Meeting Social Needs in an Integrated Health System: Social Prescribing During COVID-19 and Beyond

May 27, 2020
Land Acknowledgement

We recognize that the work of the Alliance and our members takes place on traditional territories of the Indigenous people who have lived here and cared for these lands since time immemorial. The land we call Ontario is covered by 46 treaties, agreements, and land purchases, as well as unceded territories. We are grateful to have the opportunity to live, meet, and work here.

In our work, let us be mindful of our colonial history, the vibrant, diverse Indigenous communities who live in this land today, and commit to meaningful allyship.
Housekeeping
Click the orange arrow to open up your panel

Questions and Comments
Please type in the chat window circled in red throughout the meeting. Because of the large audience today, we’ll be keeping everyone’s lines muted.

Recording
This webinar and presenter slides will be recorded and shared.
Agenda

• Welcoming remarks: *Christine Elliott, Ontario Minister of Health and Andrew Boozary, Dalla Lana School of Public Health*

• What is social prescribing?

• Findings from *Rx: Community – Social Prescribing in Ontario*

• Social prescribing in practice: *physician and client perspectives*

• Dance break! *Canada’s National Ballet School*

• Social prescribing as a systems solution in England: *James Sanderson*

• What’s next?
Welcoming remarks

Hon. Christine Elliott, Ontario Minister of Health
Dr. Andrew Boozary, Assistant Professor, Dalla Lana School of Public Health,
Executive Director, Health and Social Policy, University Health Network
What is Social Prescribing and why does it matter now?

Dr. Kate Mulligan, Director of Policy and Communications Alliance for Healthier Communities
Source: Grey Bruce Public Health
Source: Tai Huynh @taimhuynh
Health & Wellbeing

- Grounded in Community Development
- Based on the Determinants of Health
- Community Governed
- Interprofessional, Integrated and Coordinated
- Accountable and Efficient
- Population Needs-Based
- Accessible
- Anti-Oppressive and Culturally Safe

Community Vitality and Belonging

Health Equity and Social Justice

Highest Quality, People- and Community-Centred
Figure I: Association of Community Belonging with Health and Health Behaviours
Adjusted prevalence ratios using the 2013/14 Canadian Community Health Survey cohort

STRONG SENSE OF COMMUNITY BELONGING

6% increase in fruit and vegetable consumption
20% increase in good mental health
19% increase in good general health

12% decrease in heavy smoking
12% decrease in physical inactivity
7% decrease in severe obesity
5% decrease in chronic conditions
Isolation is a determinant of health

KEEP YOUR DISTANCE.

STAY 3 RACCOONS APART.

Keep the length of a three seater sofa apart
Social prescribing: Connecting social care (‘social’) and medical care (‘prescribing’)
Data tracking
Track client journey, follow up, and improve through a Learning Health System

Client
Individual with social and medical needs, interests, and gifts

Prescriber
Healthcare provider identifies non-medical issues and makes a social prescription - a referral

Social prescribing navigator
Connects individual to appropriate resources based on self-identified interests and needs, and supports their journey to wellbeing

Social prescription
Individual connected to social and community supports, with invitation to engage, co-create, and give back
Findings from
Rx: Community –
Social Prescribing in Ontario

Dr. Jennifer Rayner, Director of Research and Evaluation
Alliance for Healthier Communities
Key Outputs

147 PROVIDERS PARTICIPATED
1101 CLIENTS
3295 REFERRALS MADE

71 HEALTH CHAMPIONS
58 HEALTH CHAMPION CREATED PROGRAMS

Reason for Referral:
- Depression: 27.9%
- Anxiety: 37.2%
- Mental Health Symptoms: 8.8%
- Social Isolation: 19.2%
- Other: 6.9%
“When I have social things to do, it helps with the other stuff. Sometimes when you’re just so focused on your issue, you don’t have time to recuperate, you don’t have time to refocus, you don’t have time to do anything else, and this break just gives you an opportunity to just let go and unwind.”

- Participant, Rexdale CHC

<table>
<thead>
<tr>
<th>Client outcomes</th>
<th>% Change</th>
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<tbody>
<tr>
<td>Self-reported mental health</td>
<td>↑ 12 %</td>
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<tr>
<td>Sense of loneliness (Campaign to End Loneliness Tool)</td>
<td>↓ 49 %</td>
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<tr>
<td>Social support: Involvement in social activities</td>
<td>↑ 19 %</td>
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<tr>
<td>Self-reported sense of community belonging</td>
<td>↑ 16 %</td>
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Key Finding #2: Health Care Providers find SP Useful

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<table>
<thead>
<tr>
<th>Health provider survey</th>
<th>Difference between 3 &amp; 9 months</th>
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<tbody>
<tr>
<td>SP has improved client’s health and wellbeing</td>
<td>↑ 27 %</td>
</tr>
<tr>
<td>SP has decreased number of repeat visits by clients</td>
<td>↑ 37 %</td>
</tr>
<tr>
<td>Feel supported in referring clients</td>
<td>↓ 13 %</td>
</tr>
<tr>
<td>Sufficient resources are available to support SP</td>
<td>↑ 14 %</td>
</tr>
</tbody>
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“The pilot has helped me provide better care for my clients. It gives us a better understanding of how important social connections are in somebody’s health, and it’s not just their physical health. It also helps us explain to our clients, and really looking at the client as a whole and exploring their interests. I find that's the beauty of this approach.”

- Nurse, CSC du Temiskaming
Key Finding #3: Deeper integration and co-creation between clinical care, interprofessional teams, social support, and community

“The excitement of saying, we can actually translate this into health outcomes, into data! We already do this, but do we do it the best way possible? I don’t know, because we’re losing out on the linking and follow-up.”

Dietitian, Centretown CHC

[Co-creating solutions] gives me a feeling of, “you know what, you’re not useless.”

Client and peer leader, Guelph CHC
Social prescribing in practice

Dr. Lara Kent, Centretown Community Health Centre
Jean-Marie Messier, Centre de santé communautaire du Témiskaming
DANCE BREAK!

Megan Ferris, Canada’s National Ballet School
Social prescribing as a systems solution in England

James Sanderson
Director of Personalised Care, NHS England
Interim CEO, UK National Academy for Social Prescribing
Thank You
Merci
Miigwech

To learn more:
www.allianceon.org/Social-Prescribing