

REQUEST FOR DIRECTOR DECISION – DD2419

Title: Development of Social Prescribing Projects 2019/2020

Executive Summary:

One of the Mayor's five key ambitions within the London Health Inequalities Strategy is to ensure that social prescribing becomes a routine part of community support across the capital, particularly for those in vulnerable or deprived communities. Social prescribing is where people receive non-medical help to improve their health and well-being.

This DD seeks agreement for expenditure to develop and deliver three projects to support the growth of social prescribing in London. Two of these projects support the voluntary community and social enterprise (VCSE) sector to participate in social prescribing. The third seeks a transfer of £20,000 from the social prescribing budget to the Team London budget to supplement Team London's 2019/2020 annual small grants programme which this financial year focuses on social prescribing, social isolation and volunteering.

This Decision is in accordance with MD2439 which set out the Health Team work programme for 2019/2020.

Decision:

That the Executive Director of Communities and Intelligence approves the following expenditure:

1. £25,000 to establish a voluntary community and social enterprise (VCSE) social prescribing network;
2. £25,000 to develop associated materials to support the VCSE to participate in the development and delivery of social prescribing; and
3. Transfer of £20,000 from the Health Team's social prescribing budget to the Team London small grants programme budget which focuses on social prescribing, loneliness and isolation and volunteering in 2019/2020.

AUTHORISING DIRECTOR

I have reviewed the request and am satisfied it is correct and consistent with the Mayor's plans and priorities.

It has my approval.

Name: Sarah Mulley

Position: Executive Director,
Communities and Intelligence

Signature:



Date: 17.12.19

PART I - NON-CONFIDENTIAL FACTS AND ADVICE

Decision required – supporting report

1. Introduction and background

- 1.1. Social prescribing is an initiative used to 'prescribe' non-medical help to improve people's health and well-being, usually through referring people to community activities delivered by the VCSE (voluntary community and social enterprise sector) in their local area. At least 20 per cent of people visit their GP for non-medical reasons and social prescribing is a way of ensuring that they get the most appropriate support. Social prescribing is well-evidenced and is increasingly recognised by health professionals and policy makers as a way of reducing health inequalities. Within the NHS Long Term Plan announcement in January 2019, funding was made available to recruit social prescribing link-workers, facilitators and learning and support co-ordinators across the country.
- 1.2. The London Health Inequalities Strategy set out the Mayor's ambition to support the growth of social prescribing in London. *Next Steps for Social Prescribing* was published in September 2019 and sets out a 10-year plan designed by the Greater London Authority, Healthy London Partnership and the Social Prescribing Network. It focuses on five principles: ensuring availability and easy access for all, keeping services localised and personalised and supporting the VCSE and workforce to deliver.
- 1.3. Next Steps will be delivered through four work-streams that the GLA, NHS and other key partners are taking forward:
 - championing and advocating for social prescribing;
 - developing digital solutions;
 - building a supported and valued workforce (including volunteers); and
 - supporting the VCSE sector to participate in social prescribing.
- 1.4. The proposals set out in this decision form are part of the fourth work-stream.
- 1.5. During the development of *Next Steps for Social Prescribing*, the GLA engaged with a large number of VCSE organisations and networks through formal and informal stakeholder events and via Talk London, and together developed priorities to support the engagement of the VCSE sector in social prescribing. These included:
 - improving opportunities for networking, sharing good practice opportunities, and keeping up to date on policy developments;
 - improving understanding of the commissioner's perspective and how local schemes are developed and delivered;
 - improving knowledge and support regarding safeguarding and appropriate referrals;
 - ensuring link-worker support and training covers information about how to engage with the VCSE sector and increasing understanding of how the sector works; and
 - building the capacity of the VCSE to deliver.
- 1.6. This led to further work with London Plus (formerly Greater London Volunteering), the umbrella organisation providing support and leadership for the VCSE sector in London, to set up an engagement group to explore the needs and requirements of the sector in more detail. This work showed that there was a clear need for a pan-London platform, uniting delivery organisations and stakeholders to develop a collective voice within the sector as well as materials aimed at the VCSE sector to aid outcomes development, evaluation processes and other materials as required. There is also clear agreement on the Mayor's role in facilitating better partnership working and funding opportunities.

