

ADUR & WORTHING  
COUNCILS

Joint Strategic Committee  
11 September 2018  
Agenda Item 9

Key Decision [~~Yes~~/No]

Ward(s) Affected: All

## Going Local - a prescription of a different kind

### Report by the Director for Communities

#### Executive Summary

##### 1. Purpose

The purpose of this report is to update Elected Members on the progress of *Going Local*, a social prescribing service which has been live in Adur and Worthing since November 2016. The 1,000th person will soon be referred into the service.

The project is a key deliverable in *Platforms of our Places* as *Going Local* promotes good physical and mental health of our communities, specifically addressing the wider determinants of health in our localities (2.6.1).

There are plans to extend the project which is also covered in this paper.

##### 2. Recommendations

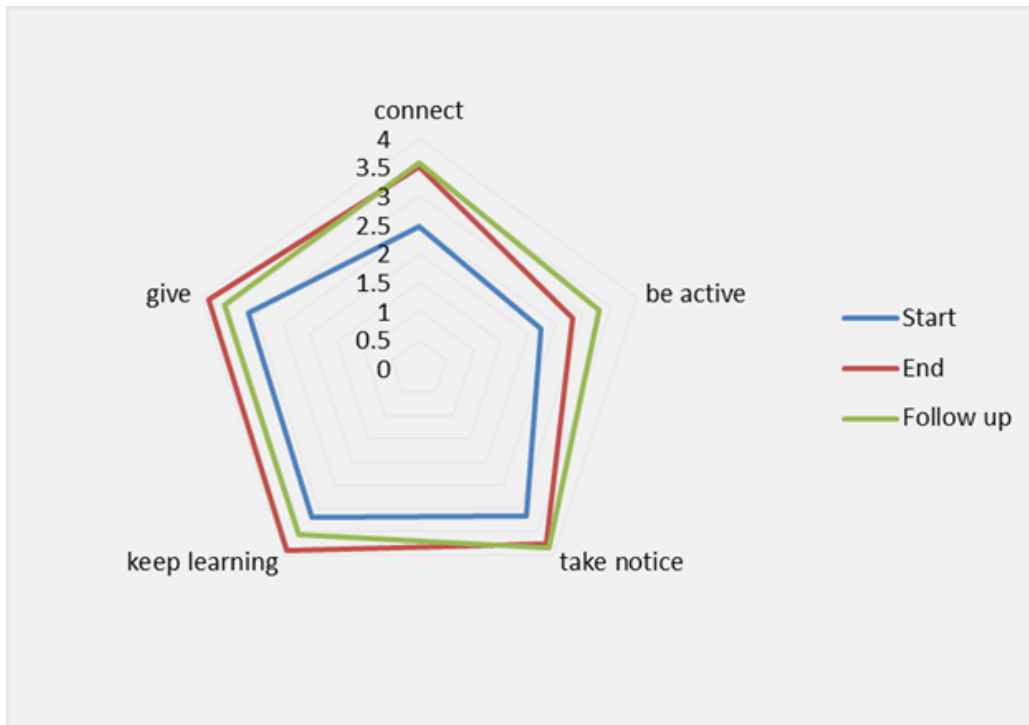
- 2.1 It is recommended that the Joint Strategic Committee note and celebrate the impact of *Going Local*.

