

More Music



# Bay Young Persons Social Prescribing Annual Report 2022 - 2023



# Introduction

In 2022 Bay Medical Group, through the PCN sought a new way to provide mental health support to children and young people at a time when CAMHS and other services were overwhelmed. Rather than appoint within BMG it was decided the new roles of young person's social prescribers were best placed within two West End based organisations already working closely with large numbers of young people.

The service was developed to tackle the wider determinants of poor mental health and to reduce the number of young people referred to secondary care by supporting them within primary care. The legacy of the pandemic has created profound challenges for young people over the past year – with education, work, relationships and social time all affected.

We also know about the wider societal issues, which pile pressure on teens e.g. to make it to college as the way to a better job in the future, and the social trends which might undermine their security as they transition from child to adult. Combined with significant changes in how young people live and socialise currently – such as a huge increase in the use of social media – it is perhaps unsurprising that we've seen trends of increasing levels of depression, self-harm, anxiety, eating disorders and other mental health issues.

The Young Person's Social Prescribing service was established in May 2022 and is delivered in a partnership between Stanleys Community Centre and More Music. The Young Persons Social Prescribers can accept referrals for people aged from 11 years to 19 years, who are registered with Bay Medical Group.

Social prescribing seeks to address people's needs in a holistic way. It also aims to support individuals to take greater control of their own health. Social prescribing can help support people to: make lifestyle changes, connect with groups and activities in the community and includes supportive personalised conversations to help improve health and wellbeing. The referrals generally, but not exclusively, come from professionals working in primary care settings, for example, GPs or practice nurses.

Facilitating access to meaningful activities can support young people's physical and mental health and wellbeing, and engaging in a group or activity can help to develop young people's confidence in a range of ways:



- helping them to meet other young people,
- sparking motivation through a new interest
- being more active
- feeling more connected, less isolated.



# Meet the Young People's Social Prescribers

## Lukas

Lukas (Stanleys YPSP) has worked with young people for 15 years in local schools, colleges and youth settings.

Lukas is mental health first aid trained, and qualified in behavioural change as part of the ComBAT programme.

He is passionate about improving wellbeing and supporting young people to reach their fullest potential. Lukas lives in the West End of Morecambe and in his spare time enjoys playing and watching football.



## Maxine

Maxine (YPSP for More Music) grew up in Morecambe's West End, she is mum to 4 girls and has worked at More Music for more than 17 years.

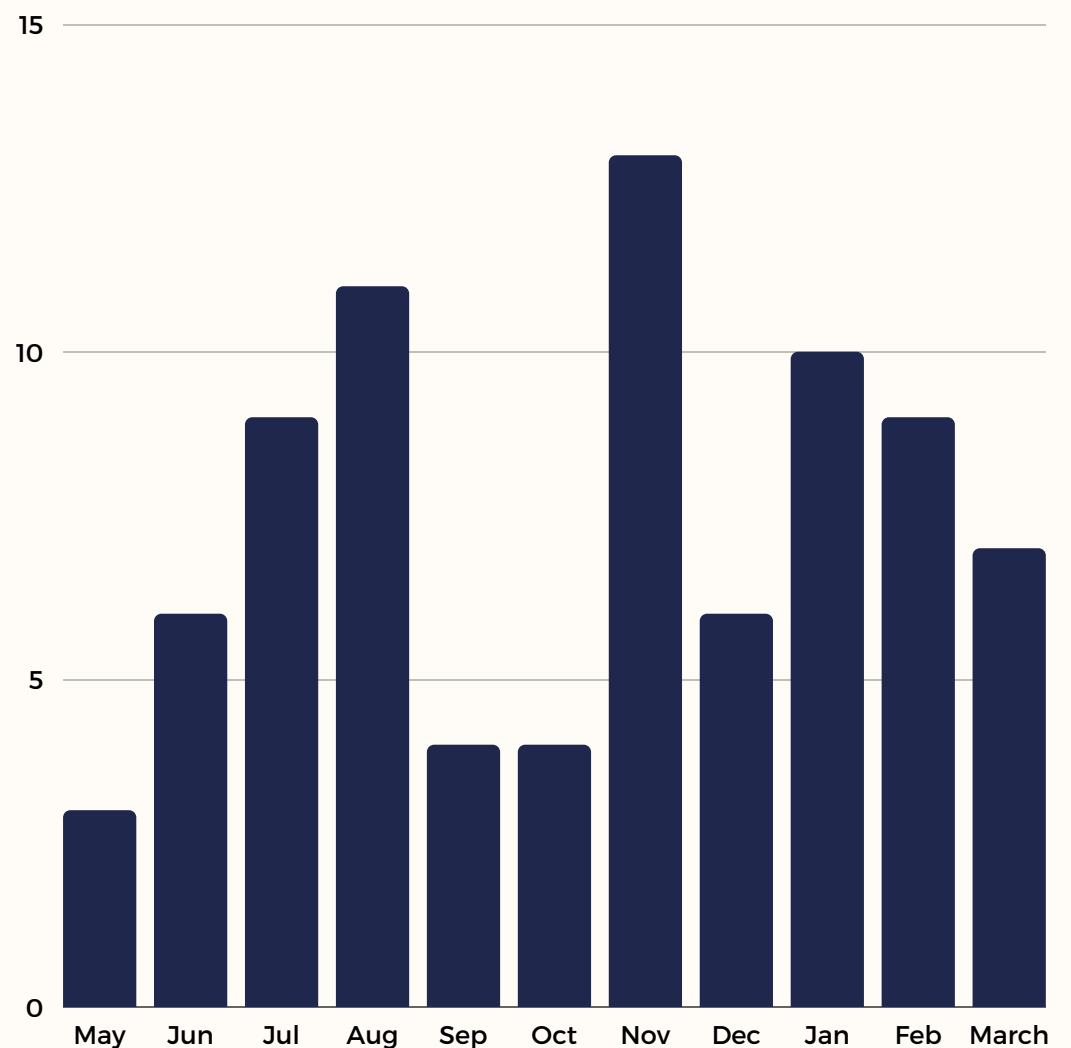
She has been involved in the charity's youth programme for the last eight years, Maxine is a mental health first aider, has been mental health champion for many years and also a health coach. She is qualified in behavioural change as part of the ComBAT programme and is involved with More Music's 'Music for Health' project, working in partnership with BMG, ICC and CAMHS.

Maxine has personal experience of supporting young people with a chronic illness and mental health issues.