1.7. To respond to these issues, we propose three distinct projects:

- **ESTABLISH A SOCIAL PRESCRIBING NETWORK:** Procure an organisation to act as a network co-ordinator to do the following:
 - Champion and highlight the role and value of the VCSE sector in developing and delivering social prescribing services;
 - Build the VCSE's knowledge and understanding of social prescribing as it develops in London, to create a better understanding of the model for those involved in delivering programmes, but also to support wider public understanding;
 - Consider how to more effectively use and commission research and evaluation;
 - Explore how we can develop common evaluation approaches that would contribute to a more robust picture of social prescribing activity and impact across London;
 - Act as a bridge between NHS and VCSE partners providing practical support/knowledge sharing and developing case studies; and
 - Develop relationships between NHS structures and VCSE organisations helping to identify areas of need/resource and offer strategy and advocacy support (e.g. procurement processes).
- **DEVELOP A RANGE OF TOOLS AND RESOURCES FOR THE VCSE TO ENGAGE IN SOCIAL PRESCRIBING:** Create and share tools and materials as requested by the VCSE sector to aid engagement in social prescribing, including:
 - Evaluation and outcomes development tools;
 - Communication guides;
 - Partnership guides, both for the VCSE sector but also for statutory commissioners to help them develop better understanding of the role of VCSE partners in progressing social prescribing and how to work better together; and
 - A community directory guide which sets out what a good community directory should look like and showcases examples of good practice.
 - This procurement would also include a short review to pick up other requirements of the VCSE sector, picking up from previous work that the GLA and others have commissioned to map gaps in resources for the sector.
- **EXTEND THE TEAM LONDON APPROACH:** Team London is the Mayor's volunteering programme, and this year their small grants programme focuses on social prescribing and loneliness and isolation. The programme objectives were developed in collaboration between Team London and the Health team. 98 applications were received, and many focussed on how projects could strengthen their referral routes to the NHS and local authority schemes, expand existing services or work with a new cohort, for example with young people. The quality of applications was very high and 15 of the highest scoring projects with a value of £144,000 are currently undertaking due diligence. The current Team London budget for the programme is £100,000 and we propose to supplement this with £20,000 from the social prescribing budget to ensure that an additional 2-3 projects can be funded. This is in line with our ambition to showcase good practice models and demonstrate the value of the VCSE in delivering social prescribing in London.

2. Objectives and expected outcomes

- 2.1. We need growth in London's social prescribing capacity to support the acceleration needed to deliver the Mayor's objectives to reduce health inequalities. However, increasing referrals to VCSE services

will put additional pressure on a sector already struggling to provide services or access social prescribing funding. Although many excellent examples of cross-sector working exist across London, the VCSE's capacity is limited, and as a result the sector is not fully engaged in the development and delivery of local plans for social prescribing.

- 2.2. These proposals meet the objectives set out in the Healthy Communities chapter of the London Health Inequalities Strategy to help achieve the Mayor's aim that all London's diverse communities are healthy and thriving and specifically to:
 - ensure that Londoners are empowered to improve their own and their communities' health and well-being; and
 - ensure that social prescribing becomes a routine part of community support across London.
- 2.3. We anticipate that these projects will achieve the following outcomes:
 - contribute towards strengthening social prescribing infrastructure and delivery in London; and
 - enable VCSE organisations to participate more effectively in developing and delivering services for social prescribing and enhance sector engagement with service commissioners, Primary Care Networks and other key stakeholders.

3. Equality comments

- 3.1. The growth of social prescribing sits within strategic objective 33 of the Mayor's Equalities Diversity and Inclusion (EDI) Strategy for London: *"To co-produce with partners, including the VCS, NHS and local authorities, a social prescribing vision and next steps for London that sets out the approach to expanding social prescribing across London and particularly with the most deprived communities including the elderly, those with long term medical conditions and those with complex medical and social needs. As part of this work explore with partners how more Londoners can get access to specialist social welfare advice, including legal and housing advice, that people need but is increasingly difficult to access"*.
- 3.2. Social prescribing, supporting individuals to deal with a range of issues that affect their health and well-being, can benefit everyone but is of particular advantage to those with multiple, complex health and other needs such as housing issues and access to social welfare legal advice. Some existing schemes focus on specific medical issues or age-groups, for example, long-term conditions such as diabetes and older people. Therefore, social prescribing has the potential to have a specific and positive impact on multiple groups with protected characteristics under the Equality Act 2010.
- 3.3. The Mayor is committed to championing, supporting and enabling the voluntary sector in their role as providers of community activities and services on which social prescribing depends. The proposed work streams outlined here have been informed by a number of engagement exercises with the VCSE, including through Talk London as well as by members of the Social Prescribing Advisory Group (SPAG) and colleagues across the GLA including the Community Engagement Team.
- 3.4. As the issues of social prescribing, loneliness and isolation cut across many different strands of equality, the Health Team will work with the Equality and Fairness Team to ensure that those most impacted are targeted including Londoners from the most deprived communities, those with long term medical conditions and those with complex medical and social needs. We will ensure that communities most in need are considered as part of the planning, development, delivery and monitoring stages to ensure compliance with the Equality Act 2010.

4. Other considerations

Key risks and issues

- 4.1. Although social prescribing is not new, the ambition from NHS and other service commissioners to formalise the approach, whilst also ensuring that services remain local and accessible, does raise some

challenges. Rapid growth of the sector could result in current (mainly VCSE) referral services not meeting demand, or the sector not having the capability or infrastructure to engage fully with social prescribing. These proposals seek to go some way to identify and alleviate some of these issues, particularly in respect of sharing good practice and ways of working across the VCSE.

