

## Social Prescribing Outcomes and Evaluation Framework

### About this framework

This framework has been developed to support the measurement and evaluation of social prescribing services. It categorises what information is required from each part of the system in terms of *structure* (what building blocks need to be in place), *process* (how things need to work in practice) and *outcome* (what we hope to achieve) for each part of the system. This makes it possible to identify what data and measurement will help evaluate the effectiveness of social prescribing interventions without being reliant on outcomes that are distant and difficult to capture.

### What is required of different stakeholders to deliver an effective social prescribing offer?

	Social Prescribing Link Workers	VCSE organisations	Primary Care Networks	Commissioners	People
Structure	<p>Understand the need for SPLW services, ensure people who need the service are proactively as well as opportunistically identified and ensure the offer is appropriate for all people (i.e. that provision is need and not demand led).</p> <p>Need to be able to identify and draw attention to any gaps in local services.</p>	<p>Have clarity about intended model of provision (is it time bound, ongoing).</p>	<p>Have a clear sense of the value they seek from social prescribing.</p> <p>Identify through proactive and opportunistic routes, particular target groups and so benefits are met.</p> <p>Consider how social prescribing is embedded into practice so it can be systematically to best effect.</p> <p>Need to consider what records are kept and for what purposes e.g. READ / SNOMED codes.</p>	<p>Have a clear vision for social prescribing.</p> <p>Ensure that enabling infrastructure is in place.</p> <p>Identify particular VCS relationships that require direct commissioning.</p>	<p>Be willing to engage with self-assessment and goal setting.</p> <p>Have easy access to service offer.</p>

	<b>Social Prescribing Link Workers</b>	<b>VCSE organisations</b>	<b>Primary Care Networks</b>	<b>Commissioners</b>	<b>People</b>
<b>Process</b>	<p>Know what's available in the community and understand the clients whom that provision might suit.</p> <p>Be able to work with providers to develop their offer.</p> <p>Need to be able to motivate people.</p> <p>Recognise the persons need for support whilst building their independence.</p> <p>Work collaboratively with all system partners to prevent duplication and ensure care is coordinated.</p> <p>Know who has been seen, their level of need, and plan accordingly.</p>	<p>Need to offer a warm welcome.</p> <p>Need to understand their place in wider service and physical /digital environment.</p> <p>Needs communication channel with Link Worker providers or commissioners if additional resources required or at service capacity.</p> <p>Actively engage with information on impact, sharing learning across services and responding, with support to help improve system outcomes.</p> <p>Work collaboratively with all system partners to prevent duplication and ensure care is coordinated.</p>	<p>Work collaboratively with all system partners to prevent duplication and ensure care is coordinated.</p> <p>Ensure appropriate utilisation of services.</p>	<p>Pay attention, and respond to, the impact of social prescribing on VCS partners.</p> <p>Collate evidence, with partners of impact of social prescribing services to support future funding.</p> <p>Residents are supported to be digitally engaged.</p> <p>Work collaboratively with all system partners to prevent duplication and ensure care is coordinated.</p>	

	<b>Social Prescribing Link Workers</b>	<b>VCSE organisations</b>	<b>Primary Care Networks</b>	<b>Commissioners</b>	<b>People</b>
<b>Outcome</b>	<p>Understand the impact of their actions and of services provided i.e. improved wellbeing, goals achieved.</p> <p>Ensure service users are able to successfully access offers and resources.</p>	<p>Collate and share information about quality of service delivery (including safeguarding, equality and diversity) and impact on service users.</p> <p>Monitor accessibility, duration and intensity of services.</p>	<p>Monitor</p> <p>Deliver proactive services which recruit from identified target service user groups.</p>	<p>Understand impact of commissioned services on people, on target groups, and the wider system.</p> <p>Capture cost per service user of commissioned services.</p>	<p>Share satisfaction with connector and provider services.</p> <p>Capture changes in activation and wellbeing.</p>