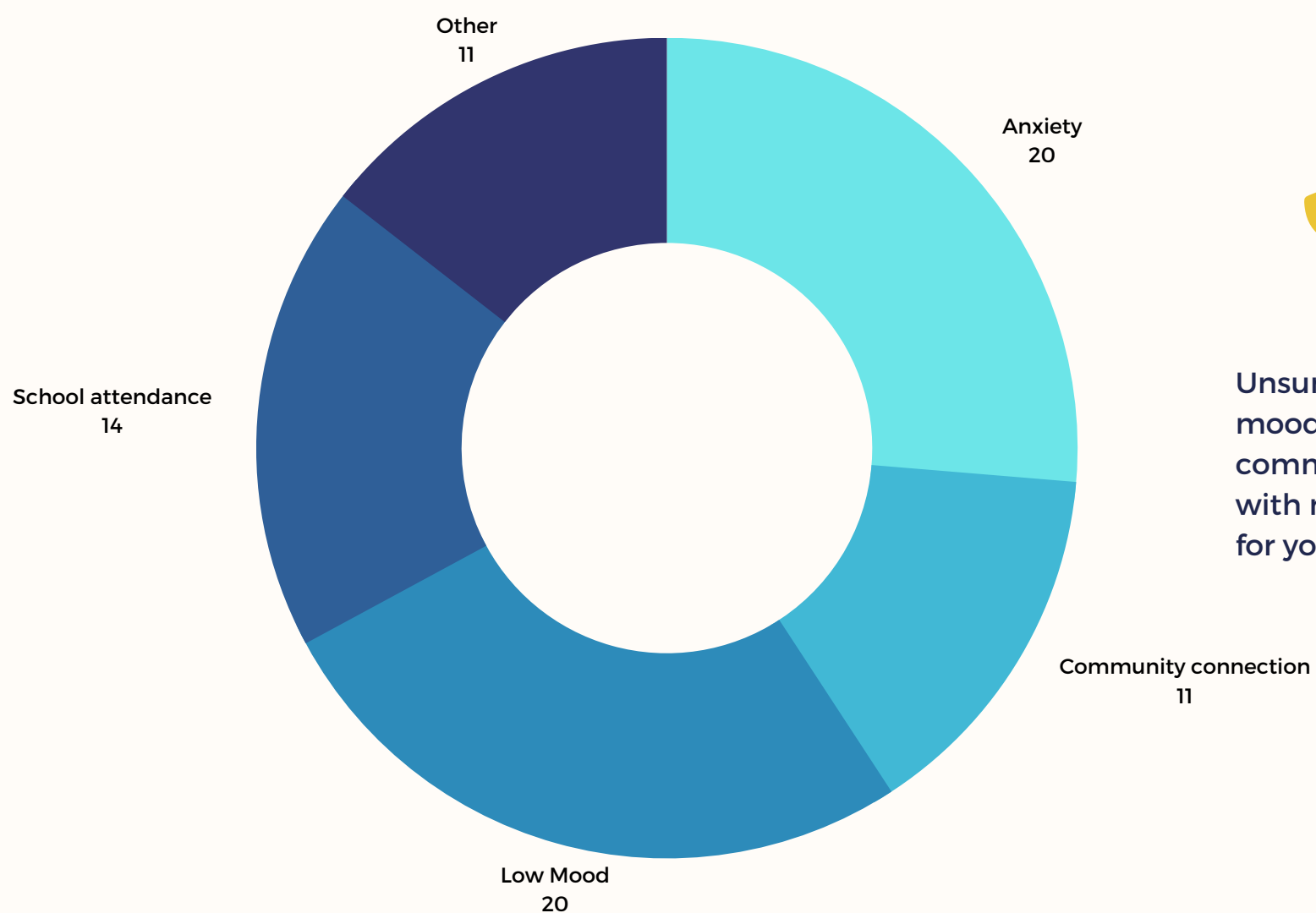
# Data\*

\*More Music and  
Stanleys data  
combined

## Referrals by month



## Original main reason for referral

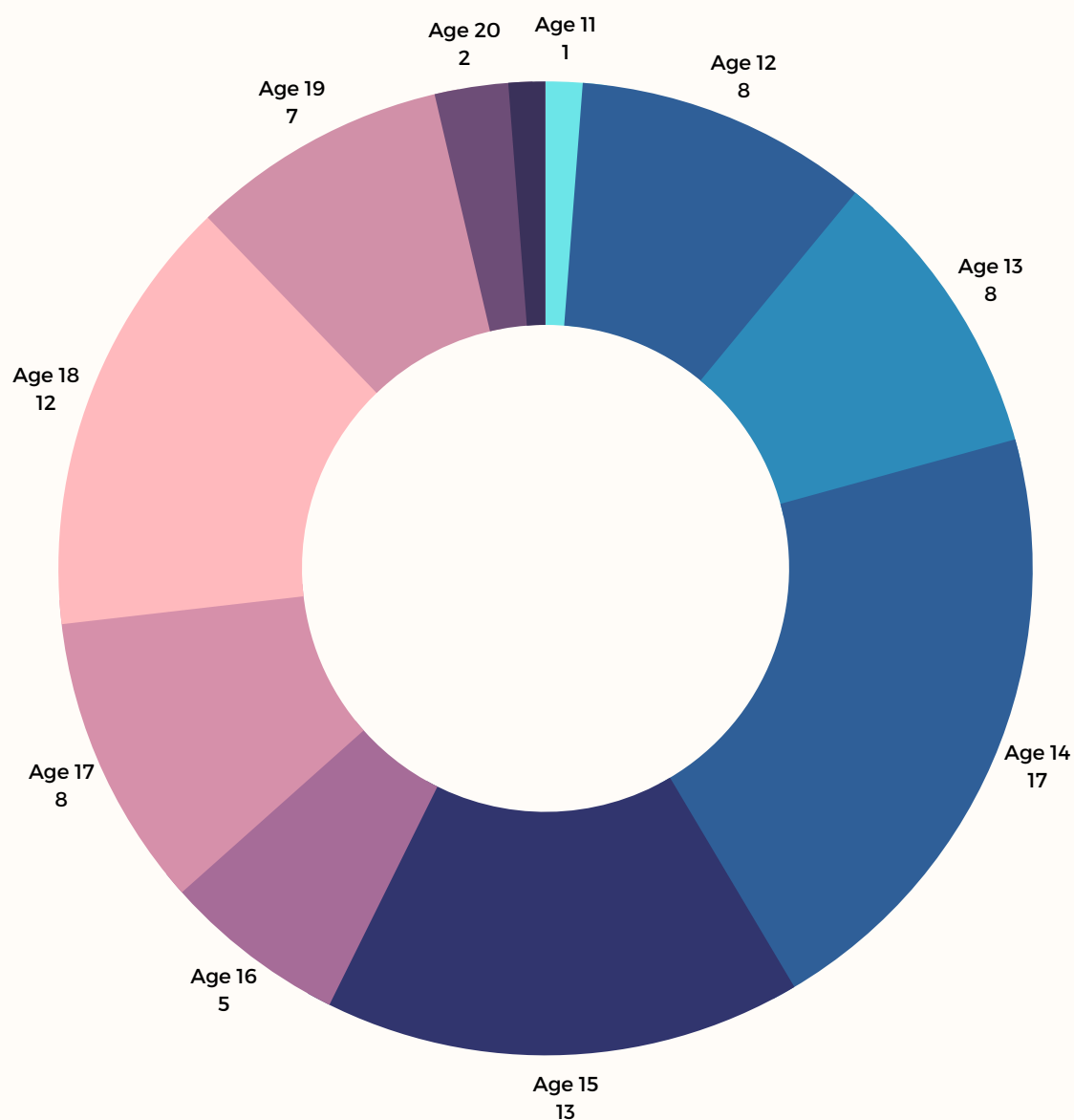
