

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

May 27, 2020



Alliance for Healthier Communities
Alliance pour des communautés en santé

**Dalla
Lana**
School of
Public Health



National
Academy
for Social
Prescribing

CANADA'S
NATIONAL
BAJLET
SCHOOL
Sharing Dance

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

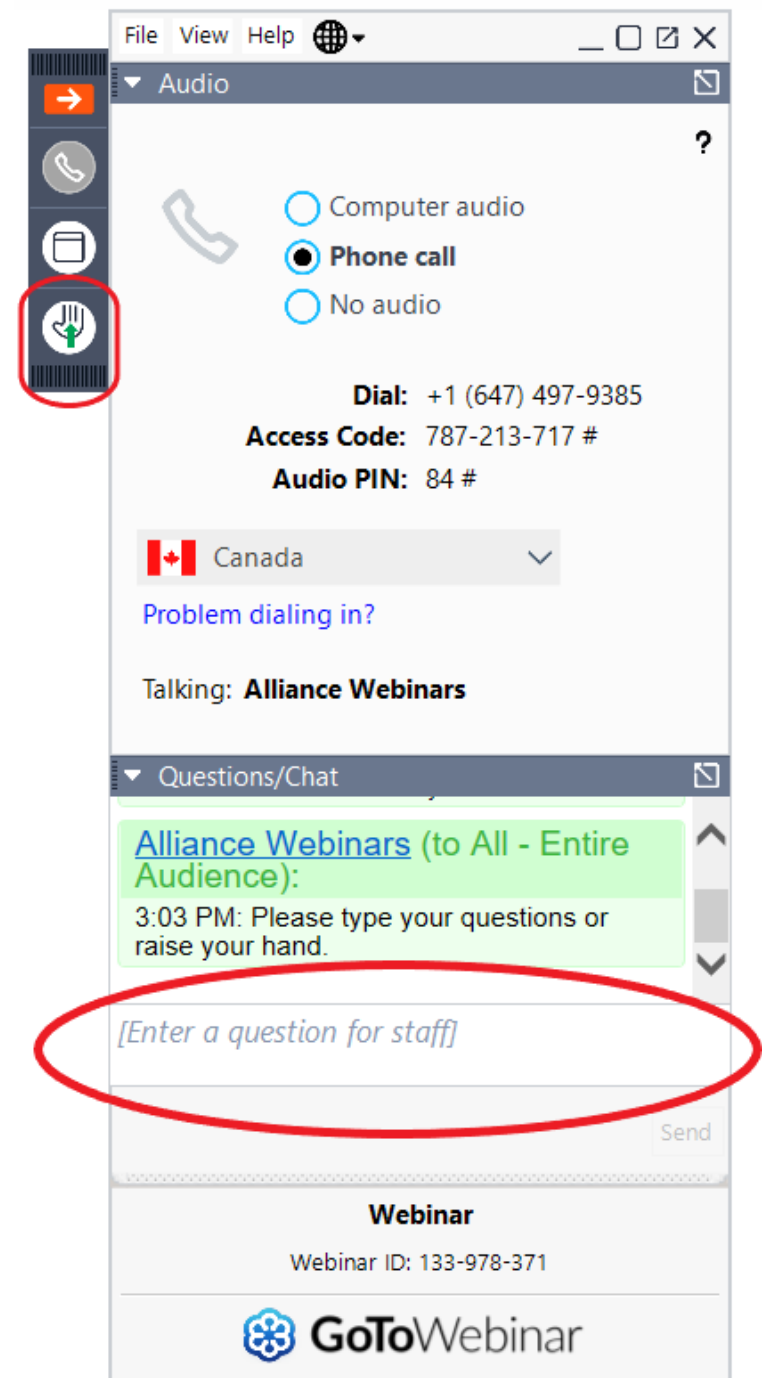
Click the orange arrow to open up your panel

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?



