## Case studies from the Social Prescribing Youth Network

# Sheffield Futures - pooling resources across multiple PCNs

#### How it works

Sheffield Futures offer a range of services aimed at young people to help them with every aspect of their lives, including Door 43, an emotional wellbeing service or 13-25 year olds.

Their social prescribing service was piloted through the Health and Wellbeing Alliance funded project and has since managed to build partnerships with an additional three of the city's 15 Primary Care Networks to host NHS-funded link worker, with a view to reaching out to more PCNs with their approach.

Sheffield Futures' social prescribing model takes a cross-boundary, or 'hub' approach, whereby several link workers covering different areas of the city benefit from having a shared based at Sheffield Futures, with the service's existing infrastructure and line management from Door 43's service manager and fortnightly supervision. Instead of link workers in each PCN working in isolation, they are able to share resources, support and best practice with their peers in other areas.

With Sheffield Futures' wide array of services, link workers are able to support young clients to access many services in-house, as well as linking in with other services around the city.

Link workers typically split their time between local GP surgeries (3 days on rotation), outreach activities including school visits (2 days), and Door 43 (1 day). They also benefit from established outreach activities delivered by Sheffield Futures, such as a regular Wellbeing Café, which runs in different, non-city centre locations.

In this model, referrals into the social prescribing service must come from a GP, which poses a challenge in terms of making sure the GP is aware of the offer and how to make the referral.

### Key benefits of this approach:

- Provides an important offer of support for young people waiting for mental health support
- The Youth Access YIACS model offers a range of support tailored to young people under one roof, making it easier to support young people to access the right service
- Being connected to an established, young person centred service:
- Young people can connect with peers
- Accessible environment for young people that is hard to recreate in a clinical environment
- Specialist workers (all staff have a youth work qualification)
- Coordinated approach, bringing link workers into one staff team, facilitates the sharing of resources, learning and infrastructure across different PCN areas, where otherwise there is a fragmented approach.

### **Key Challenges:**

- · Lack of coordinated approach to social prescribing
- Staying on top of NHS data monitoring systems and demonstrating savings
- PCNs not aware that funding is available or how best to use it
- Communicating with PCNs it can be hard to find a key contact or understand who has oversight.

### Top tips

- Try it! Voluntary sector providers typically have a great understanding of the local lay of the land and are driven by the needs of young people, rather than targets set by the system, making them best-placed to deliver a quality service that meets young people's needs and rights.
- Be creative in your approach, considering your local context
- Use your relationships with local decision makers, influencers and providers, including within statutory services, to ensure all actors are playing their role.

## A good social prescribing model should...

- See a person as a person; connecting them to practical and emotional support
- Recognise the needs of different parts of the local community including have a specific offer for young people
- Support referrals from all local agencies (including GP, local authority, pharmacies, fire service, police, job centres, VCSE and self-referral)
- Commission VCSE services to receive referrals and deliver services. Local community groups can take referrals because they have sustainable grant funding
- Be locally and collaboratively commissioned by partnerships of PCNs, CCG and LA commissioners, working with VCSE and people/family/carers
- Help to build a better voluntary and community sector, by identifying gaps in local provision and finding creative ways of encouraging (and funding!) community development alongside local commissioners and partners
- Involve VCSE from the start, ensuring ongoing support for community groups and organisations to help them to safely and sustainably manage referrals this might mean supporting them with funding in the long term