you've achieved it?

Risks - What is the impact if it does happen?

Strengths - What do you enjoy doing? Who do you call when xxx happens? What makes you happy?

Barriers - What is the biggest barrier to you doing this? What stops you from doing the things that make you happy?

Build a plan together after identifying presenting issue/s

Give CHOICE

Signpost to the right community assets at the right time

Ongoing support if required

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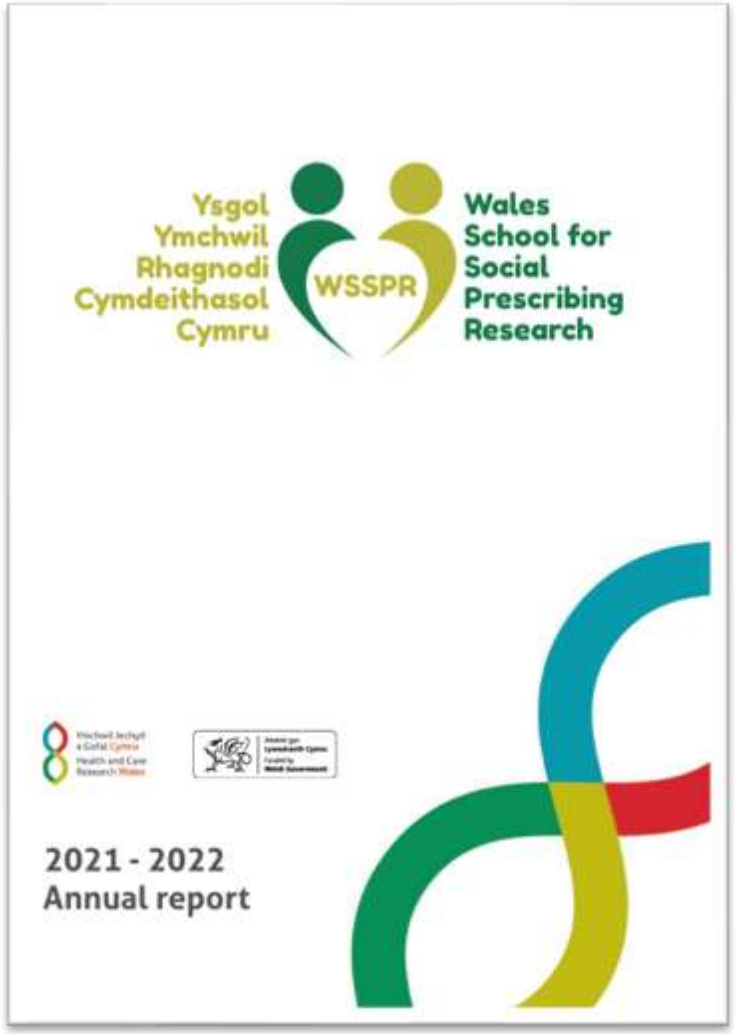
What is WSSPR?

- WSSPR is a virtual all-Wales school building on the work previously completed by the Wales Social Prescribing Research Network (WSPRN).
- WSSPR aims to build the critical evidence base for social prescribing in Wales and internationally.
- Funded since 1st April 2020 – 31st March 2023.
- **https://www.wsspr.wales/**

