

Volunteer-led social prescribing: Community CVS, Blackburn & Darwen



Context

Blackburn with Darwen has a population of almost 147,000, 68.1 % of whom identify as white, and 28.1 % as Asian. There is an increasing demand on services from people with increasingly complex needs. Many people face multiple disadvantages and experience barriers to accessing statutory health and social care services appropriately at primary care level. Community CVS was initially commissioned through the Department of Health and local Public Health services to develop a social prescribing service which takes an asset-based community development approach, maximising the use of volunteers as community assets and helping citizens to reduce their overall reliance on health and social care services and in particular more costly acute provision.

Analysis

Community CVS aims to benefit residents by empowering people to become healthier and happier, benefit health and social care providers by reducing demand, and benefit the social economy by generating an additional volunteer workforce that can sustain positive action within the community. It differs from other social prescribing services in that the signposting and service navigation is facilitated through volunteers rather than paid members of staff. Deputy chief executive Kate Lee explains: “Our volunteers run drop in outreach services called ‘Recovery Access Points’ which form a kind of triage system where they can meet with vulnerable individuals and assist them to navigate appropriate support from other services while providing continuous wraparound support through this process. We use the volunteer workforce to support partners at the venues they use. For example, we run a drop in session at a local soup kitchen to support THOMAS and Lancashire Women’s Centres – two local charities which are working with ex-offenders and the most marginalised within our community. We also provide volunteer support to help Child Action Northwest and Lancashire Women’s Centres to support vulnerable adults living in local hostels as part of the national Making Every Adult Matter initiative.”

Community CVS accepts referrals from GPs as well as receiving referrals from Care Network, which operates a central referral hub called Your Support Your Choice on behalf of the local authority, NHS and key third sector providers. Community CVS provides a weekly drop in session at the hub and provides the necessary links to access volunteering and help people get involved in community activities.

The challenge for Community CVS was to demonstrate the value of its approach to social

prescribing and create an appropriate outcome measurement framework.

Solution

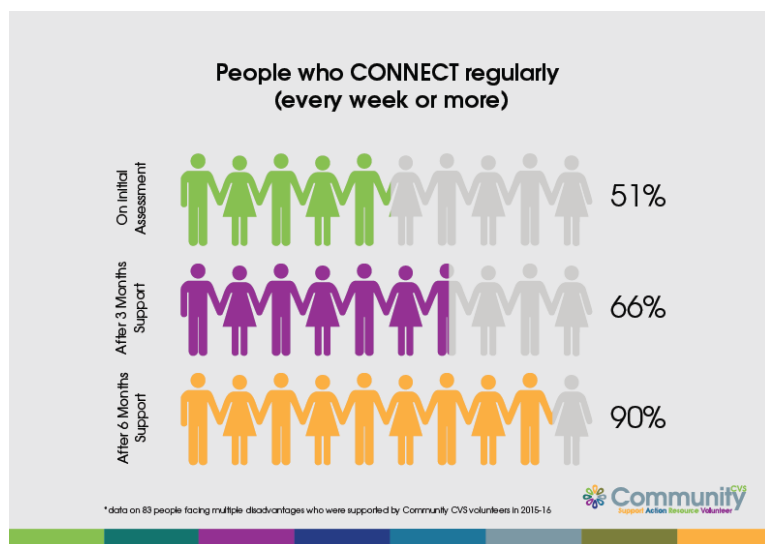
The [Five Ways to Wellbeing](#) were used to construct an outcome measure tool which captured the experience of people referred to Community CVS. A cohort of 83 people who had been supported for three to six months by a Community CVS peer support volunteer participated in survey-based and qualitative research. Distance travelled was measured in the five ways to wellbeing domains: Connect, Get Active, Take Notice, Keep Learning, Give.

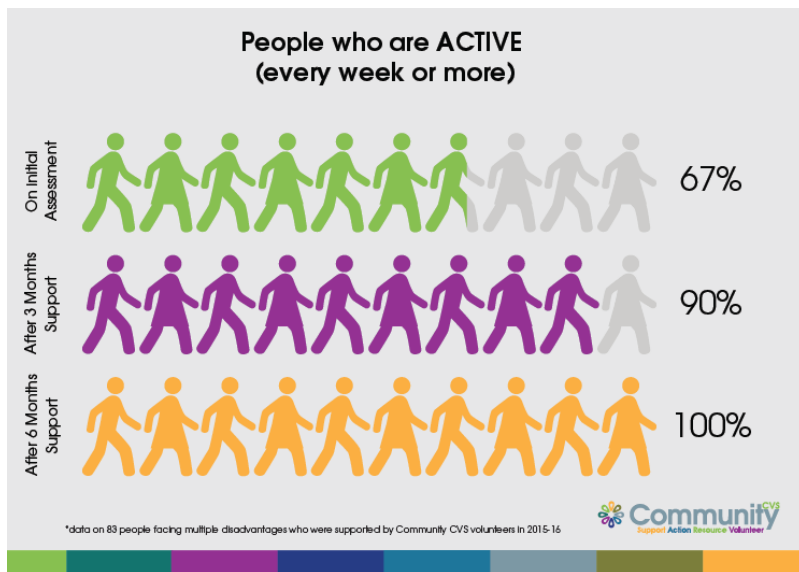
Outcomes

After six months, the percentage of people who connected to others once a week or more rose from 51% to 90%.

Activity levels rose from 67% of people identifying as active once a week or more to 100%. Those who 'took notice' at least one a week or more increased from 14% to 81%. Initially 21% of the cohort was engaged in some kind of weekly learning experience – this rose to 58%. As volunteering is built into the service model from the outset, there were several routes to support people to give their time and energy as volunteers, with the percentage of people volunteering rising from 14% to 54%.

Examples of graphics demonstrating outcomes:





Qualitative data emerged from interviews with individual clients. Comments included:

- “I would never have dreamed of going where large amounts of people are, now it’s becoming less of a problem. And my drinking is not as bad as I have other things to do and think about,”
- “My confidence has really grown, before I would want to go out and couldn’t because I was too afraid. Now, I don’t even think about it. My life has improved 100%.”
- “I am in a much better place. I am looking forward to the future, I have found my voice and I am able to talk out - at last I am no longer scared”.

Lessons learned

- It makes sense to use community and voluntary sector infrastructure organisations with already established links and wide reach to networks of community organisations in order to link people to positive opportunities and harness community assets
- While peer support volunteers reduce demands on health and social care in the long term, they are not cost free; provision for a paid coordinator to ensure safe management, training and supervision of volunteers who work with vulnerable people is essential.
- A mixed cohort of peer support volunteers works best to provide a range of skill-sets i.e. those with lived experience alongside working alongside other members of the community.





For more information

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