### 3. Context

- 3.1. At the Councils' Joint Strategic Committee in April 2016, Executive Members agreed to a co-fund and host at Adur and Worthing Councils a new social prescribing project called 'Going Local'. The first person was subsequently referred to the service in November 2016.
- 3.2. Going Local is a pilot of a new co-commissioned and co-designed approach with Adur and Worthing Councils (AWC), Coastal West Sussex Clinical Commissioning Group (CWCCG) and West Sussex County Council (WSSCC).
- 3.3. Going Local's strategic purpose is to provide a way in which we can identify and tackle the increasing burden of 'failure demand' i.e the demands caused by the failure to do something or to do something right for the customer. In this instance the description relates to the demand for health services, in circumstances where the need is for another form of help, and that need has not been identified and/or met. Crucial, therefore, to the success of the service, is the person centred and holistic approach of the Community Referrers.
- 3.4. Briefly, Going Local is available in six GP practices in Adur and Worthing. There are two full-time Community Referrers on the team who take referrals directly (and only) from doctors and clinical staff through a digital App. The Community Referrers work with the person for as long as is needed and physically see them up to six times (the average is 3). They then refer and connect the individual to a whole host of voluntary, statutory and private services using another digital App called Find-it. Simply put, Going Local is the dispensing of social medicine, leaving the prescription of clinical medicine to GPs.
- 3.5. It is important to frame this work in the wider local and national context of social prescribing, which is - as a movement - gathering some pace across the country as a powerful way of supporting people to make effective and lasting improvements to their health and wellbeing. This work is very much part of and is connected to the national and regional Social Prescribing Networks. It has also helped to shape the development of social prescribing projects - modelled on Going Local- in the Local Community Networks in Coastal West Sussex, as part of the health integration agenda. Being part of this wider agenda is important to secure ongoing support and investment to this work. At the time of writing, a proposal for social prescribing across West Sussex is

being prepared and considered as part of commissioning in West Sussex.

- 3.6. This report is to update Elected Members on the progress of the project 18 months+ later. In Appendix one, a stand-alone summary paper can be found which details the day-to-day running and impact of Going Local, which helps to provide the full context for this report.
- 3.7. There are many success and good news stories as well as a long list of lessons learned during the Going Local journey to date. Some of the key areas are shared below:
- 3.8. **Going Local is good for people.** We are frequently told that people feel stronger, more resilient and able to cope with the many challenges that life presents. GPs have ten minutes with patients, our community referers have hour-long sessions, delivered flexibly at the persons pace and in accordance with their needs. Time and time again, we are told that just having space to talk and be listened to is empowering in itself. Evidenced is being collected using a validated evidence based tool - the 'Wellbeing Star' is a tool that is widely used to measure people's feelings in five different domains - we have seen self-scores increase for individuals. The Wellbeing Star data is gathered at three points - the beginning of the intervention, the end and three to six months after the end. The following chart represents 138 as the baseline, 34 people at the end and the follow-up based on 7 people so far:



This data tells us that people feel better connected, more active, able to give, keep learning and take notice more. Case-studies, some examples in Appendix two, show that Going Local is supporting people to change their own lives. It provides a stabilising element previously absent in some people's lives enabling them to engage and integrate more with their community.

- 3.9. **Going Local is good for Primary Care.** Whilst the number of appointments has not decreased, the use of the a person's appointment time with a clinician has improved considerably, as wider social problems are being dealt with by the community referrers and the patient, allowing the GP to focus on medical issues. This is crucial given some of the challenges we have nationally with the number and retention of GPs. Going Local is being evaluated by WSCC Evaluation and Evidence team and this has been evidenced by them. The Researcher has permission, where granted by those referred, to look through medical records, and talk to GPs. There has also been a reduction in no-shows and cancelled appointments. Going Local demonstrates that using different approaches, knowledge and skills, provides a more holistic service to patients, which is creating significant benefit and positive impact for our local GPs, the wider health system and patients. One GP said:

*“In today’s stressful society, the Going Local initiative is absolutely an essential part of the Primary Care Team. It provides an invaluable service to those patients that need that extra support to work through difficult life situations, leaving the clinicians to manage their medical care. The team are all friendly, knowledgeable and grounded and need to always be part of the overall team working in General Practice.”*

- 3.10. **Going Local highlights key themes.** Unsurprisingly, the data from Going Local can be used to identify issues, highlighting both assets and needs. Areas such as the challenging landscape of mental health provision; that people are experiencing multiple and complex issues or that housing and
- 3.11. finances have a huge impact on people’s health and wellbeing - and that quite often all of these are intertwined. The critical need to support people to retain their homes in order to be able to deal with other issues, led to the recommendation to Joint Strategic Committee in January 2017 to use grant funds to support a new unique housing advice service.