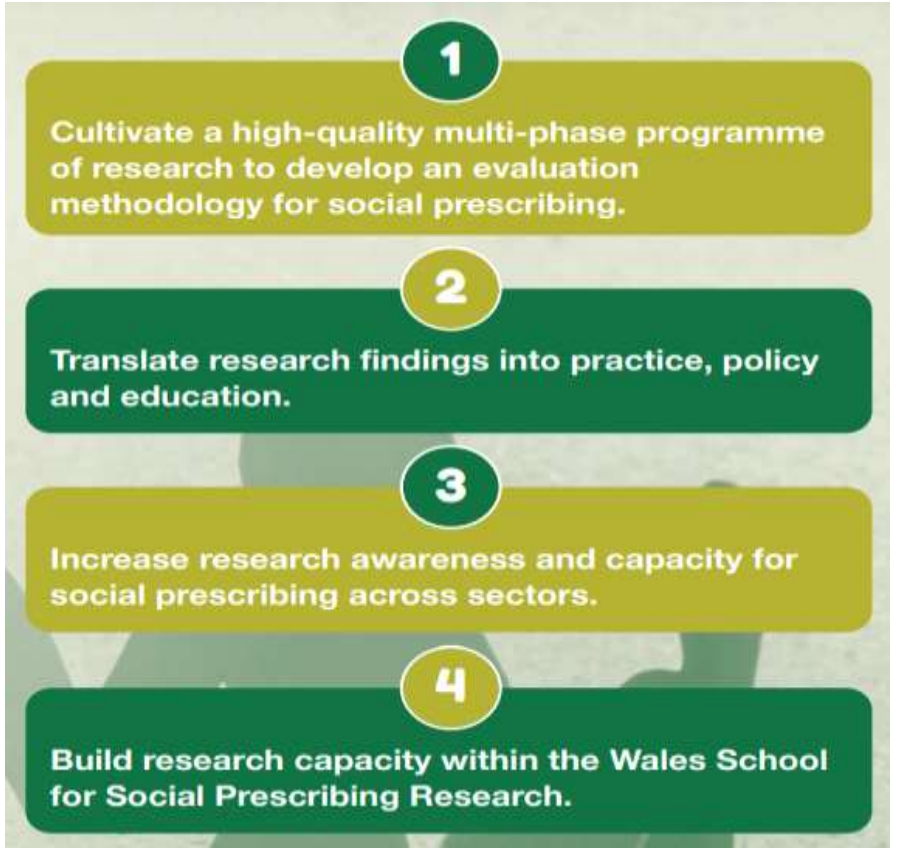


WSPPR aim and objectives

- WSSPR aims to deliver outputs and impact on

four established objectives

- The academic outputs and reported impacts are applied to shape and influence policy, practice, health and well-being



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Work packages

WP1- Evaluation of social prescribing interventions

WP2- Social value

WP3- Workforce and education

WP4- Wellbeing

WP5- Green, Art and Blue Spaces (GABS)

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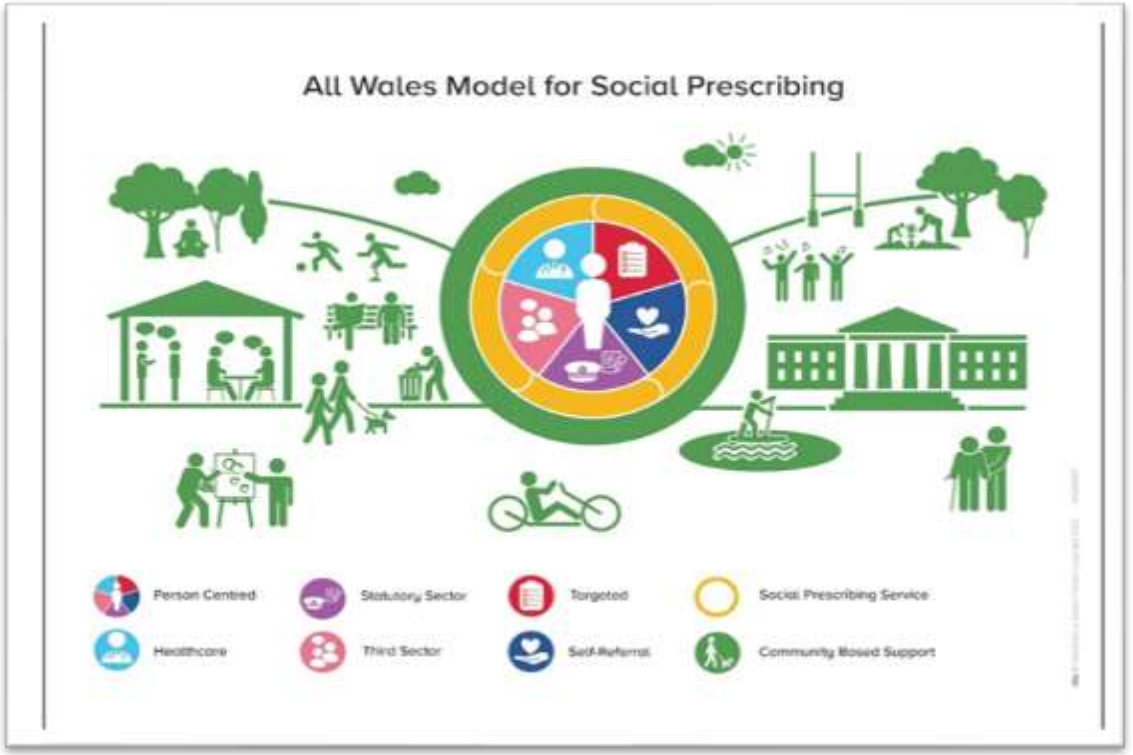
Consultation National Framework for Social prescribing