## Measuring Social Prescribing Services

Below are suggested measures which can help providers of services to understand how their processes are functioning and the outcomes they are providing to their service users and local populations. These are not designed to be comprehensive and do not cover all areas of evaluation (e.g. equality and diversity, or collecting data to meet contractual requirements for individual services), but are designed to aid consistent collection of information which will support the activities listed above. Tips for using these measures:

- Measurement takes time, particularly if you don't regularly record the information using an IT system or spreadsheet. Don't spend too much time measuring and evaluating, particularly if you're in a small organisation or team.
- Don't collect data for the sake of it! The aim of collecting this information should be to better understand what's happening and to make improvement, so make sure you use the data you collect – otherwise the time you spend doing the work will be wasted.
- Data is most effective when it is shared and discussed, so think about how you present your data and share it with organisations you work with, particularly if you need to work with them to solve any problems you've identified.
- Don't collect everything all of the time – there may be some things (service user outcomes and satisfaction are good examples) that you want to collect regularly, but other things (mapping referrals and appointments) that you do as infrequent, one-off pieces.




## Measures for Social Prescribing Link Workers

	What do you want to know?	What measure would help you?	How might you collect that data?
Outcome Measures	<b>How is people's overall wellbeing affected by social prescribing link worker services?</b>	Ask service users to complete the <a href="#">ONS4 Measures of Wellbeing</a> questions. The ONS4 are measures of wellbeing which provide before and after measurement to see how social prescribing has helped service users.	Ask services users to complete the ONS4 questions at the beginning of an intervention to create a baseline. Repeat each time you wish to review their progress, and at the end of the intervention to compare to the baseline.
	<b>How many people achieve what they want to get them seeing a link worker?</b>	Ask service users to complete the <a href="#">Measure Yourself Concerns and Wellbeing (MYCAW)</a> . MYCAW helps service users to identify concerns they would like to work on, and provides before and after measurement to see how social prescribing has helped them.	Ask service users to complete the first MYCAW form to begin your intervention with them – this will help them to identify the concerns that have led them to seek support, and provide baseline data. When the work is complete, they complete the second form to compare.
Outcome Measures	<b>How satisfied are people with our link worker services?</b>	<p>% Service users who report being satisfied or very satisfied with the SPLW service received on a 1-5 Likert scale questionnaire question:</p> <p>“From 1 to 5, where 1 is not at all, and 5 is very much, how satisfied were you with your social prescribing link worker?”</p> <p>NHS services only:</p> <p>% Patients who report that they would recommend the SPLW service to a friend or family member requiring a similar intervention.</p>	<p>You could ask this question to service users as a questionnaire following their appointments with link workers or following their final session. You may also wish to ask people why they ticked the answer they did on a questionnaire, and what you could do to improve, as this will generate useful feedback.</p> <p>NHS services will already have systems in place to collect FFT data.</p>
	<b>Do link worker services meet people's needs?</b>	<p>% Service users who report that there needs were met by the SPLW service received on a 1-5 Likert scale questionnaire question:</p> <p>“From 1 to 5, where 1 is not at all, and 5 is very much, to what extent were your needs met by your social prescribing link worker?”</p>	This can be collected in the same way as the satisfaction question above.

