Personalised Care

Welcome!

An induction guide for social prescribing link workers in primary care networks.

Publishing approval reference: 000686
September 2019

We have designed this welcome pack with links to some useful short films. If you read it online you will be able to click straight through to the films. You can read the interactive version at www.england.nhs.uk/personalisedcare/social-prescribing-support-and-resources

Welcome

Welcome to the NHS

I'm so delighted that you've chosen to be part of a fabulous team in general practice and in your community. Your role is part of an ever-growing team in primary care. You are the future guardians of the NHS. What you will do for your patients will change their world and will change the way we practise as GPs. In my own patch my experience of social prescribing link workers has been phenomenal. It has changed the lives of my patients in ways that I don't think any of us could ever have expected.

So I'm delighted to welcome you. Enjoy this pack. Enjoy your job and good luck.

Dr Nikki Kanani,
GP and Interim Medical Director for Primary Care

Introduction

Welcome to your new role. You will be working with your primary care network team to support people in new ways, through social prescribing.

Social prescribing itself is not new. Over the past few years it has developed into a powerful social movement.

There are already great examples of where people have been helped to improve their health and wellbeing by being linked into activities in their local communities. You may already have social prescribing in your area, led by other agencies, such as local authorities and voluntary organisations, which you'll need to connect to. But this has hasn't been consistent across the country.

What is new, is the emphasis now being given to it in the NHS. This represents a huge leap forward. NHS England has committed to making social prescribing link workers available to people in every GP practice across England, and to increasing the numbers of link workers in primary care over the next five years.

These are exciting times, and you are a part of it.

This welcome pack won't give you all the information you need, but we hope that it will help you to find your feet in your new role. And it will point you in the direction of more detailed information that might be useful to you.

A useful starting point is the Summary Guide to Social Prescribing[1], which describes what good social prescribing looks like. Or for more detailed guidance, go to the PCN Reference Guide: Social Prescribing Link Workers[2].

1 https://www.england.nhs.uk/publication/social-prescribing-and-community-based-support-summary-guide/
2 https://www.england.nhs.uk/publication/social-prescribing-link-workers/

Setting the scene – personalised care

In January 2019, just after the NHS celebrated its 70th birthday, a Long Term Plan[3] was published. It was based on pride in all the good things that the NHS has achieved in its first 70 years. But it acknowledged that there are challenges to be met if it is to be fit for the future. The Plan wants to redesign patient care to future-proof the NHS for the decade ahead, so that we will be able to celebrate its 80th birthday in the best possible shape.

One of the big, practical changes which the Long Term Plan commits to is that:

"People will get more control over their own health and more personalised care when they need it".

This is because evidence shows that people will have better experiences and improved health and wellbeing if they can actively shape their care and support.

You can read more about personalised care – what it means, and what we're going to do about it – in Universal Personalised Care[4]. Its main aim is that up to 2.5 million people will benefit from personalised care by 2023/24. This will give them the same choice and control over their mental and physical health that they have come to expect in every other aspect of their life.

An animation explains more about the meaning of personalised care[5].

3 https://www.longtermplan.nhs.uk/
4 https://www.england.nhs.uk/personalisedcare/upc/comprehensive-model/
5 https://www.youtube.com/watch?v=RXOd-7rn6so

"As a link worker, it is a privilege to give people time to be heard, space to consider positive changes in their lives and empowering them to move forward."

Diane, Link Worker

We are working on a range of actions to help us embed personalised care – and in your role as a link worker, you are part of this. These are the six main areas we are working in:

- Supported self-management, especially for people with long term conditions
- Shared decision making between professionals and the people they support
- Social prescribing and community-based support
- Personalised care and support plans
- Choice – over where and how people receive care
- Personal health budgets for people with complex physical needs.

For social prescribing alone, the NHS is making the biggest investment of any national healthcare system in the world. We are committed to funding 1,000 new social prescribing link workers in primary care by the end of 2020/21, with more after that, so that 900,000 people will be referred to social prescribing by 2023/24.

And that's why we are so glad to welcome you as a social prescribing link worker.

Why does social prescribing matter?

What is social prescribing?

An animation explains more about social prescribing.

With thanks to the Healthy London Partnership for the film[6].

It's estimated that one in five of the people who go to see their GP are troubled by things that can't be cured by medical treatment. GPs tell us that they spend significant amounts of time dealing with the effects of poor housing, debt, stress and loneliness. Many people are overwhelmed and can't reach out to make the connections that could make a difference to their situation.