- Developing a national framework for social prescribing in Wales (March 2023).
- Ministerial task and finish group is working on four deliverables:
  - Understanding Social Prescribing Across Wales (Wallace et al, 2021)
  - Developing a national skills and competency framework for the social prescribing workforce in Wales (Dec 2022)
  - Glossary of Terms (Newstead & Wallace, 2023)
  - Evaluation reporting standards and CPD materials (Wallace, Davies, Nicholls, Lynch & Wallace, 2023)



Social Prescribing: Connecting citizens to community support to better manage their health and well-being' (Rees et al, 2019)

Health Economics

- Health economics provides a structured way of thinking, a framework for weighing up the costs and benefits of using scarce health care resources to meet our needs
  - What health and social care should we provide?
  - How should health and social care services be organised?
  - How should individuals in society gain access to health and social care services?

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Policy and Social Value

Public Services (Social Value) Act 2012

Public bodies required to consider how their services improve social, economic and environmental wellbeing

Procurement Reform (Scotland) Act 2014

Focus Government and public services on creating a more successful country, with opportunities for all of Scotland to flourish, through increased wellbeing, and sustainable and inclusive economic growth

Wellbeing of Future Generations (Wales) Act 2015

Public bodies have a legal obligation to improve social, cultural, environmental and economic wellbeing

Programme for Government: Our Shared Future (2020)

Irish Government has set out a commitment to utilising a well-being perspective to inform budgetary priorities as a complement to existing economic measurement tools

HM Treasury's Green Book (2022)

Recommends 'Social Cost Benefit Analysis' (Social CBA) to assess value for money based on how well interventions optimise social value (social, economic and environmental) in terms of costs and benefits

Well-being Framework (2022)

Irish Government are committed to integrating well-being and public policy, utilising a well-being perspective to inform the budgetary process

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Economic evaluation methods and determinants of Quality of Life (QOL)

- The National Institute for Health and Care Excellence (NICE) recommend the use of Cost Benefit Analysis (CBA) and Cost Utility Analysis (CUA) (NICE, 2013)
- HM Treasury advise the use of Social CBA for the evaluation of public health interventions (HM Treasury, 2022)
- Social Return On Investment (SROI) is a practical outcome-focused framework of SCBA which takes account of the economic, environmental and social value of interventions combining qualitative narratives as well as quantitative/ financial measurements of real-world research

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WHAT IS SOCIAL VALUE?

SOCIAL VALUE IS “THE BENEFIT TO THE COMMUNITY FROM A COMMISSIONING PROCUREMENT PROCESS OVER AND ABOVE THE DIRECT PURCHASING OF GOODS, SERVICES AND OUTCOMES

SOCIAL VALUE IS BEST APPROACHED BY CONSIDERING EACH LOCAL CONTEXT AND NEEDS

DETERMINE WHAT KIND OF ADDITIONAL SOCIAL OR ENVIRONMENTAL VALUE WOULD BEST SERVE THE NEEDS OF THE LOCAL COMMUNITY

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WHY MEASURE SOCIAL OUTPUTS, OUTCOMES AND IMPACT?

Improved programme management and more effective planning and effective evaluation

Increased understanding of the impact of work

Stronger communication of the value of work to ‘the people that matter’ (stakeholders)

Enhanced attention to the social, economic and environmental value created

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Why SROI?