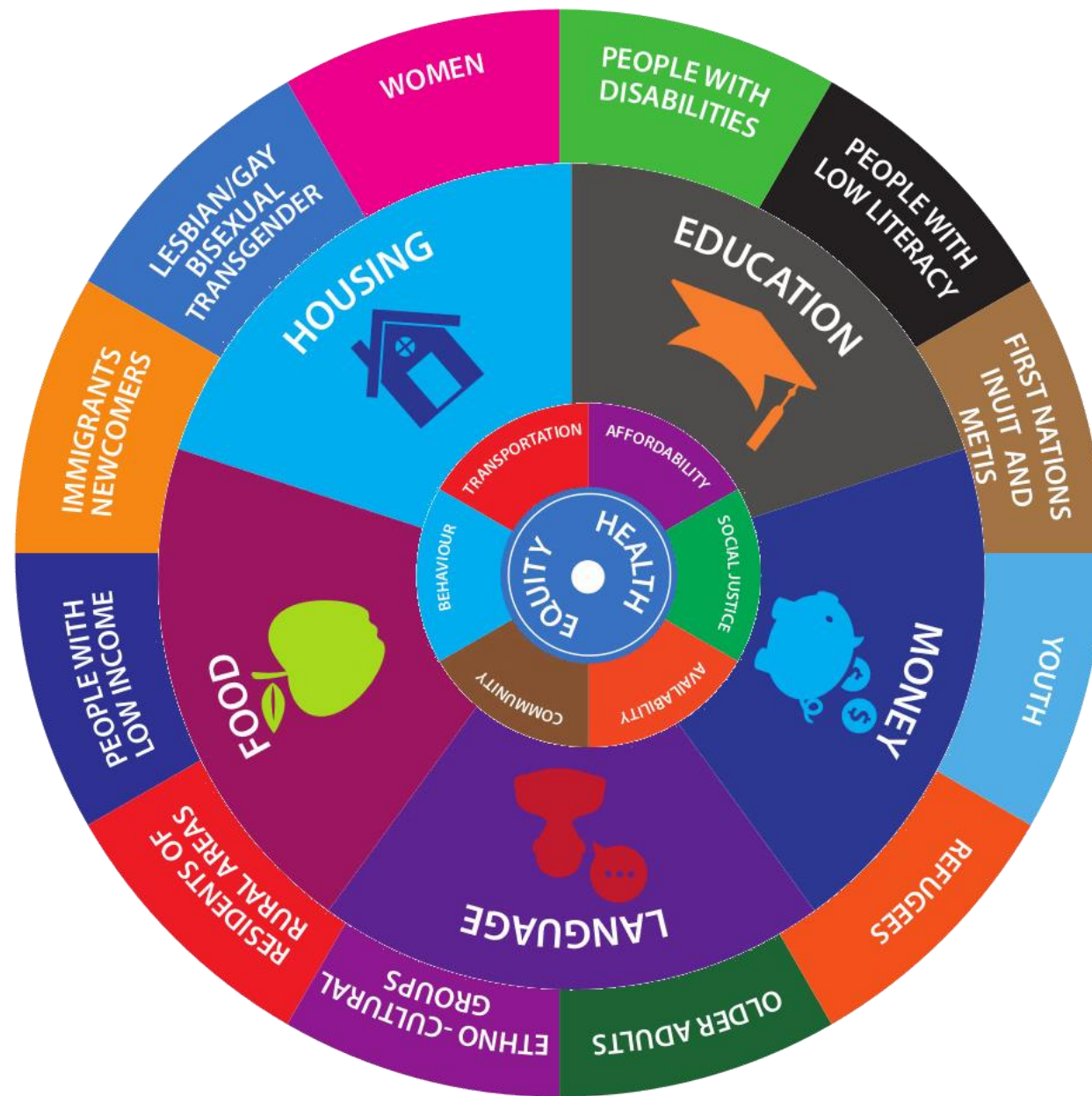
Welcoming remarks

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