	What do you want to know?	What measure would help you?	How might you collect that data?
Process Measures	How many referrals are link workers getting, and from where?	<p>(a) Number of service users referred to your SPLWs.</p> <p>(b) break down the service users in group (a) by organisation and profession of the referrer</p>	<p>Monitor the number of new referrals that come in each week (you could plot this on a line chart to look at the variation in referrals over time. If your IT system allows, extract regular data on referrals, or review a manageable sample of them manually.</p> <p>For referrals within PCNs, reporting on the social prescribing READ or SNOMED codes will tell you this.</p>
Process Measures	What level of need do service users being referred to SPLWs have?	<p>Categorise service users referred to your SPLWs, by assessment of need. We recommend using the following:</p> <ol style="list-style-type: none"> <li>1. Signposting and information on local services.</li> <li>2. Advice and navigation to local services</li> <li>3. Case management and navigation for people needing more support</li> <li>4. Specialist case management (outside remit of SPLW)</li> </ol>	<p>You may find it useful to categorise your referrals using this framework as they arrive. If so, extract this data from your IT system, or review a sample of them manually and categorise them in retrospect.</p>
	Which VCSE services are in highest demand?	<p>(a) Number of referrals to VCSE sector made by SPLW</p> <p>(b) break down the service users in group (a) by VCSE provider and offer</p>	<p>As above – extract this information if it is held in an IT system and review the results, or choose a manageable sample and review them. Display them in a bar chart or <a href="#">Pareto chart</a>.</p>
	How many appointments do service users usually have with their link workers?	<p>Average number of sessions service users referred to SPLW attend with a SPLW before the SPLW intervention is completed.</p>	<p>Review data from your existing booking and appointments system. Take a sample of service users and use an average calculation.</p>

## Capturing service user experience using PROMs

Patient-Reported Outcome Measures (PROMS) are tools for capturing the outcomes of interventions have achieved for service users. They can be used to measure the impact of a service in the service users own views. An evaluation of available PROMs concluded that the most suitable for measuring the impact of SPLW services are the MYCAW tool for capturing the impact on service user concerns, and the ONS4 for capturing impact on overall wellbeing. These tools are simple and free to use. More information is available via the links below, and a copy of the analysis of PROMs and the two recommended tools are below:

Analysis of decision making tools for PROMs	<a href="#">Further information on the ONS4 Measures of Wellbeing</a>	<a href="#">Further information on the Measure Yourself Concerns and Wellbeing (MYCAW)</a>
 Decision making tools for PROMs in sc	 ONS4 Personal Wellbeing Scale.docx	 MYCAW - Self-Completion.pdf

## Measures for Voluntary, Community & Social Enterprise Organisations

For VCSE organisations it is recommended that measurement is proportional to the scale and scope of the organisation and of the offer being provided. For smaller organisations or groups it might be easier to conduct qualitative evaluation e.g. speaking to service users to ask them for their feedback, find out what they have gained or learned, and get ideas for feedback. If the service user is happy these can also be written up and shared as case studies.

	What do you want to know?	What measure would help you?	How might you collect that data?
<b>Outcome Measures</b>	<b>Are service users happy with what we provide?</b>	<p>% Attendees who report being satisfied or very satisfied with each offer they have participated in on a 1-5 Likert scale questionnaire question:</p> <p>“From 1 to 5, where 1 is not at all, and 5 is very much, how satisfied were you with [name of offer]?”</p>	<p>You could ask this question to service users as a questionnaire following their appointments with link workers or following their final session. You may also wish to ask people why they ticked the answer they did on a questionnaire, and what you could do to improve, as this will generate useful feedback.</p>
	<b>Do our services meet people's needs?</b>	<p>% Service users who report that their needs were met by the offer they have participated in on a 1-5 Likert scale questionnaire question:</p> <p>“From 1 to 5, where 1 is not at all, and 5 is very much, to what extent were your needs met by [name of offer]?”</p>	<p>This can be collected in the same way as the satisfaction question above.</p>
	<b>What do service users get from being part of this group / activity / offer?</b>	<p>For activities, satisfaction may be the perfect outcome to capture success. For others e.g. those with an educational component or a specific aim, it may be appropriate to ask a specific question to find out what they have gained. This can be done using a 1-5 Likert scale. For example:</p> <p>From 1 to 5, where 1 is poor, and 5 is excellent...</p> <ul style="list-style-type: none"> <li>• “How would you rate your knowledge of X?</li> <li>• How would you rate your skill in X?</li> <li>• How would you rate your ability to manage X?</li> </ul>	<p>As above, you could ask this as part of a questionnaire along with questions about satisfaction and enjoyment.</p> <p>You could ask service users the question pre and post completing an offer, so that you can compare the progress they have made.</p>