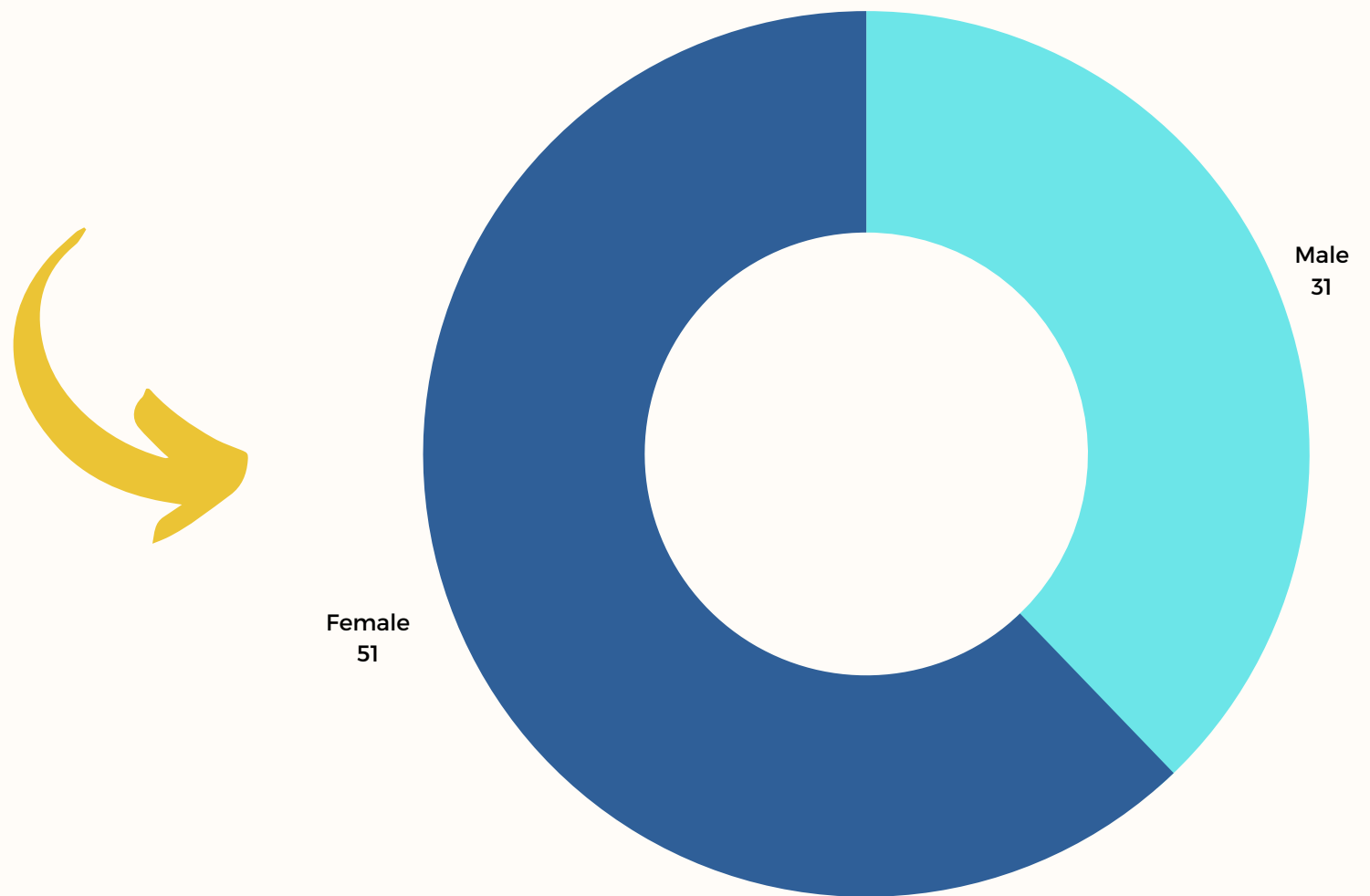


Unsurprisingly low  
mood and anxiety are  
common instigators  
with regards to referral  
for young people.