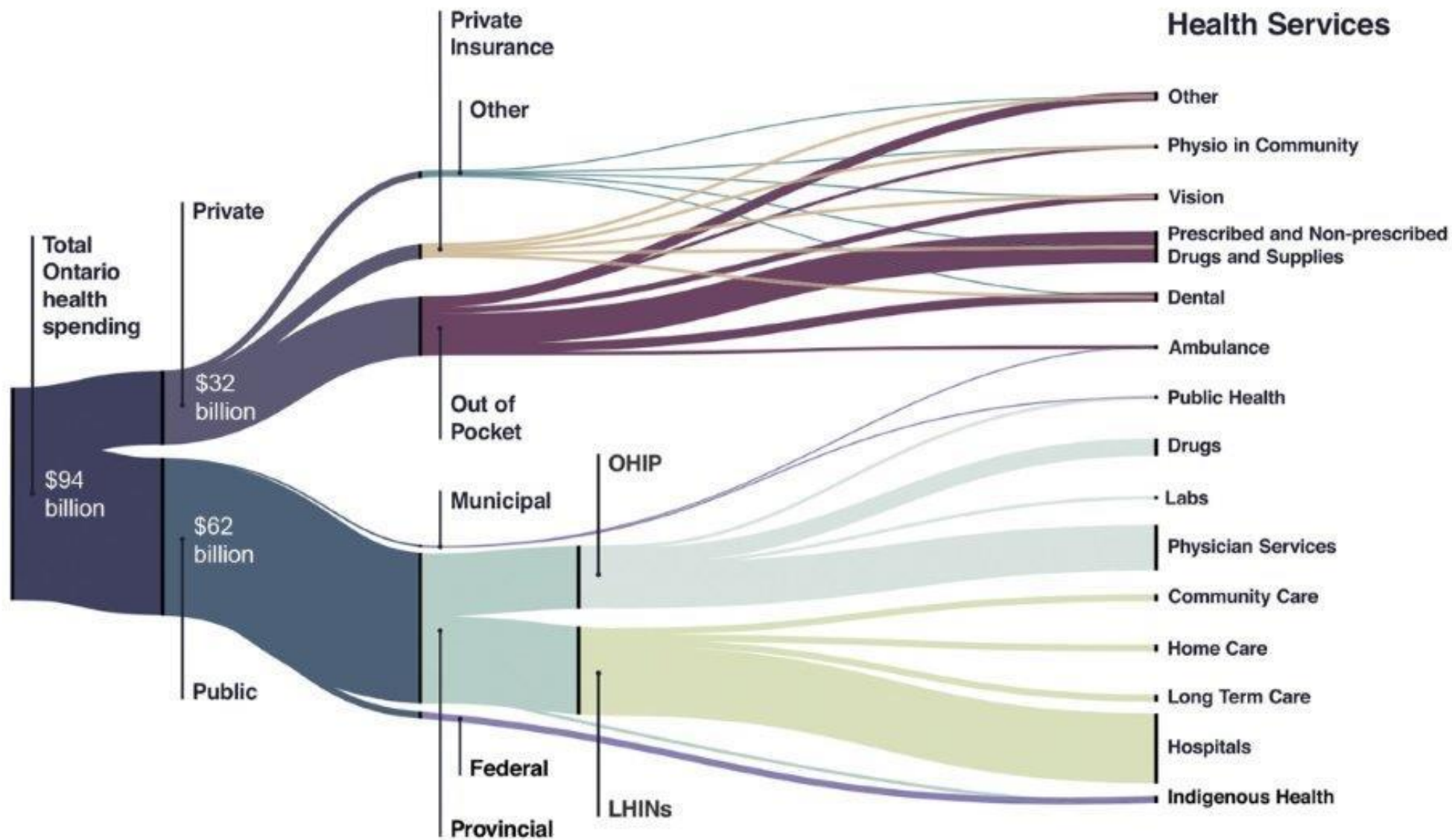
What is Social Prescribing and why does it matter now?