Links to Mayoral strategies and priorities

- 4.2. As well as being a major ambition within the London Health Inequalities Strategy, the growth of social prescribing also features within the Culture, Environment and Sports strategies and the London Food Plan. Given that the support people can seek through social prescribing varies significantly for each individual (for example housing, benefits, fuel poverty, employability, disability rights advice alongside activities such as projects to reduce loneliness and isolation and access to adult education to name just a few) with a number of teams across the GLA have an interest in social prescribing and a GLA-wide group has been established to keep track of the policy interest and any associated projects for each team.

5. Financial comments

- 5.1. Approval is being sought for expenditure of £50,000 for the procurement of;
- establishing a voluntary community and social enterprise (VCSE) social prescribing network (25k) and
 - the associated materials to enable development and delivery of social prescribing by the newly established VCSE (25k).
- 5.2. Approval is also being sought to transfer £20,000 budget to the Team London Small Grants programme within the Communities and Intelligence Directorate.
- 5.3. All approvals are to be funded by the 2019/20 Social Prescribing programme budget, held with the Health Unit. All necessary budget adjustments will be made.

6. Legal comments

- 6.1. The foregoing sections of this report indicate that the decisions requested of the Executive Director concern the exercise of the GLA's general powers, falling within the GLA's statutory powers to do such things considered to further or which are facilitative of, conducive or incidental to the promotion of economic development and wealth creation, social development or the promotion of the improvement of the environment, in Greater London. In implementing the proposals in respect of which a decision is sought, officers should comply with the GLA's related statutory duties to:
- 6.1.1. pay due regard to the principle that there should be equality of opportunity for all people;
 - 6.1.2. consider how the proposals will promote the improvement of health of persons, health inequalities between persons and to contribute towards the achievement of sustainable development in the United Kingdom; and
 - 6.1.3. consult with appropriate bodies.
- 6.2. In taking the decisions requested, the Executive Director must have due regard to the Public Sector Equality Duty under section 149 of the Equality Act 2010, namely the need to eliminate discrimination, harassment, victimisation and any other conduct prohibited by the Equality Act 2010, to advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, gender, religion or belief, sexual orientation) and to foster good relations between persons who share a relevant protected characteristic and persons who do not share it. To this end, the Executive Director should have particular regard to section 3 (above) of this report.

- 6.3. Section 1 of this report indicates that the GLA intends to procure services. Section 9 of the GLA Contracts & Funding Code requires the GLA to, in respect of services valued up to £25,000, seek a call-off from a suitable framework where possible or, if not, seek three or more written quotes before the commencement of the services.

7. Planned delivery approach and next steps

- 7.1. The two projects to support the VCSE to engage with and deliver social prescribing activities will be procured in accordance with the Contracts and Funding Code and other GLA procurement procedures. The funding to supplement the Team London small grants programme will be allocated in accordance with the programme grant conditions.

| Activity (for VCSE projects) | Timeline |
|---|---------------------------|
| Procurement of contract | December 2019 |
| Delivery Start Date for project proposals | January 2020 |
| Final evaluation starts and finish (self) | January 2020 – April 2020 |
| Delivery End Date for project proposals | April 2020 |
| Project Closure: for project proposals | April 2020 |

Appendices and supporting papers:

None.

Public access to information

Information in this form (Part 1) is subject to the Freedom of Information Act 2000 (FoIA) and will be made available on the GLA website within one working day of approval.

If immediate publication risks compromising the implementation of the decision (for example, to complete a procurement process), it can be deferred until a specific date. Deferral periods should be kept to the shortest length strictly necessary. **Note:** This form (Part 1) will either be published within one working day after it has been approved or on the defer date.

Part 1 - Deferral

Is the publication of Part 1 of this approval to be deferred? NO

Part 2 – Sensitive information

Only the facts or advice that would be exempt from disclosure under FoIA should be included in the separate Part 2 form, together with the legal rationale for non-publication.

Is there a part 2 form – NO

ORIGINATING OFFICER DECLARATION:

Drafting officer to confirm the following (✓)

Drafting officer:

Jill Wiltshire has drafted this report in accordance with GLA procedures and confirms the following:

✓

Assistant Director/Head of Service:

Jazz Bhogal has reviewed the documentation and is satisfied for it to be referred to the Sponsoring Director for approval.

✓

Financial and Legal advice:

The Finance and Legal teams have commented on this proposal, and this decision reflects their comments.

✓

Corporate Investment Board

This decision was agreed by the Corporate Investment Board on 16 December 2019.

EXECUTIVE DIRECTOR, RESOURCES:

I confirm that financial and legal implications have been appropriately considered in the preparation of this report.

Signature

M. D. Allen

Date

17.12.19