# Data\*

\*More Music and  
Stanleys data  
combined

## Gender



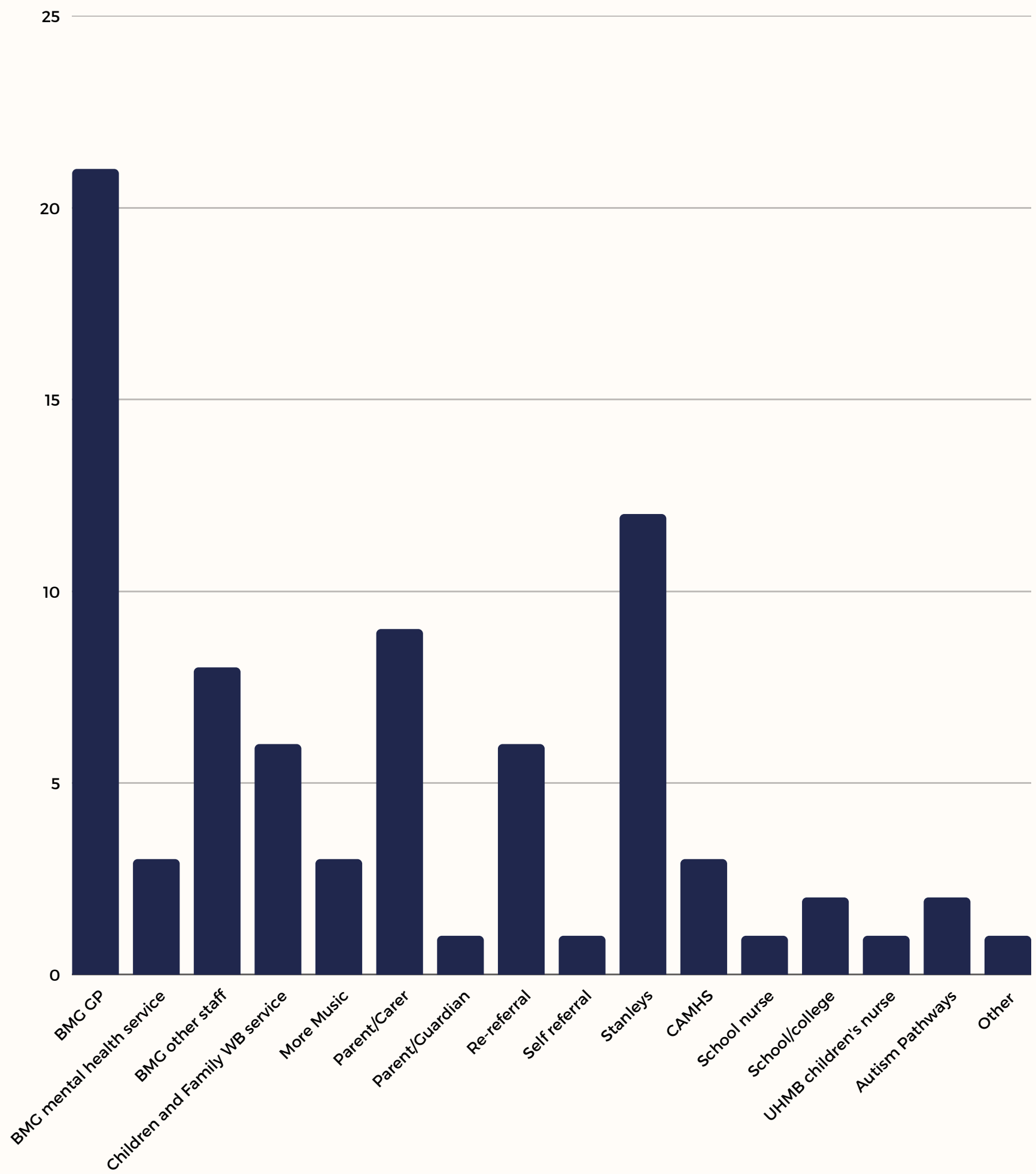
## Age at referral

There are a high number of 14 year olds referred. Transition to high school during the pandemic could be key to this as Maxine has had a significant number of referrals from GP's of 12 year olds where the main reason for referral is school attendance and related anxiety. Stanleys most common attendance is by young people age 14 year olds and Lukas has seen a large number of referrals from his strong links with Stanleys.