Since May 2018, this service jointly delivered by Citizens Advice, working in partnership with Worthing Churches Homeless Projects, a Wellbeing Housing Advice Team (WHAT) Advisor takes referrals directly from Going Local, providing the team and the individual with immediate support to begin to unpick and address complex housing issues. The WHAT Advisor sits within the Councils’ Housing Team which has been crucial in ensuring consistent approaches and shared knowledge and understanding. For the individual being helped, we think they open up in a different way because Citizens Advice is independent to the Council. The WHAT Advisor also helps people to see what the most pressing and urgent matters are - to assist in resolving their housing issue (often different from what the person may think).

- 3.12. **Going Local is developing assets for the future:** The Community Referrer role requires some truly unique individuals, skills and experience - and the recruitment, training, leadership and development of the team is paramount. Digital interest and support has also played a big part to the success of team. The Councils’ Digital Team were successful in applying for money from the Local Government Association which enabled us build and develop our own case-management and referral tool on Matsoft. We continue to improve and develop the tool but also share with other organisations

outside Adur and Worthing; at the time of writing, Chichester District Council are considering using it. The Going Local App has definitely made compliance with new data protection regulations straightforward, and as we have no paperwork and are agile in our approach to work, it supports wide ranging access, e.g. a tablet at someone's kitchen table if they are housebound!).

In July, Local Government Minister Rishi Sunak MP spoke about '[the local digital declaration](#)' at the Local Government Association Annual Conference 2018, and we were thrilled to be named as using digital solutions well. He said:

*"Today, we now think nothing of checking the location of trains in real time, or looking round a hotel room halfway across the world before booking it.*

*And doing all of that from something that fits in our pocket.*

*This revolution has affected public services too....*

*Adur & Worthing is piloting the Going Local service. And here GPs are directly referring can directly referring patients to the council's social prescribing team, helping thousands of them become fitter or stop smoking."*

- 3.13. **Collaboration in Action:** The project is jointly funded and the tripartite arrangement is replicated in the strategic oversight of the project. The steering group meets regularly to review progress and support continued evaluation and development of the service, as well as understanding how the wider parts of the system can help (or hinder) this work.
- 3.14. In summary, Going Local is a small-scale experiment of how different organisations working collaboratively and differently, with a person centred approach, that is agile and developmental, can work across complex systems and competing priorities *and* can have a significant and lasting impact.
- 3.15. We await the final formal evaluation from WSCCs Evaluation and Evidence Team in Spring 2019, and look forward to sharing this in due course.

#### **4. Issues for consideration**

- 4.1. Elected Members are not requested to consider any options, more to note the progress and impact of the project to date.
- 4.2. There are further surgeries that would like to have Going Local and there are discussions regarding funding to make sure this is right and will remain sustainable. One is Ball Tree Surgery in Adur, and we are working closely with partners to make this happen. This would mean additional recruitment on the existing Going Local team. There are also surgeries in Worthing who can see the success of the project and would also like to have it in their practice.

#### **5. Engagement and Communication**

- 5.1. Going Local is only advertised amongst the active six GP surgeries in Adur and Worthing. The team regularly distribute fliers and other materials, and attend Practice Meetings to give an update on the wider project. Based in the practices, the Community Referrers also frequently talk with GPs and can discuss specific cases together.

#### **6. Financial Implications**

- 6.1. The initial project dates were September 2016 (to include recruitment and training) to September 2018.
- 6.2. In May 2018, all current funding partners confirmed extended funding for two further years until September 2020.
- 6.3. The total budget for Going Local in 2018/19 is £76,000. Adur and Worthing Councils contribute £12,000 from existing budgets and WSCC and CWC CCG provide £32,000 each.

#### **7. Legal Implications**

- 7.1. Section 38 of the Local Government (Miscellaneous Provisions) Act 1976 permits local authorities to use their own surplus computer capacity to provide computer-based services to third parties and to charge for those services if they consider it appropriate to do so.