SOCIAL INVESTORS SEEK EVIDENCE OF SOCIAL IMPACT (SOCIAL RETURN) THAT RESULTS FROM THEIR FINANCIAL INVESTMENT

MANY DIFFERENT PROFILES

(PHILANTHROPIST, VENTURE CAPITALIST, FOUNDATION OR GOVERNMENT)

SROI INDICATES THE VALUE OF THE SOCIAL IMPACT IN FINANCIAL TERMS

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Social Return on Investment

Estimating financial value creation

Invest a pound in a project, and more than a pound is returned within a reasonable time frame, that project is probably worth further consideration

SROI is a way to monetise the value of the social impact in financial terms

Key Terms

Inputs - resources invested in your activity; financial and nonfinancial required for the intervention/project to function

Outputs - the direct and tangible summary of activities, quantitative summary i.e., job

Outcomes - changes to people resulting from the activity, i.e., increased income, improved life satisfaction (health and wellbeing)

Impact = Outcomes less an estimate of what would have happened anyway

Stages and principles of SROI

How to do an SROI Analysis: Six Stages

1. Establishing scope and identifying key stakeholders.
2. Mapping outcomes.
3. Evidencing outcomes and giving them a value.
4. Establishing impact.
5. Calculating the SROI.
6. Reporting, using, and embedding.

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THE GREEN BOOK

CENTRAL GOVERNMENT GUIDANCE ON APPRAISAL AND EVALUATION

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Current projects

- Nature Based Social Prescribing: to Improve Student Social Connectedness and Mental Well-being – SROI evaluation to value student outcomes associated with green prescribing interventions and referral pathways
- Regional Integrated Fund (RIF):Economic evaluation: Social Return on Investment (SROI) with nested Cost-Benefit Analysis (CBA)
- The Body Hotel:Dance Movement Therapy (DMT) SROI evaluation will measure the increase in personal well-being and resilience experienced by participants. The SROI evaluation aims to measure the monetary and social value generated by of DMT placing a monetary value which is essential for sound policy in accessing investment while contributing evidence of dance/movement's impact on health.

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Outputs

International Journal of
Environmental Research and Public Health

MDPI

Article

Prevention of Poor Physical and Mental Health through the Green Social Prescribing Opening Doors to the Outdoors Programme: A Social Return on Investment Analysis

Abraham Makanjuola [1,*], Mary Lynch [2], Ned Hartfiel [1], Andrew Cuthbert [3] and Rhiannon Tudor Edwards [1]

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Abstract: There is growing interest in green social prescribing and connecting with nature-based activities to promote social cohesion along with improving levels of health, wealth and well-being. The Outdoor Partnership is a third sector organisation based in North Wales offering nature based social prescribing interventions. Individuals experiencing poor mental health and wellbeing are referred from GPs, community mental health services, and third sector organisations to the 'Opening the Doors to the Outdoors' (ODO) programme which is a 12-week outdoor walking and climbing green prescribing intervention. The purpose of the ODO programme is to provide a supportive environment to increase levels of physical activity among participants leading to improvements in overall health and mental wellbeing while promoting socialisation among peers. In this evaluation of a preventative green social prescribing intervention, a mixed method social return on investment (SROI) approach used quantitative and qualitative data from ODO participants. Data collection took place from April 2022–November 2022. Mental wellbeing data was collected at baseline and at 12 weeks using the Short Warwick Edinburgh Mental Wellbeing Scale, a social trust question, an overall health question, and the International Physical Activity Questionnaire- short form. Baseline and

Citation: Makanjuola, A.; Lynch, M.; Hartfiel, N.; Cuthbert, A.; Edwards, R.T. Prevention of Poor Physical and Mental Health through

International Journal of
Environmental Research and Public Health

MDPI

Article

Social Return on Investment of Social Prescribing via a Diabetes Technician for Preventing Type 2 Diabetes Progression

Adam Skinner [1,*], Ned Hartfiel [1], Mary Lynch [2], Aled Wyn Jones [1] and Rhiannon Tudor Edwards [1]

