



County Down Rural Community Network

Social Prescribing in Down district

The role of the Voluntary, Community and Social Enterprise (VCSE) Sector

Report of an information and planning workshop

Ballymote Centre, Downpatrick

Thursday 7 February 2019

1. Introduction

Representatives of VCSE organisations in Down district were invited through multiple media channels to attend and participate in a workshop to consider the issues emerging from plans for social prescribing projects in Down district through 2 initiatives

- County Down Rural Community Network's (CDRCN) participation as a Healthy Living Centre in an Northern Ireland/Scotland project on social prescribing funded by the UK National Lottery Community Fund (formerly the Big Lottery Fund) and the Department for Agriculture, Environment and Rural Affairs
- Developing plans by the South Eastern Health and Social Care Trust and the GP Federation for Down district to make changes in primary care and roll out Multi-Disciplinary Teams in GP surgeries including developing social prescribing as an option for patients

Details of participants and organisations who attended are set out in Appendix 1.

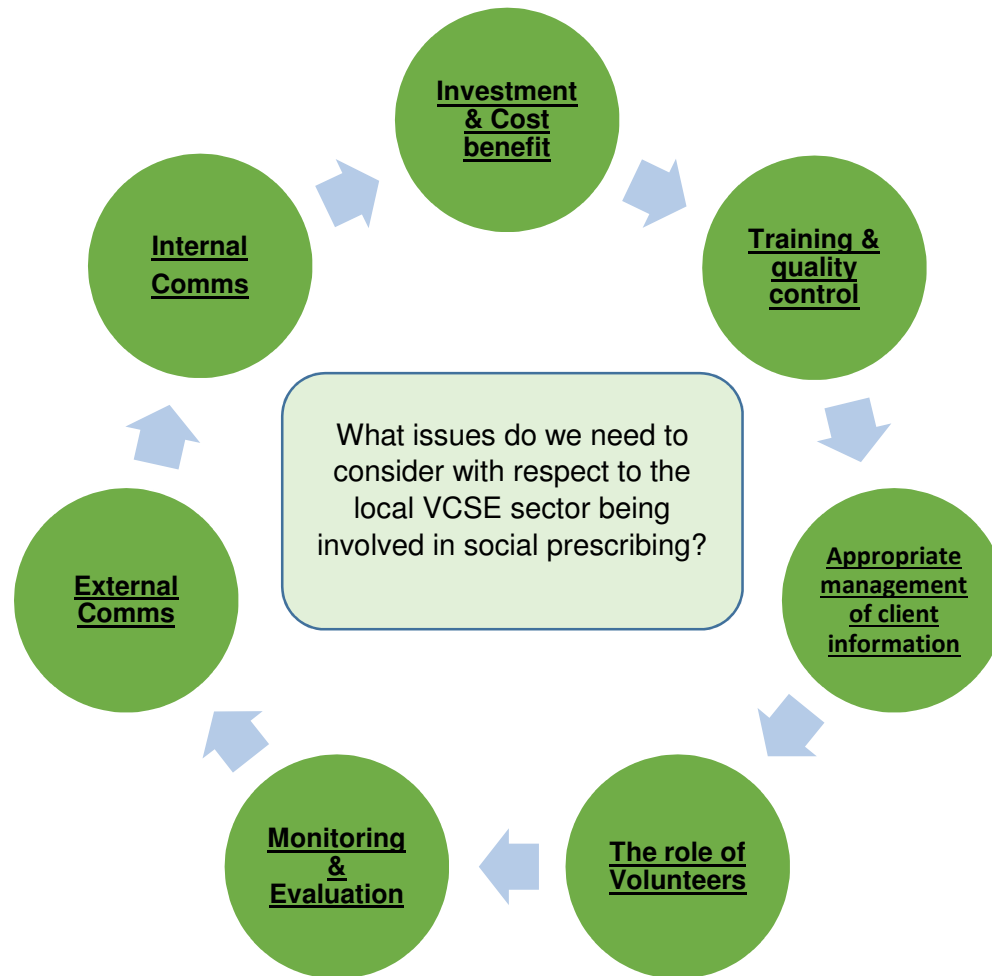
2. Process

The information and planning workshop was delivered using The Institute for Cultural Affairs, Consensus Workshop Method. This allowed all of the group to work together and through consensus identify the key issues to be considered with respect to the local VCSE sector/organisations being involved in social prescribing.