- 7.2 s1 of the Localism Act 2011 empowers the Council to do anything an individual can do apart from that which is specifically prohibited by pre-existing legislation
- 7.3 s1 Local Government (Contracts) Act 1997 confers power on the local authority to enter into a contract for the provision of making available assets or services for the purposes of, or in connection with, the discharge of the function by the local authority

## **Background Papers**

<https://www.adur-worthing.gov.uk/media/media,139147,en.pdf>

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## **Sustainability & Risk Assessment**

### **1. Economic**

Going Local has the ability to have a positive impact on the local economy as people re-enter employment or begin new business. Going Local may also play a part in local GP retention and recruitment.

### **2. Social**

Going Local has a big social impact, often helping to reach the hardest or most vulnerable residents.

#### **2.1 Social Value**

A number of people referred to Going Local are now volunteering locally.

#### **2.2 Equality Issues**

Matter considered and no issues identified.

#### **2.3 Community Safety Issues (Section 17)**

Matter considered and no issues identified.

#### **2.4 Human Rights Issues**

Matter considered and no issues identified.

### **3. Environmental**

Matter considered and no issues identified.

### **4. Governance**

Going Local is a priority in Platforms for our Places and being hosted at Adur and Worthing Councils holds many benefits. The in-kind support potentially holds some risk in terms of redundancy payments, as the Councils would be expected to cover this. This scenario is, however, unlikely at this present time. Going Local is a small team and this provides some risk to resilience to the service. However, with new surgeries potentially coming on-board, recruitment would help mitigate this. There is limited risk to the Councils' reputation, particularly as the project has its own logo and brand - in fact, the Councils' reputation may be favourable due to the positive impact of the Going Local.

## Appendix one



Going Local - the story so far

November 2016 to July 2018

## Introduction

Ask yourself two questions:

What are you worried about and what do you want to change in your life?



It can be hard to answer these questions. It can be even harder to put those answers into practice. This is what Going Local does: it helps people understand their problems and find a way forward.

There are two full-time Community Referrers on the Going Local team working out of six GP surgeries in Adur and Worthing. They use a technique called 'Motivational Interviewing' to build rapport and identify priorities with people who are referred to them by the GPs.

Then, using detailed local knowledge that the whole team is constantly building on, our Community Referrers connect people to the right places to get the right help.

This includes using a brilliant App we have developed which helps the team find local resources and connecting to them, often literally as they are sat with the person they are helping.

“We want people to come away from their time with Going Local with a clear idea where help is available in their local area. If people have this knowledge, they have a stronger, more sustainable support network. Going Local is the short-term route to a network that helps a person sustain changes in the long-term.” says Tom, a Community Referrer on the Going Local Team.

You'll also notice we use the word 'person', rather than 'client' or 'service-user'. This is important to us because we think about people in the round person, and don't define them by the services they wish to access or the problem they wish to solve.

Welcome to the story so far- this report has been prepared to provide an update on this exciting new initiative in Adur and Worthing and to show the difference it's making to local residents.

### Let's start at the very beginning

Going Local is a social prescribing project funded by four organisations: Adur and Worthing Councils, West Sussex County Council and Coastal West Sussex Clinical Commissioning Group. It started as a two-year pilot and Autumn 2016. We're thrilled to report that a further two years have been committed by all parties- taking us into 2020.

Going Local is in six GP surgeries in Adur and Worthing, these are:

- Victoria Road, Worthing
- Worthing Medical Group- Heene Road and Shelley Road
- Limetree Surgery, Worthing
- Manor Practice, Southwick
- Harbour View, Shoreham
- Northbourne, Shoreham

Social prescribing isn't new, in fact it's has been around a long, long time. It's a non-clinical approach to helping people - the dispensing of 'social medicine' rather than a long term prescription of tablets.



For example, Mrs Smith sees her GP for depression and sleepless nights, she is referred to Going Local to unpick the root cause of the problem (a recent bereavement, money worries and fear of losing her home) whilst the GP helps with the traditional prescription in the interim.

