

Individual and community co-benefits of social prescribing and personalised care

The following table, adapted from Polley et al, shows some of the individual, community and system co-benefits of social prescribing and personalised care.

Physical, mental and emotional health and wellbeing	Behaviour change	Social determinants of ill health	Build up local community	Build up VCSE sector	Cost-effectiveness and sustainability
Improve modifiable lifestyle factors	Motivation and activation	Proactive outreach to reach marginalised groups	Increase awareness of what is available	Increased volunteering opportunities	Prevention
Improve self-management of LTCs	Lifestyle changes	Social welfare and legal advice	Stronger links between VCSE, health, social care and other statutory agencies	Volunteer graduates running scheme	Addressing fundamental causes with long-term downstream impact
Self-confidence and esteem	Sustained change	Better employability	Community resilience	Addressing unmet needs of patients	Reducing in primary and secondary care use
Improved mental health	Ability to self-care and self-manage	Increased skills	Nurture community assets	Enhance social infrastructure	Reduced medicines prescribing
Reduce social isolation and loneliness	Learn new skills	Social networks			Savings across the care pathway
Improve quality of life and self-reported measures	Autonomy				

From: <https://westminsterresearch.westminster.ac.uk/download/f3cf4b949511304f762bdec137844251031072697ae511a462eac9150d6ba8e0/1340196/Making-sense-of-social-prescribing%202017.pdf>