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[2] Faculty of Nursing and Midwifery, Royal College of Surgeons in Ireland, D02 YN77 Dublin, Ireland
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Abstract: In Wales, the prevalence of Type 2 Diabetes Mellitus (T2DM) has increased from 7.3% in 2016 to 8% in 2020, creating a major concern for the National Health Service (NHS). Social prescribing (SP) has been found to decrease T2DM prevalence and improve wellbeing. The MY LIFE programme, a scheme evaluated between June 2021 and February 2022 in the Conwy West Primary Care Cluster, aimed to prevent T2DM by referring prediabetic patients with a BMI of ≥30 to a diabetes technician (DT), who then signposted patients to community-based SP programmes, such as the National Exercise Referral Scheme (NERS), KindEating, and Slimming World. Although some patients engaged with SP, others chose to connect only with the DT. A Social Return on Investment (SROI) analysis was conducted to evaluate those patients who engaged with the DT plus SP, and those who connected solely with the DT. Relevant participant outcomes included 'mental wellbeing' and 'good overall health', which were measured at baseline (n = 54) and at the eight-week follow-up (n = 24). The estimated social value for every GBP 1 invested for participants who engaged with the 'DT only' ranged from GBP 4.67 to 4.70. The social value for participants who engaged with the 'DT plus SP programme' ranged from GBP 4.23 to 5.07. The results indicated that most of the social value generated was associated with connecting with the DT.

Keywords: Type 2 Diabetes Mellitus (T2DM); prediabetes; social return on investment (SROI); social prescribing (SP); physical activity (PA); overall health

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Citation: Skinner, A.; Hartfiel, N.;

Outputs

International Journal of *Environmental Research and Public Health*

Review

A Systematic Review to Examine the Evidence Social Prescribing Interventions That Apply a Co-Designed Approach to Improve Well-Being Community Setting

Gwenlli Thomas [1,*], Mary Lynch [1,2] and Llinos Haf Spencer [2]

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Abstract: This systematic review aims to investigate the e
productive approach to develop social prescribing interven
suggests that co-production and co-design are methods that c
as knowledgeable assets who can contribute to developing sus
Preferred Reporting Items for Systemic Reviews and Meta-An
atic literature search was conducted. Peer-reviewed articles w
experts and grey literature. The review search concluded wit
appraisal methods were influenced by the Grades of Recomm

check for updates

Citation: Thomas, G.; Lynch, M.;

Developing a conversati needs to embrace wellbe interventions: a qualitat

Llinos Haf Spencer, Mary Lynch, Gwenlli Thomas

Published Online November 26, 2021

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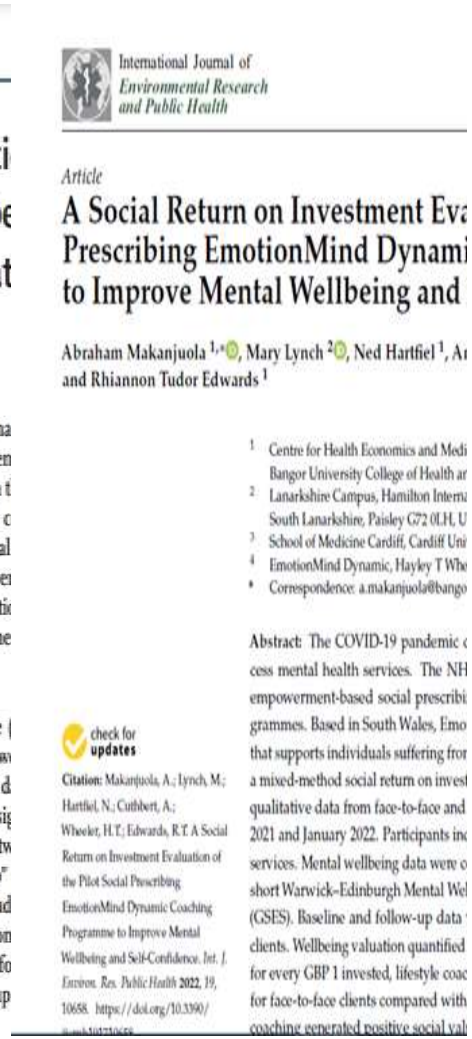
Abstract

Background Previous evidence suggests tha stakeholders in the development and implen settings. SP initiatives can be enhanced from t improve health and wellbeing outcomes for c with the residents of the Nantlle Valley, a rural the need for co-design, co-produced SP interve In line with the Well-being of Future Generati that would shape the sustainable developme future.