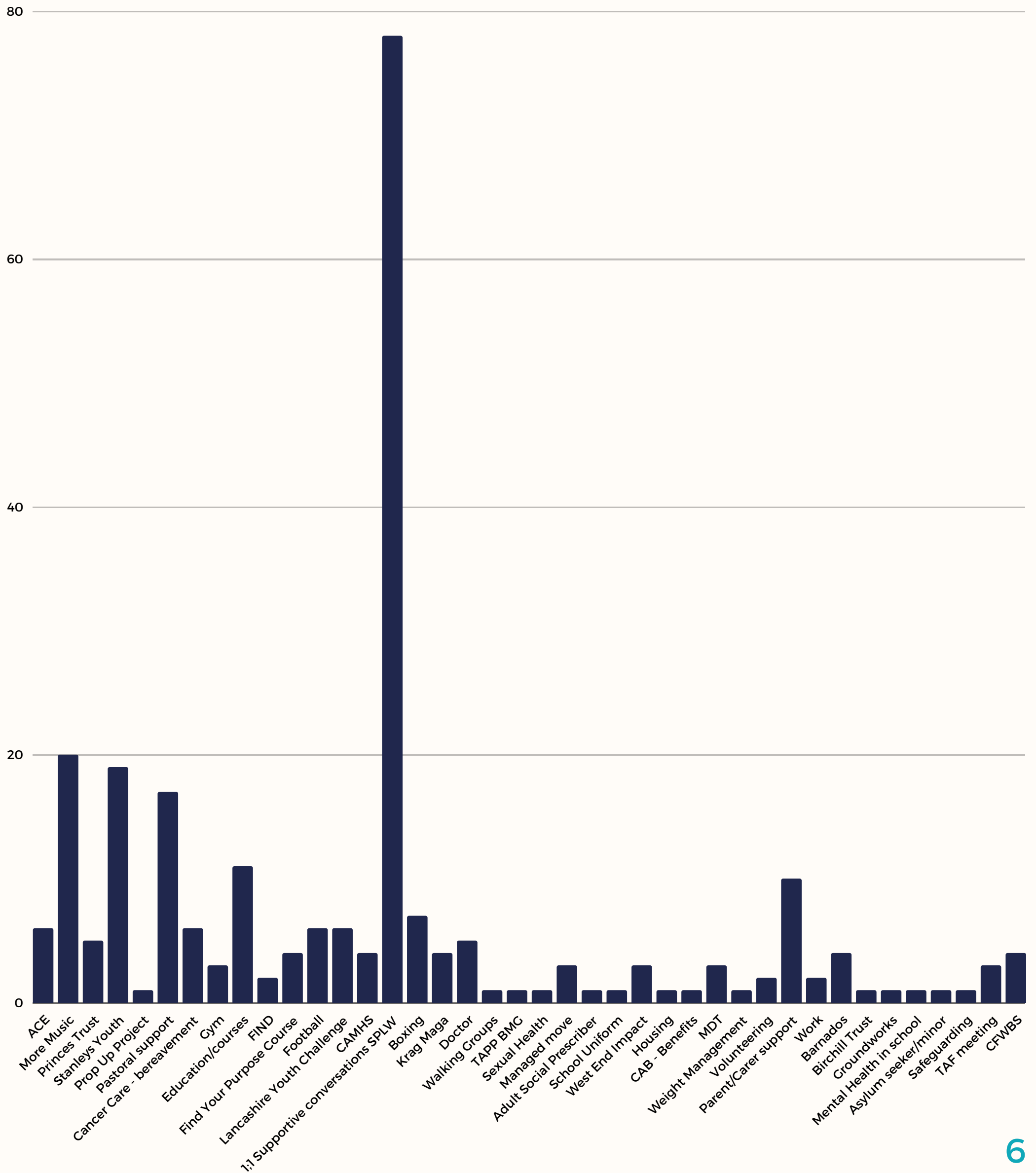
Data\*

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combined

## Referral Source



## Onward referrals/signposts



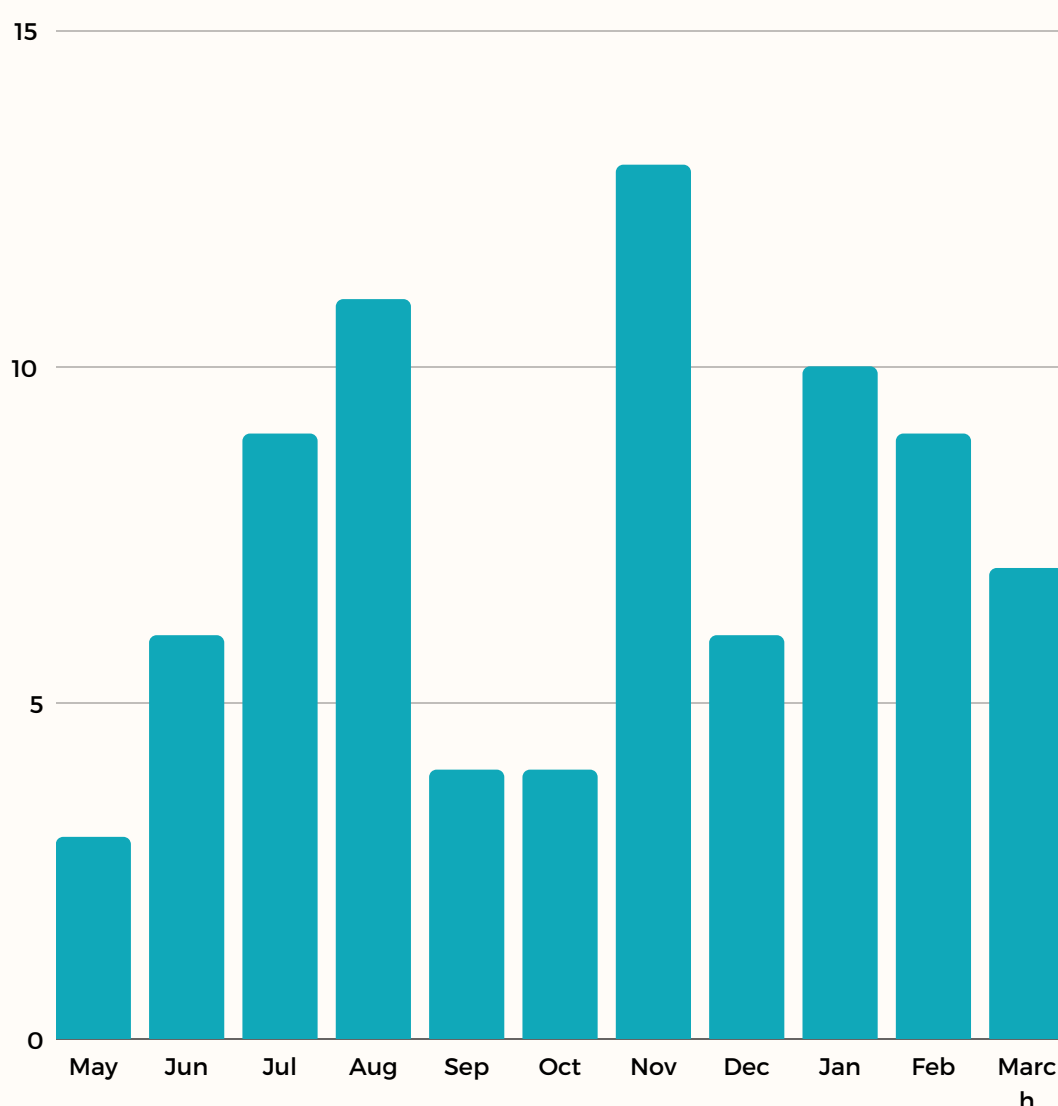
# Summary of referrals

Social Prescribers have been part of the Primary Care Network workforce within Bay since 2020. In 2021 Bay PCN increased the number of Social Prescribers to meet demand for the service. The existing Social Prescribing team works with people aged 18 and over, and in 2021 the need for a similar role to support under 18s in the locality was identified.

The new concept of social prescribing for the younger population has proved vital. Local data and intelligence have highlighted the pressures on services supporting young people such as the Child and Adolescent Mental Health service (CAMHS). In addition, consultation and feedback from young people has emphasised the issues facing the community that exist and have been exacerbated by the Covid Pandemic.

The ambitious target number of young people, to access the service, was established based on the numbers of the adult population in contact with social prescribers. This first twelve months has seen a steady increase in referrals as the service becomes known.

The data presented on page 4 (and also below) shows numbers reached but does not reflect the impact of social prescribing on our patient population.



Evidence of the qualitative impact of the service is highlighted in the quotes (on page 12) and case studies (on page 13, 14 & 15).



## Findings and Positive Outcomes

There has been a significant difference in the number of referrals made by doctors to each organisation. Maxine has taken a higher percentage of GP referrals compared to Lukas whose percentage of external referrals has been greater.

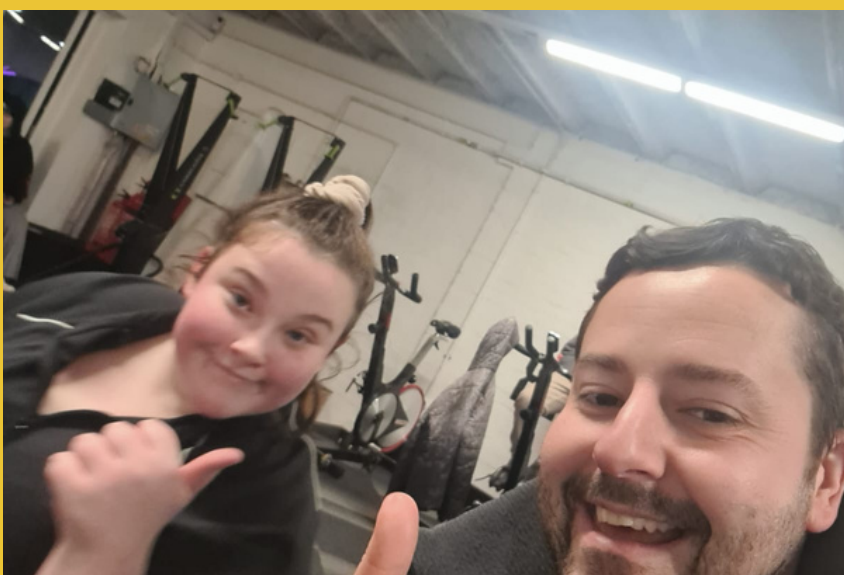
The most frequent and most significant reasons for referrals across the board are anxiety, anger, self-harming and low mood. Almost every young person we have met has some kind of school related issue, resulting in poor attendance, in many cases leading to an escalation of problems. And, although school hasn't always been the principle reason for referral, it has frequently been a significant contributing factor.

We discovered that in trying to signpost children and young people to meaningful activity that there are in fact very limited options; with few thriving clubs or out of school activity available for physically or mentally challenged young people. Affordable opportunities for young people to meet informally outside school are seriously limited. Organisations, such as Prop Up Project struggle to cater for the increase in numbers of young people who need support. Initially established as a bespoke service, the increased demand is challenging the charity to stay true to its original aims.