Dr. Kate Mulligan, Director of Policy and Communications
Alliance for Healthier Communities



Source: [Grey Bruce Public Health](#)



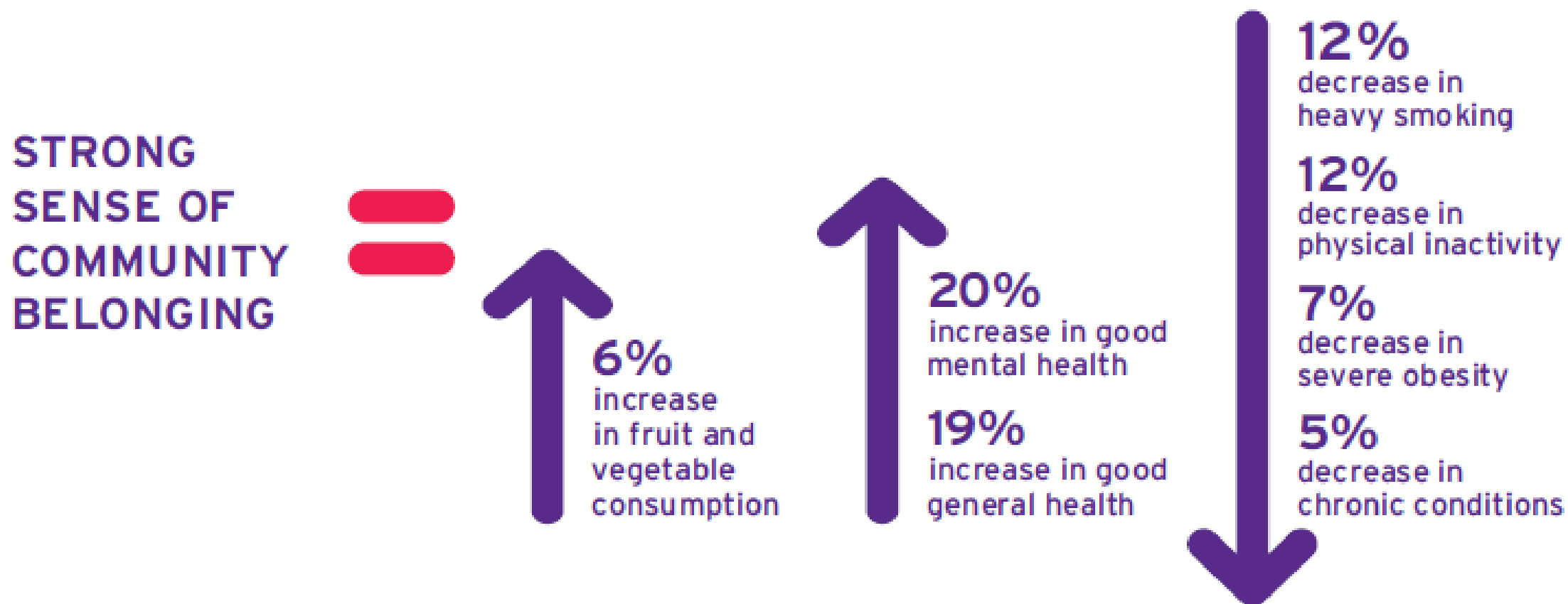


Source: Tai Huynh [@taimhuynh](#)