Methods A purposeful, convenience sample community members (white British) who w including emails and Facebook notices, and d citizen assembly deliberations and future desig the focus groups. This included conducting tw community today, and the "Legacy Group" SP interventions. Ethical approval for this stud Academic Ethics Committee (2020–16850) on participants were sent an electronic consent fo recorded at the beginning of each focus group



International Journal of *Environmental Research and Public Health*

Article

A Social Return on Investment Eva Prescribing EmotionMind Dynami to Improve Mental Wellbeing and

Abraham Makanjuola [1,*], Mary Lynch [2], Ned Hartfiel [1], A and Rhiannon Tudor Edwards [1]

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[2] Lanarkshire Campus, Hamilton Interna South Lanarkshire, Paisley G72 0LH, U
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* Correspondence: a.makanjuola@bango

Abstract: The COVID-19 pandemic cess mental health services. The NH empowerment-based social prescribi grammes. Based in South Wales, Emo that supports individuals suffering fro a mixed-method social return on invest qualitative data from face-to-face and 2021 and January 2022. Participants in services. Mental wellbeing data were c short Warwick-Edinburgh Mental Wel (GSES). Baseline and follow-up data clients. Wellbeing valuation quantified for every GBP 1 invested, lifestyle coac for face-to-face clients compared with coaching generated positive social val

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Citation: Makanjuola, A.; Lynch, M.; Hartfiel, N.; Cuthbert, A.; Wheeler, H.T.; Edwards, R.T. A Social Return on Investment Evaluation of the Pilot Social Prescribing EmotionMind Dynamic Coaching Programme to Improve Mental Wellbeing and Self-Confidence. *Int. J. Environ. Res. Public Health* **2022**, *19*, 10658. https://doi.org/10.3390/

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Social prescribing for frequent attenders in primary care: An economic analysis

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Background: Social prescribing (SP) is a mechanism to link patients with community groups and third sector organizations. It offers a complimentary approach to the traditional medical models to address psychosocial needs of patients more effectively and in turn aims to reduce demand on the NHS. The aim of this study was to explore the economic benefits related to changes in the use of healthcare resources following a social prescribing intervention in four primary care practices in Wales.

Methods: Quantitative data from routine healthcare usage was collected from the 78 participants pre and post-intervention. The participants were grouped into frequent attenders (FA) ($n = 21$) and frequent ($n = 57$) non-attenders (FNA), and a cost analysis was conducted to estimate cost variances based on healthcare unit usage over the length of the pilot intervention. These were then extrapolated forward to identify potential healthcare savings.

Results: The SP as an intervention generated the largest cost saving for FAs. The cost variance when FAs participated in the intervention shows there is a direct cost saving of £6,113 or £78.37 per participant over the 5 months of the intervention.

Conclusions: Results suggest there may be a cost saving associated with SP interventions, however caution should be exercised in interpreting the results due to the lack of control group in this study The cost saving were largest for FAs, where the intervention reduced healthcare unit usage as well as actual and inferred impact on associated healthcare costs. This suggests that in practice to generate the maximum cost benefit SP interventions could be targeted at FAs.

Vision

- Complement the established All Ireland Social Prescribing Network
- Build on established social prescribing links nationally and internationally and knowledge transfer e.g. WSSPR
- Additional source for dissemination of evidence in social prescribing
- Collaborative opportunity for further research based on priority needs for social prescribing in Ireland
- Submission of collaborative research grant applications and generation of research income
- Nurture high-quality social prescribing ‘real world’ research, development, and evaluation and translate social prescribing research/evaluation findings into practice, policy and education
- Build capacity for social prescribing through PhD and MSc studentships

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Thank you

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