It quickly became apparent how the young person social prescribing role differs to that of the Adult Social Prescribers and how the action required seems to be more complicated and resolution longer to achieve. Very few young people we meet are ready to engage with any kind of intervention or participate in an activity immediately following initial referral, and it can take weeks to build trust before getting to grips with the issues they face. Inevitably, some cases are more complex than others and the system of support is unbalanced, i.e. there is no middle ground for support, options are either low level intervention for anxiety, anger, low mood, such as TAPP for example, or high level involvement from CAMHS.

Where young people meet criteria for identified services there are long waiting lists. We have identified that many young people referred are becoming lost in the system with limited or no support. However, young people referred to social prescribers can access an initial appointment with Maxine or Lukas within 2 weeks, which is significantly different to waiting times for other services, which can be months or even years long.

In response to this work and as a result of our findings, Stanleys has set up a CAT session (Combat Anxiety together), which is a peer led support group providing a safe space specifically for people struggling with anxiety.









# Gaps in services

The statistics show a high number of referrals are due to school attendance and much time has been spent developing relationships with schools and services to encourage them to work together to improve outcomes. We are now part of the TASS Locality Group specifically the school exclusion subgroup.

## What is TASS?

- A local network consisting of schools and other family support services that meet on a regular basis to have an evidence-based conversation, working in partnerships to find solutions at a local level utilising early help and intervention that may stop concerns escalating.
- The place that provides a strong foundation which supports children, young people and their families by refocusing resources on prevention rather than crisis intervention. It also provides the framework for agencies to continue to work together to improve outcomes for children, young people and their families from 0 to 25 years.
- A flexible network that will change to meet locally identified priorities.
- Opportunities to share evidence-based conversations that will reflect the voice of the local community and young people alongside the data that is available for each locality.
- The right support in the right place at the right time.

## Why are we doing this?

- To strengthen local/partner relationships and networks.
- To enable better deployment of multi-agency resource.
- To develop a support network for frontline staff.
- To stop the 'refer on' culture and all partners hold appropriate level of risk.
- To ensure pockets of good practice across the county.
- We aim to share good practice and promote consistency of service delivery.
- To align early help with school improvement.

## What it is not

- It is not a formal governance process, it's about children specialist professionals working together to improve outcomes.
- It is not intended to be consistent in each area in accordance with 'warranted variation.'
- It is not a policy making process and broader issues should be remitted back to the Lancashire Education Partnership Board.
- Lancashire's vision is that children, young people and their families are safe, healthy and achieve their full potential.
- Lancashire County Council's Education Partnership officer for the Bay is exploring the options of a school based social prescribing concept paper.

## Schools Based Social Prescribing Concept Paper

Like most illness, mental health does not discriminate between the rich and the poor. However, there is a higher number of young adults with poor mental health in disadvantaged communities. Also, there is strong evidence that young people with neurodiversity are 4.5 times more likely to have poor emotional health. We want to address social determinants of inequality by giving young adults opportunities to have nature-based experiences they would not otherwise encounter. The social determinants of health inequality have an impact on family lifestyle choices, (Benzeval, et al., 2014). Moreover, according to Weare (2015, p. 9), there are strong links between social and emotional health and life attainment, which is imperative for levelling up. (Greenberg & Jennings, 2009)

Over 30,000 young people in Lancashire have diagnosed mental Health problems (NHS, 2019). Young People's mental health services are struggling with long waiting lists. Schools are well placed to identify problems early, but often lack the capacity to do this in a structured manner. With capacity building, schools will be well placed to engage young people proactively. Thus, reducing pressure on services, and helping young people stay within education. Interventions are **reactive**, not **proactive**. So, the problems reach crisis point. There is no infrastructure linking services, community providers and people together for school based social prescribing (mental health)

An interactive online platform, bespoke to the needs of schools and young people, would bring important elements of the process together. (This can be developed in partnership with a platform provider, such as Elemental (now Access), UCLan, and key stakeholders, including young people. A schools-based link worker would liaise closely with school pastoral care and the school's mental health team to identify issues before they reach crisis. There is a strong network of voluntary and non-for-profit (VCFSE) groups who are already providers. A platform would link them with the schools and young people.

### The Change

#### Immediate Benefits

- An interactive, integrated platform facilitates a coherent approach to meeting young people's needs.
- Disadvantaged young people and their friends, families, and carers, will access new opportunities to benefit from engaging with animals and natural assets.
- Provides a co-produced holistic alternative that may reduce school exclusions.

#### Intermediate Benefits

- The platform provides data, analytics, and informs strategic decision making. The project will integrate schools, mental health teams (inc' CAMHS), the VCFSE into a 'community of interest' regarding the development of nature (green), and outdoor social prescribing.
- Young people and their friends, families, and carers, are involved in the continuous co-development of this process.

#### Long Term Benefits

- School based social prescribing will help level up health inequalities in disadvantaged areas, through accessible and supported opportunities for outdoor activity.
- Pro - Active approach will reduce numbers reaching a crisis. Reduce pressures on CAMHS. Increase attendance and attainment in education.



### School Based Social Prescribing Logic Model



Problem

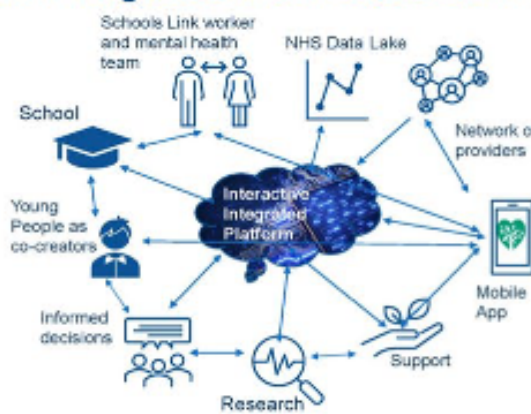
Over 30,000 young people in Lancashire have diagnosed mental Health problems. Young People's mental health services are struggling with long waiting lists. Schools are well placed to identify problems early, but often lack the capacity to do this in a structured manner. With capacity building, schools will be well placed to engage young people proactively. Thus reducing pressure on services, and helping young people stay within education. Interventions are **reactive**, not **pro active**. So the problems reach crisis point. There is no infrastructure linking services, community providers and people together for school based social prescribing (mental health)

Solution

An interactive on line platform, bespoke to the needs of schools and young people, would bring important elements of the process together. (This can be developed in partnership with a platform provider, such as Elemental (now Access), UCLan, and key stakeholders, including young people. A schools based link worker would liaise closely with school pastoral care and the schools mental health team to identify issues before they reach crisis. There is a strong network of voluntary and non for profit groups who are already providers. A platform would link them with the schools and young people.