The aim is that helping to solve the social problems will mean taking tablets for less time, visiting her GP less for this particular issue and being more resilient in the future should a similar situation arise in the future.

### How does it work?

Simply, GPs and their staff have access to an App and they click a few buttons to refer into Going Local. On the other side, we receive a notification and then make contact with the person within a week. We aim to physically see them within 2-3 weeks and have up to six hour-long sessions with them. Occasionally it's more and sometimes it's less. The sessions can also be over a long period of time- perhaps after a person has tried a particular group or course, and just wants to check in with us.



### Why did Going Local start?

Looking at the more strategic elements, Going Local is a solution to several health challenges that we're all too aware of 1) changes in the public's health needs 2) changing and stretched levels of funding for health services and 3) 'failure demand' ("demand caused by a failure to do something or do something right for the customer" Professor John Seddon, 1992).

Parallel to this, the huge challenge faced by the NHS of treating long-term health conditions. The NHS spends 70% of its budget on this, so better prevention and self-care is vital.

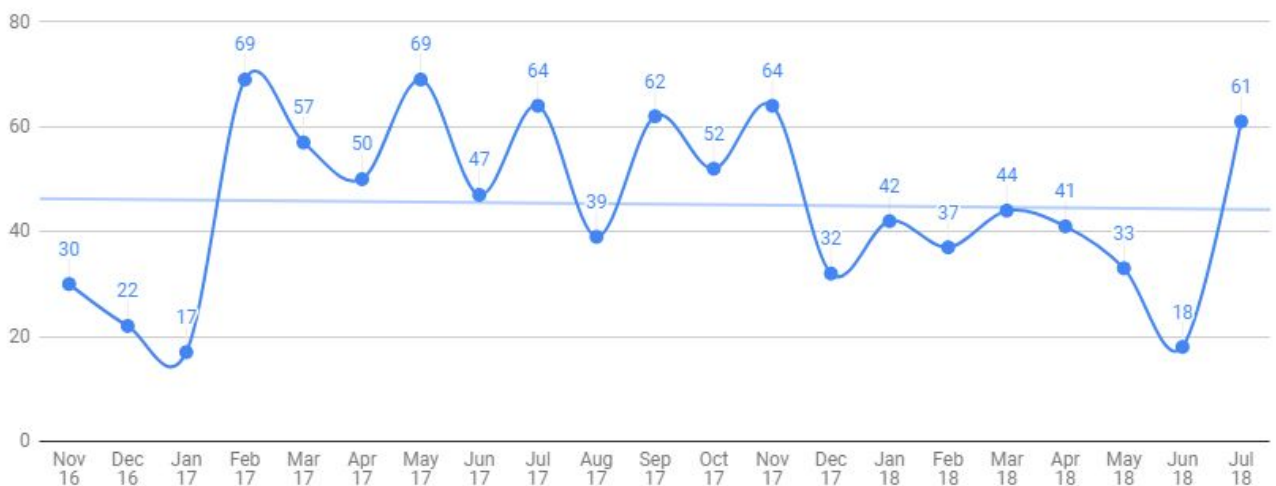
Each of the four Going Local funders bring lots of experience, expertise and knowledge from their respective organisations to the project. It also helps break down the barriers of “our” or “your” problem, instead, working together for the common good.

There are two full-time paid members of staff on Going Local, called Community Referrers, and we are hosted by the Communities and Wellbeing Team at Adur and Worthing Councils and managed by the Communities and Third Sector Lead. Being part of the Council has many advantages, such as lots of shared learning across front-line staff but sometimes it also works as a positive that the service has its own brand and identity.

### The scores on the doors

Since November 2016, **969** people referred by GPs to Going Local through six GP surgeries.

