Healthy London Partnership

Social prescribing link workers (SPLW)

What is a SPLW?

- Supports people with the **non-clinical aspects** impacting an individual's **health & wellbeing** - wider determinants of health e.g. housing, transportation, education, job opportunities, finance & legal advice, physical activity, access to green space & healthy food
- Gives people time and focuses on what matters to them, taking a **holistic approach** to supporting unmet needs
- Builds and maintains strong connections with the local voluntary, community, and social enterprise (VCSE) sector and facilitates **inter-organisational collaboration**
- **Connects people** to local community support, opportunities, and activities to improve their health and wellbeing
- Key enablers in **tackling of health inequalities** in communities by supporting people facing the most disadvantage
- Helps **co-produce** the social prescribing service with communities impacted by inequality
- Supports local VCSE to be **accessible and sustainable** and works collaboratively with all local partners

Unique contribution of a SPLW

- Addresses **wider non-clinical issues** that affect people's health & wellbeing
- **Builds relationships** with local communities impacted by health inequalities and the non-clinical services that can support them in the community
- Supports GP surgeries, Primary Care Networks and other services to deliver care that suits the needs of local people
- Supports the **sustainability of community assets** by working with partners such as VCSE, local authorities and healthcare
- Supports people for an average of **6-12 contacts over a three-month period**, depending on the support the person needs
- Manages an annual caseload to a **maximum of 200-250** depending on complexity of case

What support do SPLWs need?

Support and development opportunities:

- Two types of **supervision**: clinical and line manager or SP manager
- **Peer support networks, webinars and shared learning**: opportunities to join Social Prescribing networks, capacity and time to attend webinars and support sessions every 2-4 weeks
- Optional drop-in **case discussion** sessions
- Meetings with the **other personalised care roles** (social prescribing link workers, health and wellbeing coaches) to collaborate on caseloads in their local area
- Time to attend local VCSE, Local Authority (LA), & Multi-Disciplinary Team (MDT) meetings
- Opportunities for **reflective practice**
- Flexibility to manage a caseload, community development, training and networking activities

Access to Social Prescribing resources including:

- Resources and support for new SPLWs
- Sign up to the Social Prescribing newsletter
- Digital systems supporting SP (SP digital platforms providers)
- FutureNHS Social Prescribing Collaboration Platform

Right person for the role?

Skills and attributes

- Good at developing relationships with a diverse set of people and services
- Excellent listening and communication skills
- Non-judgmental and self aware
- Empathetic and understanding
- Emotional resilience
- Enthusiastic & self-motivated
- Good at problem solving and collaborating
- Willingness to help and work as part of team
- Good IT and record keeping skills
- Willingness to undertake training and develop

Useful Experience

- Worked in environments supporting people with their wellbeing, goals or social needs
- Used strength based techniques, coaching, reflective practice & co-consulting
- Worked with vulnerable people and the VCSE sector
- Knowledge of services in the community
- Risk assessment and safeguarding

Employing SPLWs

- Up to Band 5 AfC : Network Contract DES 2022/23
- Pay should reflect seniority and specialism, which may involve topping up ARRs reimbursement
- Draft SP Workforce Development framework
- SPLW competencies framework

Training SPLWs need?

- NHSE & online learning programme on HEE eLearning for health platform
- Appropriate training outlined in Personalised Care Institute Core Curriculum: Personalised Care (e-learning, in person) - Personalised Care Institute (PCI)
- Attends peer support networks delivered at place/system by ICS and/or NHSE/I in the region
- How to communicate and support patients e.g. difficult conversations, shared decision making, mental health first aid, and motivational interviewing
- Local induction to the PCN, VCSE & LA
- Electronic health systems and patient data
- Induction to MDT working