	What do you want to know?	What measure would help you?	How might you collect that data?
<b>Process Measures</b>	<b>How many people are attending each of the offers that you provide?</b>	<p>(a) Number of service users referred for each offer provided by the organisation</p> <p>(b) Number of service users referred for each offer who can't be seen due to capacity</p> <p>(c) Number of service users referred for each offer whose needs are not appropriate for the offer provided</p>	<p>Monitor the number of new referrals that come in each week (you could plot this on a line chart to look at the variation in referrals over time. You could keep this info in a spreadsheet or IT system and review it at appropriate intervals.</p> <p>If you receive referrals that aren't appropriate you might want to feed this back to the referrer.</p>
	<p><b>How often do people attend the offers they are referred for?</b></p> <p><b>For a time-limited offer, do people complete it all?</b></p> <p><b>For an ongoing offer, how long do people stay in the group for?</b></p>	<p>(a) % of service users referred for each offer who attend for at least one session (this is the Did Not Attend rate)</p> <p>For time-limited offers:</p> <p>(b) % of service users attending at least one session, who then complete the full offer / all sessions</p> <p>For ongoing offers:</p> <p>(c) average duration (in weeks / months) of individual attendance for those attending at least one session</p>	<p>If attendance records are kept electronically, use these to review a sample of attendees for each offer. If not, using sign-in sheets for sessions, or simply asking service users how long they have been attending regular offers (to the nearest year / month) would give an indication.</p>



## Social prescribing link workers in Primary Care Networks: NHS England suggested measures

These are the suggested measures of social prescribing impact from NHS England through the network DES specification. PCNs may wish to consider incorporating these into their regular reporting, or conduct audits at set intervals, although it is recognised that these will be difficult measures to collect data for. Additionally, GP usage, ED usage and non-elective hospital admissions are measures of complex and multi-factorial issues, and PCNs may wish to consider using other forms of evaluation such as case studies and interviews to explore the impact of social prescribing interventions to complement these measures.

	Measure	Rationale	Operational Definition	Source
Outcome Measures	<b>Impact of SPLW on GP usage</b>	Is there a change in the number of GP consultations as a result of referral to social prescribing?	For patients who have had a SPLW intervention, compare:  (a) Average number of GP consultations in the 6 months prior to their first SPLW appointment.  (b) Average number of GP consultations in the 6 months after their final SPLW appointment.	EMIS / Request data from NEL CSU
	<b>Impact of SPLW on ED usage</b>	Is there a change in A&E attendance as a result of referral to social prescribing?	For patients who have had a SPLW intervention, compare:  (a) Average number of ED attendances in the 6 months prior to their first SPLW appointment.  (b) Average number of ED attendances in the 6 months after their final SPLW appointment.	Request data from NEL CSU
	<b>Impact of SPLW on hospital bed usage</b>	Is there a change in the number of hospital bed days as a result of referral to social prescribing?	For patients who have had a SPLW intervention, compare:  (a) Average number of non-elective admissions in the 6 months prior to their first SPLW appointment.  (b) Average number of non-elective admissions in the 6 months after their final SPLW appointment.	Request data from NEL CSU

	Measure	Rationale	Operational Definition	Source
<b>Outcome Measures</b>	<b>Impact of SPLW role on prescribing</b>	Is there a change in the volume of medication prescribed as a result of referral to social prescribing?	<p>(a) % service users in tiers 2-3 who have completed an intervention with a SPLW whose regular medications are reduced or stopped in the 6 months since their first appointment with SPLW.</p> <p>(b) Average number of medications reduced or stopped per person for all service users in (a).</p> <p>(c) Cost per month of medications reduced or stopped for patients in (a)</p>	EMIS
	<b>Impact of SPLW role on PCN workforce</b>	Is there a change in the morale of staff in general practice and other referral agencies?	NHS England will provide a mixed methods survey to help with this task.	NHS England