This is especially true for people who have long-term conditions, who need support with their mental health, who are lonely or isolated, or who have complex social needs which affect their wellbeing.

And that's where you come in. As a social prescribing link worker you can help people to identify what matters to them, and work out how to connect with the activities that might make a difference.

6 https://www.youtube.com/watch?v=O9azfXNcqD8

> **"In 2015 things fell apart and even everyday activities became overwhelming… but now I'm balancing my life, I work part-time, I'm involved in many activities and I feel good about the future. Social prescribing made all the difference to me and now I'm able to give back to my community."**
>
> **Arabella,**
> **Lived experience**

This is social prescribing. Making connections. Giving people a sense of belonging that comes from being part of a community group. Helping them to find a new sense of purpose, enjoying activities they might not otherwise have tried before. Helping them to stay physically and mentally well for longer and manage the long-term conditions they might be living with.

It's good for people. It's good for communities. And it's good for the GPs you'll be working with, because it gives them a non-medical referral option that can work alongside existing treatments.

For social prescribing to work well, link workers need to see themselves as part of a wider community, building on what's already there in local communities and working in partnership with other agencies.

Many local areas already have social prescribing link workers, volunteer health champions and community development supporters, often employed by local authorities and voluntary sector infrastructure agencies.

Whatever community resources and assets you have locally, your role will be to find them and help each other. It will be much easier to do things together and provide mutual support.

Who do you work for – and what is a primary care network?

You have joined a primary care network (PCN).

You will become an important member of your PCN multi-disciplinary team and take referrals from all member practices. You will be supported by a GP supervisor and help your PCN to work differently with people and communities, meeting wider social needs, connecting people for community support.

PCNs are a key part of the NHS Long Term Plan. They are groups of GP practices and local partners usually covering between 30,000 and 50,000 patients. GP practices in England have been part of PCNs since July 2019.

The practices and their partners work together with community, mental health, social care, pharmacy, hospital and voluntary services in their local areas. By working together they can provide more proactive and personalised care. They help to make health and social care more joined up. Where emerging primary care networks are already in place in parts of the country, there are clear benefits for patients and clinicians.

An animation explains more about primary care networks[7]:

7 https://www.youtube.com/watch?v=W19DtEsc8Ys&feature=youtu.be

What will you be doing as a social prescribing link worker?

You will be taking referrals from the GPs in your network. (And if your social prescribing service already takes referrals from other local agencies, you will take referrals from them too.) You will spend time with the people referred to you, building trusting relationships, listening carefully to what matters to people and what motivates them. Where people are isolated or lonely, it may be helpful for you to visit them at home.

You will work with individuals to create a shared plan based on what matters to them, to help them take control of their health and wellbeing. You will help them to connect with community and voluntary groups locally, supporting them to make their own choices and help them build confidence to cope with social situations, such as community group meetings.

You will also be working with partners to increase community capacity. Where local infrastructure agencies exist, such as councils for voluntary service (CVSs), they will provide development support to the local voluntary, community and social enterprise (VCSE) sector. You should connect with them and help them identify and meet development needs of local community groups and organisations.

It is also important that you work in partnership with local community workers, local area coordinators and whatever roles are in place locally. Together you will be able to share information about what training is available for small voluntary and community groups. And together, you will be able to nurture community groups and assets to help them become sustainable.

To summarise your job, these are the key features of what you will be doing:

You're not on your own

You will be part of a team with a variety of different skills – a multi-disciplinary team.

This could include pharmacists, physiotherapists, and other professionals and practitioners within general practice.

And within the wider network, you'll be working with social workers, housing advisors, debt agencies and other partners – because people's health and wellbeing is affected by so many factors apart from medical issues. By working in partnership there are real opportunities to improve people's whole outlook.

You will also be developing strong relationships with local voluntary and community sector organisations, community and neighbourhood groups, and other services, so you know what is available to people. This could be a whole range of activities, including, bereavement groups, dementia cafes, art classes, debt management services, gardening clubs, physical activity groups, fitness classes and many others.

"John keeps thanking us for all we did for him but if we did not have access to social prescribing then it would not have been possible to achieve what has been done. John knows that we will always be available if he needs us."