### Solution: Integrated School Based Social Prescribing Platform

#### The Change



#### KEY STAKE HOLDERS



### SUSTAINABLE DEVELOPMENT GOALS



Cross Cutting Goal: Reduced Inequalities (Reduce inequality within and among countries)



Quality Education (Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all)



Industry, Innovation, and Infrastructure (Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation)



# Barriers to engagement

The impact of the Covid pandemic cannot be underestimated in terms of the impact on the mental health of the community. The long term effects of this period are complex and not yet fully understood but proving to be devastating for children and young people.

Children and young people have become accustomed to being at home; for many the outside world is unknown and intimidating, the reduced opportunity to attend school, go to parties, meet friends etc. has led to widespread anxiety and a lack of confidence in social situations. This is a significant barrier in terms of encouraging referred children and young people to participate in group activity and importantly attend school.

Social Prescribing is not a well known or well established concept or way of working particularly for children and young people. Initially, referrals to Max and Lukas from GP services were slow and there is still work to do to raise awareness of its efficacy across multiple sectors. We need to make some noise and find opportunities for profile raising and sharing our success.

Social prescribing relies on strong, mature relationships and much time has been given to establishing connections with local services, schools, art groups, Prop Up Project, ACE, Barnados (who now work within schools), Princes Trust, Lancashire Youth Challenge. These relationships did not exist in this way prior to the establishment of the YP SP service and their development is crucial to its success.

## Wider team service



The social prescribing team is supported by a dedicated young person's weekly triage and works within multi-disciplinary teams and collaborates with local partners to support community groups to be accessible and sustainable and help people to start new groups and activities. Other services and a supporting GP are represented with the aim of improving overall patient care and communication. This approach is vital particularly when some CYP are identified as needing further family support following the practice's engagement with parents.

"I hope you know how much I value your support – both your service and you as an individual. It's absolutely brilliant that we are able to refer some of our most complex and vulnerable young people and know that they will be treated with the utmost care and respect. There is a real gap in services regarding young people who are struggling with their mental health, especially those with poor attendance or who are not in school at all so are unable to access other provision. To be able to refer these young people to a service, without the need for them to have a diagnosis or assessment, and know that they will be given the support, nurture and genuine positive regard that they need, without pressure or judgement is amazing. You are always very professional and communicate so well with other agencies and I feel that it is a great privilege to work alongside you I really hope your service continues and indeed grows, so that we can continue to work together to achieve better outcomes for our young people. Thank you for everything you do!"

**Sally Senior | Senior Family Support Worker | Children & Family Wellbeing Service**

"Maxine's role as social and young person prescriber is invaluable. She has bridged the gap between health, education, social services and the third sector organisations and provides a unique opportunity to connect with young people and broaden their minds about what services are available and how their health and wellbeing can be improved.

I think the role will fit very well along side the new mental health practitioner for children and adolescents. From talking to Maxine I also feel one of the strengths is the variety of referral pathways which allows schools to refer in for support, during discussions at the childrens MDT often children were minimally known to Bay Medical Group. I wish there were 2 of Maxine so more patients could benefit from the service."

**Gemma Barrow (she/her) GP Partner/ ICC Lead GP**

"Young Persons Social Prescribing at Stanleys has been hugely beneficial for my child. With Lukas having a regular presence at Stanleys he knows the children and this means that my child has been able to connect with support instantly when he's needed it.

Lukas has helped my child access bereavement counselling and access support from the mental health team at Bay Medical Group from his "check ins" with my child during his visits to Stanleys.

Lukas has also attended meetings with me with my child's social worker and his school and supported me to better explain my child's learning needs and requirements."

**Parent/Guardian Feedback**

"SAFE's Prop Up Project has recently started working in connection with Bay Medical Group YP social prescribers. This has developed into a positive working relationship where young people are able to access appropriate support to improve their wellbeing. Referrals received from the Social Prescribers to the Prop Up Project have proven successful in supporting young people to engage. Lukas has attended initial sessions with the young person to be a familiar face and connection point between the young people and the Prop Up Project, who have been able to find out more about their role. We have been able to refer young people to social prescribers who are ready to take on new challenges and next steps following Prop Up. The young person social prescriber role adds value and fills a need within support for young people in the Bay Area who might otherwise 'fall through the net' or not engage with services. Being located within the ICC and Bay Medical Group, is the ideal place for them to develop the role and support based on the needs being shared from professionals and community organisations. As well as being seen as a trusted source of support from others. This role and networking done by the social prescribers ensures that community groups are able to support young people who they otherwise might not have been able to engage with"

#### **Prop Up Project**

"I have found working alongside Lukas and Maxine invaluable over the last 6 months in my brand new role. Knowing there are other workers in the district who I can call upon to help support a young person I may meet or simply call upon for advice at times has been important, particularly as you are both based in community venues/services giving you an ideal place to meet and support young people."

**Jenny Reddell, CVS**

"Both my children have worked with Lucas at young prescribers, and it really has benefitted them greatly. The children feel Lucas has worked with them on a more personal level whereas other agencies that have been involved have felt much more distant. This is obviously a massive benefit for the kids. The children have improved on their problems since seeing Lucas. I'm grateful they had the opportunity. I'd definitely recommend the service to others that need it."

#### **Parent/Guardian Feedback**

"We want to express our sincere thanks to Lukas our Morecambe social prescriber. When we visit him in Sefton Road we are always given a very warm welcome and made to feel at home. We have found the service at Sefton Road second to none and enjoy our catch ups with Lukas who engages very well with Harrison, and whom Harrison enjoys catching up with. We have been given ideas for recreation for Harrison including local wheelchair basketball sessions and More Music sessions, both of which Harrison enjoys enormously. It's always good to know we can go to Lukas for help and advice, and we are very lucky to have him in our area. We look forward to spending more time with him in the future."

#### **Parent/Guardian Feedback**



# Case study

## 1

There are a number of young people referred to CYPSP who we have successfully linked up with the Prince's Trust. The Prince's Trust - believes that every young person should have the chance to succeed, no matter what their background or the challenges they are facing. The organisation helps those from disadvantaged communities and those facing the greatest adversity by supporting them to build the confidence and skills to live, learn and earn.

The last team finished in style with 13 young people successfully gaining their Prince's Trust Certificate in Employment, Team Work and Community Skills.

10 of them attended their final presentation and were awarded their certificates by the mayor.

G has been on quite a journey since first being referred to social prescribers in June 2022, bereavement, a number of attempts to take her life, failed college courses, unhealthy social connections and an overwhelming feeling of hopelessness. She has now completed Team 61 – 12 week programme with the Princes Trust and has been offered employment through her work experience placement with the programme.