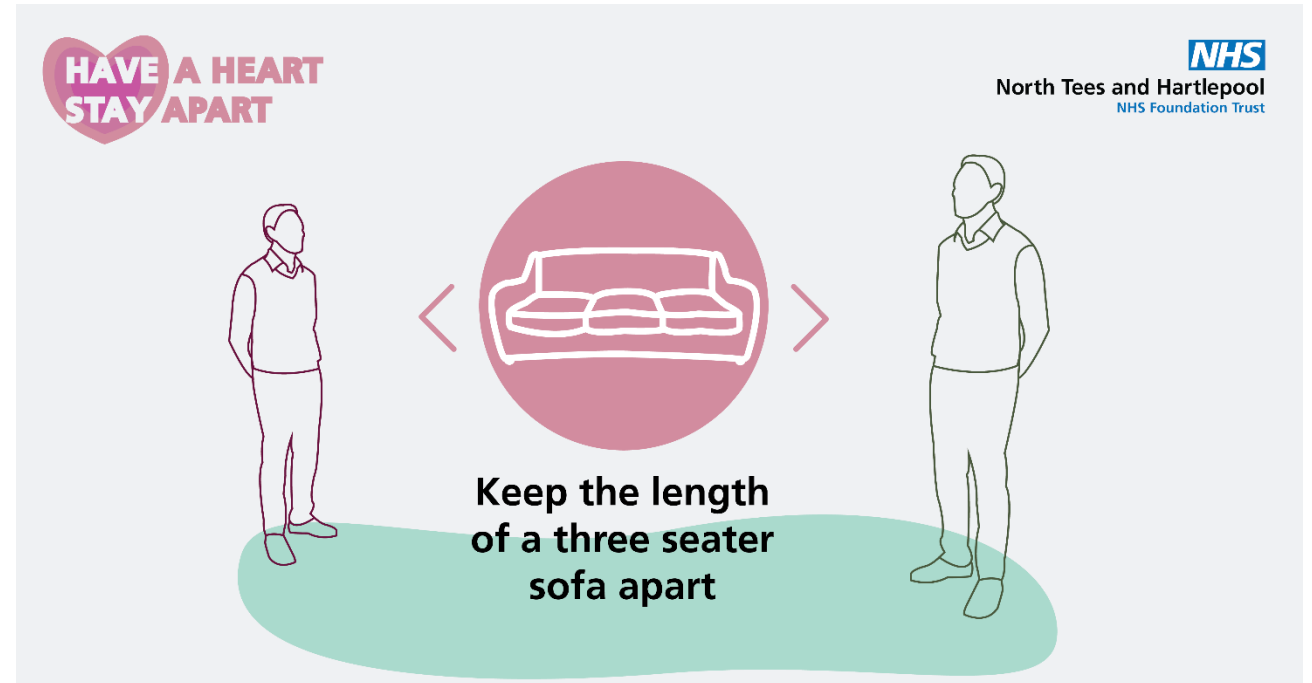


Figure I: Association of Community Belonging with Health and Health Behaviours

Adjusted prevalence ratios using the using the 2013/14 Canadian Community Health Survey cohort