Link worker in general practice

Ways of working

> **"If you don't hear me, how are you going to know what I'm thinking"**
>
> **Ronald Amanze, Lived experience**

Your role is to help people gain more choice and control over their own health and care. To do this you will need to take a 'what matters to me' approach, so that together you can create a personalised care and support plan.

'What matters to me' approach

As a link worker, you will help people to focus on what matters to them, giving them time to tell their stories. By building rapport with people, and providing non-judgemental support, you will help them to identify what is important to them, and what the obstacles are to achieving this. This will vary from one individual to another.

To be effective in this approach, you will need to:

- listen actively and show you understand what matters most to the person
- provide non-judgemental support
- reflect to people what you understand they have said, checking understanding
- put what matters most to the person at the heart of every conversation
- be warm and friendly
- treat each person with dignity and respect
- where a person is not happy with their support, enable them to make a complaint.

By taking this approach, you want each person to be able to say:

- I am listened to, understood and 'what matters to me' is central to all our work together
- I am respected and treated with dignity as an individual
- my human rights are protected, and I do not experience discrimination
- I experience warm, compassionate, personalised care and support
- if I raise a concern or make a complaint, it is acted on quickly.

Personalised care and support plans

For people who need your support, you should help them to create a simple personalised care and support plan. It is essential that this should be co-produced by you and the person, and that they own its content. They should have a copy of the plan to keep, which they can refer back to. The plan is a summary of:

- what matters to me
- how best to support me – what people need to know about me
- any health conditions that groups and agencies need to know about my goals
- what support I am being connected to, such as community groups and services
- what I can do to support myself to meet my goals
- review – how it's going and what changes have taken place
- permissions – to share stories, be involved in evaluation and satisfaction surveys.

We have put an example template of a personalised care and support plan in **Annex 1**, which you can use or adapt.

How will you know if you're making a difference?

We know that you will make a difference to people's lives, but we need to be able to measure the impact that you have. This is important so that we can build strong evidence for the benefits of social prescribing, and so that we plan properly for the future.

Measuring wellbeing

You will need to measure the effect that your work has on people's wellbeing. If you are part of an existing scheme you may already have a system for doing this, and you can continue to use that. In addition, we have included some easy tools for you to use in **Annex 2A**. We have chosen them because they are widely used and tested across the country, and are free to use. We are asking all link workers in PCN multi-disciplinary teams to use ONS4 and PAM, to create national social prescribing data for the first time.

Whichever approach your PCN uses, you will need to work with your colleagues to develop ways of recording this information securely, and in a way that can be shared further down the line.

Measuring impact on community groups

The work that you do will have an impact on local community groups and VCSE organisations involved in social prescribing. It is important that you measure this.

You should carry out a brief 'confidence' survey with these organisations every six months. In **Annex 2B** there is a survey form for you to use.

The survey results can be used locally to:

- shape the capacity of community groups so that they can receive new people through social prescribing
- find out the number of local volunteers
- identify gaps in what is available and support the commissioning of new community support.

Measuring impact on the health and care system

As part of the PCN, you will have access to their IT system. Processes should be in place to use this system so that you can record your activity with people on their medical records. If this is not the case, speak to your supervisor about how you will work to record referrals and outcomes for those referred. An important part of your role will be to encourage all staff who refer people to you within the PCN to use the national social prescribing SNOMED codes that have been introduced.

Keeping people safe
(quality assurance)

> "I thought I was just nothing. Now I feel really good. Every morning I wake up with a smile. I think I've got a bright future as well."
>
> **Akeela, Lived experience**

When you connect people into voluntary organisations and community groups, it's important to support everyone to have a safe and positive experience.

Small, volunteer-led community groups are unlikely to have written safeguarding policies, so a 'common-sense', light-touch approach is needed.

We've created some basic 'prompt' sheets to enable you to start safeguarding conversations with community group leaders and staff in voluntary organisations, you will find these in **Annex 3A** and **Annex 3B**. These will help everyone to think through how they can include vulnerable people safely.