# Case study

## 2

HB is a 13-year-old female who suffers with chronic anxiety, a lack of confidence and subsequently also very socially isolated, her issues are displayed in angry outbursts. HB was referred to Lukas by her father who had heard about the social prescribing role. She has struggled at school and wouldn't engage in any support offered there. Initially she would not attend CYPSP sessions without her mum being present which, was difficult as it prevented her from opening up, but over several weeks, rapport was established and HB felt comfortable to attend alone.

HB told L that she had self-harmed in the past and although she had experienced suicidal thoughts, didn't ever intend to act on them. Her severe anxiety affected her ability to attend school, it also made her angry and caused issues at home and at school where, she had hardly any friends.

"When HB told me she felt ready for help we made a plan of action to engage her in activities to help her to socialise. This included a referral to TAPP, an organisation which supports young people with mild anxiety and anger. Unfortunately, her levels of need were too high, and the referral was rejected. I also tried supporting her to attend open sessions at Stanley's, suggesting that she brought her cousin along but she found it too overwhelming and struggled to engage there. This knocked her confidence, which then affected her behaviour further leading to non-attendance of school and her not wanting to engage with my support. A referral was then made to a GP for help with her self-harm, anxiety, and anger.

We then resumed our support sessions and I made a referral to Prop Up Project. I attended a session with her, she was shown around the building and had a chat with the leader. By this point she had started re-attending school on a half day basis.

Prop Up is a group that runs from 6pm till 8pm on a Thursday at the Rainbow Centre for young people struggling to engage in mainstream youth groups, using sessions as a stepping stone into mainstream activities. The numbers are deliberately small, around 10 young people, and initially activities are delivered on a 1:1 basis, until participants are supported to join in smaller group activities like cooking, arts and crafts, games etc.

HB was adamant she would only attend for 30 minutes but she stayed for almost the entire session. She then went to the next 2 sessions without me and fully engaged. I then signed her off, and she enquired about at Stanley's and requested a timetable. Prop Up subsequently informed me that HB had reported she didn't feel she needed to go anymore and wanted to join a mainstream youth group, as she felt confident enough to do so. She is now looking at joining Stanley's youth sessions, her attendance at school has improved dramatically and she is attending fully. Other issues have improved as her self-confidence and ability to engage socially have developed alongside the skills she has learnt, which help her to keep her anxiety and anger in check. She has identified that keeping busy is key to her improved wellbeing."

# Case study

## 3

OJ is a 17-year-old who lives in Heysham. He was referred by his mum who was signposted by Robyn from Stanleys. OJ has a very complicated home life, he has 3 siblings who have complex needs. OJ has previously been involved in risk taking behaviour and had previous involvement with County Lines.

Due to the complex needs within the family, OJ felt that he couldn't cope, he had tried on one occasion to take his own life by using a ligature although said he had no current suicidal thoughts. OJ felt disillusioned by other support services whom he felt had let his family down and hadn't made any real impact resolving the issues caused by his siblings. OJ said the only place he trusted was Stanleys as he saw how much his mum had benefited from their constant care.

He was still reluctant to accept support but was willing to try. I knew he had a keen interest in football, so we started by just kicking a ball between each other and chatting about football. After a couple of sessions, he started to open up. He felt that he had no space of his own and struggled for peace and quiet within his home. His passion for football gave him freedom and was something for just him. OJ identified that he struggled with poor mental health when he wasn't busy, so we looked at ways to fill his time. I helped him to write a C.V and gave him interview tips. I looked at courses available to him at college and supported him to gain an interview on a joinery course.

I also encouraged him to attend Pause United, this is a wellbeing club working with people from all backgrounds and all issues including drug and alcohol abuse. Its remit to support positive mental and physical wellbeing for football players and their families using behaviour change therapy to achieve this.

OJ absolutely loved it and signed for the team accessing its support programme too. His mum was very involved, which gave him some much-needed mum/son time. He has now been signed off and his confidence has grown. He is on a joinery course at college and continues to use football to keep on top of his own mental wellbeing.

# Learning and reflections

As mental health problems often require long-term support there is a risk of this new service becoming overwhelmed. To avoid this, we are learning to build a high through put, referring to as many local groups as possible. The need for ongoing care is balanced by referring, where possible, into groups which, can provide the ongoing support needed. This is not always possible and where training in health coaching, Community-Based Behavioural Activation Training (ComBAT) for depression in adolescents, and other strategies are useful if young people are looking for person centred conversations.

At the start of the role, we had the luxury of time but as referrals increase and as demand for the service grows the response may not be immediate. The full-time equivalent post has already reached capacity due to the number and complex nature of referrals. This in turn has had impact on sessions within our organisations, there is a need to identify uplift funding and support for the development of activities with other organisations.

We have found it more challenging to signpost young people between the ages of 16 to 19 years. Wemwbs can be a good tool in evaluating how a young persons is feeling at a moment in time, however, we need to find a better way to illustrate progress and the journey travelled.

From feedback from parents, young people, organisations, and services, we have learned our approach to relationship building and focus on activities, which help individuals' own wellbeing, sets us apart from other services. This enables us to better support young people slipping through the net, because of the potential barriers to services.

A less medical and more relaxed approach than other services has been a positive success in the role. We need to further utilise this approach moving forward.





# Recommendations and Looking Ahead

- Develop the support offer for families and the C & YP to improve outcomes and reduce the risk of other family members needing support and interventions. The appointment of a mental health practitioner for children and adolescents within BMG and the appropriate skills and knowledge will further improve the offer available.
- Continue to work with TASS to identify what immediate action can be taken to improve the number of exclusions and barriers for young people accessing education.
- Lower the referral age to address the transition to secondary school – guidance from Anna Freud (National Centre for Children and Families) - as well as adapting to a new school environment and developing new relationships, children are dealing with the physical and psychological changes the start of adolescence brings.
- Training and CPD – further trauma informed training and an introduction to central nervous system health giving another perspective on some of the mental health issues we are seeing in young people that are outside the current model.

## Share what works – promote learning on social prescribing

We need to share what is good, what has been learnt and draw from multiple sources to ensure continued development of social prescribing. The momentum for social prescribing is continuing to build. Significant hurdles have been overcome to achieve its positive position today.

## Social Prescribing Ambassadors

Spread the word and demonstrate the benefits of social prescribing -high profile people, clinicians, social prescribing link workers, community representatives and inspiring individuals.

The national centre for creative health are looking for contributions from projects exploring partnerships and creative health. It would be important to share our learning.

Useful resources and recommendations <https://socialprescribingacademy.org.uk/>

“Our work together will enable us to maximise the impact of the Thriving Communities Fund, and further develop the local and national infrastructure of collaboration, across sectors – which is essential to making social prescribing work long-term.” – **Arts Council England**