3. Agenda

Nicholas McCrickard, Network Manager, CDRCN and Nigel McKinney, Social Prescribing Consultant CDRCN made a presentation on their work to date on social prescribing and the opportunities and challenges therein and outlined the purpose and agenda of the workshop. The presentation is set out below as Appendix 2.

Participants worked first individually and then collectively and identified the key issues as follows without priority.



Under the process, the individual issues were identified, then grouped and each group given a name.

Investment and benefit	Cost	Training and quality control	Appropriate management of client information	The Complementary role of Volunteers	Monitoring and Evaluation	External Communication	Internal Communication
Cost	Training/insurance for the group	Confidentiality – IT systems and users of need to be discreet	Volunteers – recruitment of new volunteers	What happens after the 12 contacts?	Public need informed about Social Prescribing	Appropriate match ; client/service compatibility	
Start-up costs for new schemes – travel, tools for a bigger clientele	Staff training	Client confidentiality	Uncertain volunteer base	Are we making a difference – evaluation		Clarity to client on VCSE services	
Sustainability after 12 weeks(intervention) and long term	Group preparation before referrals	Data Protection between client and VCSEs	Additional support needs for clients, carers and providers	Meeting client expectations		Holistic approach	
Staff time	Quality assurance including evaluation of service providers	Sharing information from multiple suppliers about 1 client – reporting, feedback, safeguarding				A live database – of services/opportunities	
Have we the capacity to deliver	Fear of clients and their issues	Data protection				Data collection of opportunities	
	Standardisation					Two way communication with/between all parts of the process	

	Existing capacity within groups					Right to reject someone
						Checking resources with VCSEs before referral
						Inclusion and equality issues incl language barriers
						A good referral procedure that works for everyone – client and provider
						Building a database
						Referrals – access and consistency

Participants were then asked what they thought CDRCN should do next to advance plans for Social Prescribing in the district.

4. What do you think we should do next?

- Plan and communication
- Put processes in place to ensure effective delivery
- Meet all potential providers and get to know existing procedures capacity and needs
- All agencies involved need to be brought together
- Model of referral pathway needs to be decided upon and clear to all
- Feedback on progress
- Collate and inform all groups of outcomes and findings
- Two way engagement with groups (questionnaire) – what each offers
- Future developments need to be communicated to all
- Combine and condense all feedback

- Communicate often with stakeholders
- How do service providers get onto a list to be involved?
- Clear boundaries
- Capture case studies which embody successful social prescribing
- Link with draft Programme for Government
- Inform us how we can be involved
- Need groups willing to sign up to be part of this

5. Workshop evaluation

What was good?	What could have been better?
Exercise on wall	Free parachute paper (sticky wall) for everyone!
Presentation excellent	
Engaging	
Informative	
Opportunity to engage at early stages	
Good interaction	
Very informative and opportunity to share ideas	
Love the distilling of huge number of ideas into proper categories	
Very informative	
Very interesting , great idea	
Good facilitation, moving fast and interesting	
Good contributions	
Valuable information	

6. Appendix 1 Participants

Attended by	Organisation
Deborah Boden	Down Community Transport
Mary Jane Burns	The Health and Wellbeing Company CIC
Michaela Hannaway	Model Farm Community Association
Brooke Harshberger	Journey Community Church & Counselling Downpatrick
Hilary Hunter	Wellbeing in a Rural Environment
Tucker Leavy	Journey Community Church & Counselling Downpatrick
Karen Maitland	Ballynahinch Walking Group
Leanne McBrearty	Bogside and Brandywell Health Forum
Alison McCaw	ADHD Parents Support Group
Colin McKinty	Glebe House
Abby McSherry	Strangford and Lecale AONB
Roisin Morgan	SERC
Kellie Murray	Community Advice Newry, Mourne and Down
David Napier	Ballynahinch Walking Group
Fiona Neely	SERC
Richard Orme	Ballynahinch Community Collective
Sarah Sharp	National Trust NI
Audrey Slater	Ballynahinch Community Collective
Roisin Irskine	YogaLeles
Barbara Graham	Dundrum Village Association
Laura Kendall	Model Farm Community Association
Joanne Stroud	Action Mental Health New Horizons Downpatrick

7. Appendix 2 Presentation



Newcastle Presentation NMK 050219.pptx