Number of monthly referrals to Going Local



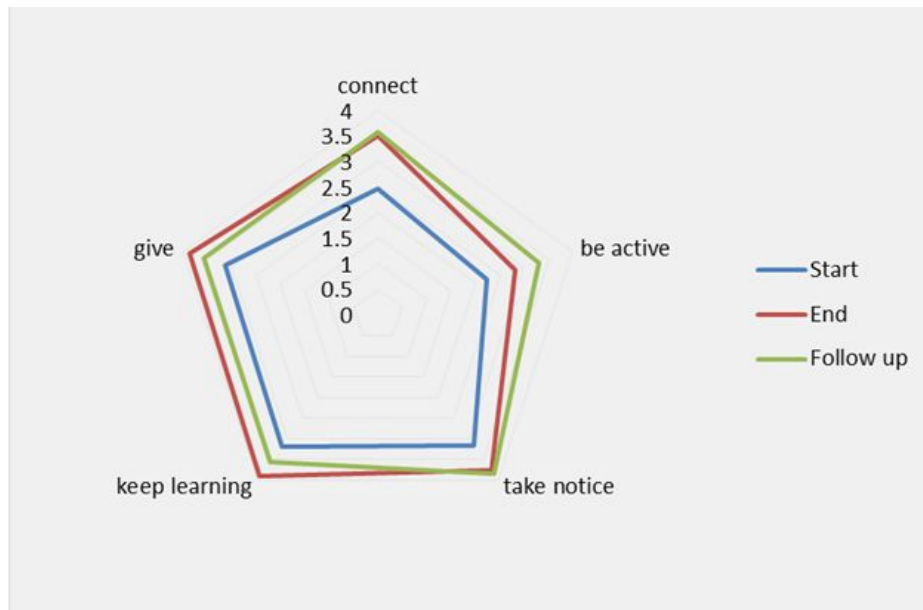
Referrals are roughly 60% female and 40% male.

GPs can choose up to six reasons for the referral to Going Local. The team then categorise the online referral they make to further organisations. You'll see that quite often the referral reason can be quite different and also that some of the challenges can be resolved during the sessions by unpicking the woes with motivational interviewing:

Initial GP referral code and Community Referrer onward referral category



In the initial meeting with a person, they complete a ‘Wellbeing Star’. This tool asks people to rate their feelings out of five in five different areas. To date, we have noticed that the scores are increasing, demonstrating a increase in people’s health and wellbeing:



To date, **1,141** referrals have been made to services ranging from The Conservation Volunteers to befriending activities, IT support and weight-management groups.

The most referred to services are the Citizens Advice, The Corner House, Adur and Worthing Wellbeing Hubs and Guildcare.

Going Local is being evaluated by West Sussex's Evaluation and Evidence team and the results so far indicate that the impact is good for people and good for GPs. People are less likely to miss appointments, and because their non-medical needs are being looked after by Going Local, they and their doctor have more time to focus on their physical health needs. This also means doctors are less likely to be running late, making everyone happy!

We are helping hundreds of people get help, quickly and easily. We take away barriers to finding help, and do all we can to get people through the door of the service they want to access. With a GP taking a minute of their time to let us know a person needs help, we have a chance to make a difference that can change a person's life.

### **Don't just listen to us**

The real proof in the pudding is what people who have used Going Local say; many report that they feel supported, encouraged and enabled to make improvements in their lives. For example,

"More progress has happened in the last 3 weeks than in the last 3 years"

"The meetings were beneficial in the sense of spurring me on to get out doing things, being more creative and active and interact more with people."

And from a GPs:

"Many of the problems patients present to us have a social cause or trigger. Previously, I have felt ill equipped to help. Now I can refer patients to someone who can spend time looking at these factors and can signpost them or give them the help they need. This service is invaluable and makes a huge difference to patients. Without this focus on the social context we are not able to give the patient the holistic approach they need."

"In today's stressful society, the Going Local initiative is absolutely an essential part of the Primary Care Team. It provides an invaluable service to those patients that need that extra support to work through difficult life situations, leaving the clinicians to manage their medical care. The team are all friendly, knowledgeable and grounded and need to always be part of the overall team working in General Practice."