Isolation is a determinant of health







**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



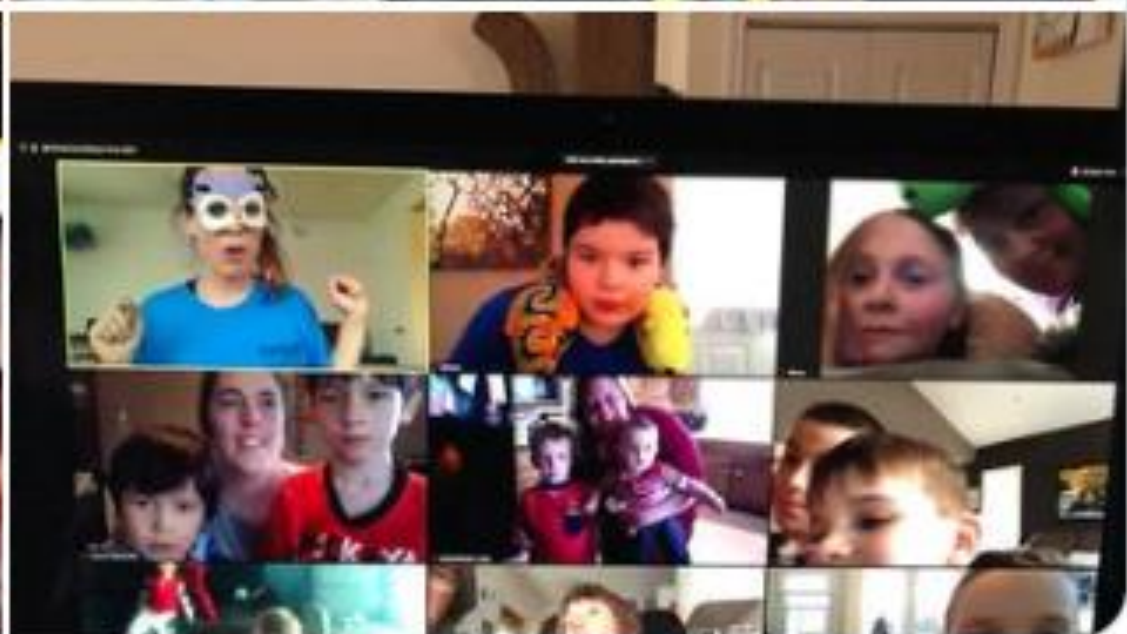
Social prescribing navigator

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



Rx: Community – Social Prescribing in Ontario



Key Outputs

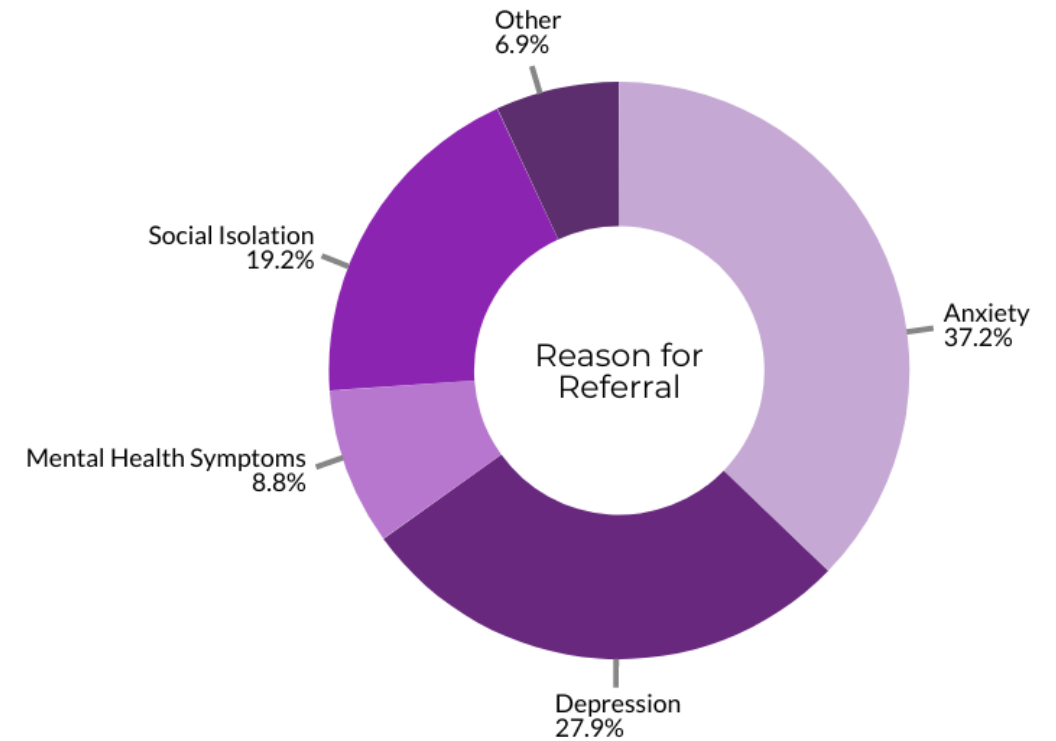
 **147**
PROVIDERS
PARTICIPATED

 **1101**
CLIENTS

 **3295**
REFERRALS
MADE

 **71**
HEALTH
CHAMPIONS

 **58**
HEALTH CHAMPION
CREATED PROGRAMS



Key Finding #1: Improvement in Client Health

“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

Client outcomes	% Change
Self-reported mental health	↑ 12 %
Sense of loneliness (Campaign to End Loneliness Tool)	↓ 49 %
Social support: Involvement in social activities	↑ 19 %
Self-reported sense of community belonging	↑ 16 %

Key Finding #2: Health Care Providers find SP Useful

Health provider survey	Difference between 3 & 9 months
SP has improved client's health and wellbeing	↑ 27 %
SP has decreased number of repeat visits by clients	↑ 37 %
Feel supported in referring clients	↓ 13 %
Sufficient resources are available to support SP	↑ 14 %

“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



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