### **What else we've learnt**



We are keen to learn what people who use the service can teach us. We noticed that housing was a very difficult issue for lots of people, so we created a new service called 'Wellbeing Housing Advice Team'.

Now, people who come to Going Local with a housing issue can be seeing by a specialist, employed by Citizens Advice and working closely with Worthing Churches Homeless Projects, quickly. They get the best advice on their housing issue whilst the Community Referrer can help the person with the other things they want help with.

Going back to prevention, we also make sure we ask every single person about their housing and listen out for triggers (such as someone losing their job) as we know how fundamental secure housing is to health and wellbeing.

We also learned that lots of people needed help from the Citizens Advice, so we arranged with them for a quicker route to refer people. Now, people can quickly get help, usually within a few days. We try to avoid people re-telling their story too many times, so the referral process is tight to ensure the background is shared, making most use of everyone's time.

We also continue to notice that there is not common practice across doctors' surgeries regarding GP charges or filling out forms. Coincidentally, Citizens Advice are focusing some policy work on this. We also hope that we can make change by closely working with our colleagues in the Councils' Housing Team to unpick this. More to follow on this at a later date.

We feed back our work to a monthly Steering Group meeting, made up of representatives from the CCG, GP surgeries, West Sussex County Council and Adur and Worthing Councils, as well as Community Works and a lay-person representative. This lets us hear many different perspectives on the work we do, and helps us become a better and better service. The lay-person is invaluable for asking great questions, reminding us of the basics and not to talk in acronyms!

### **What's next?**

It is an exciting time for the project with 2 further years funding currently enabling the service to operate until late 2020. In this time we will help thousands of local people get help and make changes that can last a lifetime, whilst allowing GPs to do their job better. We also know there are other surgeries that would love to have Going Local so the list of surgeries could soon increase.

We love what we do and if you'd like to find out more or come shadow some of our work, please do get in touch:

[communityreferrals@adur-worthing.gov.uk](mailto:communityreferrals@adur-worthing.gov.uk)



## Appendix two - Case-studies from the Community Referrers:

“**Person A** was referred following concerns around her mental health and abuse of substances. We identified her priorities - her physical health worsened three years ago, resulting in the loss of her employment. The subsequent financial worries (and bereavements) had led to a relapse into substance use. We worked together and unpicked her financial worries - and were then able to set up more intensive support around mental health via The Corner House. Once this was happening Person A felt strong enough to start looking at her substance use. After completing the ‘Intuitive Recovery programme’ she felt empowered to make more changes.

Now, 8 months have passed and she has undertaken courses through the Corner House and plans to get involved in some voluntary work. Person A is feeling a lot happier, healthier and in-control.”

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“For **Person B**, the referral was ‘for a 70+ year old women with chronic back pain needing help’. I identified her worries as chronic pain, managing diabetes and achieving weight loss.

She had previously struggled to find activities that were affordable and mentally stimulating. The Wellbeing Hubs and The Get Active Programme acted as the ideal foundation for Person B to start thinking about making lasting lifestyle changes.

She was soon able to start reducing from her pain medication. Between us we then suggested that she try the Intuitive Recovery Programme - a week long course to try and alter how the brain perceives things that we might be addicted too. This transpired to be “one of the most insightful things CF had done” and lead onto the “biggest improvement with pain and weight for 35 years”.

Person B’s GP reports that she has made substantial progress in regards to health - as she is no longer reliant on medication and is not needing to make as many appointments. To maintain this we are now looking at getting access to an affordable long term gym programme.”

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“I met **Person C** at the surgery in June 2017. He felt very isolated, with great difficulty engaging with various educational, recreational and vocational situations and services. He told me about an interest in computers, but said he didn’t have one. I told him about the IT Junction- he was interested but not confident to go. I arranged to go with him on his first visit to help overcome this. After this, **Person C** attended these sessions twice a week, and was even staying behind to help with tidying up- this was a gentle way to reduce isolation and offer, via the IT Junction, a comfortable gateway into more opportunities.”