If your area already has quality assurance processes in place that partners are happy to retain, you should continue to use those. But if not, or if the assurance process needs strengthening, you should follow these principles:

1. Social prescribing supports people to make informed choices about engaging with community groups and VCSE organisations.
2. PCNs cannot be held responsible for the choices and actions that people take after being connected to community groups and VCSE organisations. This is down to personal choice for the individual.
3. You (on behalf of PCNs) can make basic quality assurance checks, using the prompt sheets provided in the annex, to ensure they are not connecting people to community groups and organisations which they consider to be unsafe.
4. The prompt sheets are designed to help you have constructive conversations, helping you to build confidence and be inclusive, to celebrate informal groups and wherever possible, enable them to be involved.
5. This process should not be used in a rigid way to exclude smaller groups because they do not have formal policies. Many small, volunteer-led community groups, such as 'knit and natter' and men's groups which meet in the local pub provide excellent informal peer support. It would be unrealistic for them to have formal policies and procedures. You should have constructive conversations, using scenarios, to help group members think about how they safeguard group members and, in particular vulnerable people.
6. It is important to take a proportionate and common-sense approach.
7. Where somebody raises a safeguarding concern, whether that is the person you are supporting, or a volunteer or staff member, there should be clear procedures for dealing with this swiftly and appropriately.
8. The process will improve the connections between health, social care and the community, facilitating more effective integration of local services.

In **Annex 3A** and **Annex 3B** you will find:

- a prompt sheet for use with VCSE service provider organisations
- a prompt sheet for use with volunteer-led community groups

Using these will help you to minimise risk and will enable you to create a comprehensive menu of community activities.

> "In the 30 years I have spent as a GP, social prescribing represents the most effective, wide reaching and life changing of all initiatives to date. People are enabled to use the clinical services more productively, and make personal advances which are both transformative and sustainable."
>
> **Dr Marie Anne Essam, GP**

How we'll support you

Your GP supervisor

Your PCN will appoint a GP supervisor to provide direct supervision for your work. They will meet you regularly, provide line management, address any issues or concerns and help you to succeed in the role. This will include ensuring that you can raise patient-related concerns (such as abuse, domestic violence, or other safeguarding issues) and can refer individuals back to other health professionals as relevant, for further support, review or monitoring.

Where social prescribing link workers are employed by a partner 'social prescribing provider' agency, the GP supervisor will still be required. In this arrangement, the GP supervisor will also need to involve the partner organisation in regular progress updates about your role, enabling clear lines of accountability, effective, seamless, joint working and problem-solving challenges together.

Access to 'clinical' or non-managerial supervision

As well as the ongoing support you will receive from the GP supervisor, you should have regular access to clinical or non-managerial supervision both with your GP supervisor and other relevant health professionals within the PCN. This 'clinical' or non-managerial supervision will help you to manage the emotional impact of your work and be guided by clinicians on dealing effectively with patient risk factors.

Learning, developmental and peer support

NHS England is developing learning and support for link workers, including regular webinars, an online learning programme, regional training workshops and informal peer support within Integrated Care System areas.

To get access to this learning and become part of the online learning community, please email england.socialprescribing@nhs.net, tell us that you're a link worker, which PCN you're part of and your contact details.

Regional learning coordinators

Each region of England has a learning coordinator, who will support you and your colleagues in your new role. They have experience of either being link workers or managing and developing social prescribing schemes.

They will focus on your learning and development needs. They will also develop peer support networks so that you can regularly meet with other link workers in your area to support one another and to share best practice. They will also bring in specialist trainers to guide you through specific topics, for example, what local advice services are available or how best to keep people active in their communities. You can find out more about this at https://www.england.nhs.uk/personalisedcare/social-prescribing/

Online link worker learning

The online learning programme will offer a standardised training package for PCN social prescribing link workers. It will include the core elements and skills required to do the job and to deliver social prescribing as part of a PCN's multi-disciplinary team.

Online collaboration

NHS England has set up an online community of people involved in social prescribing. We call this our 'collaborative platform'. You will be encouraged to join it so that you can participate in forums with other link workers, share best practice and access resources provided by the national team.

To join the online collaborative platform, please email england.socialprescribing@nhs.net

National webinar series

From September 2019 to March 2020, there will be regular webinars for link workers focusing on relevant topics, which will be led by the national team and regional learning coordinators. These will add to what you already know about social prescribing, showing how you can embed personalised care within your PCN, inspiration from people whose lives have been changed by social prescribing, and support to help you nurture local partnerships.

For webinar details, join the online collaboration platform by emailing england.socialprescribing@nhs.net

Annex 1:

Personalised care and support plan – template

Name and contact details for person: _____

NHS number: _____

Part one – to be completed together at the start	
What matters to me:	
How best to support me: what people need to know about me and my life:	
Any health conditions that agencies need to know about:	
My goals:	
Summary of support that I am being connected to, including what I can expect from support:	
What I can do to support myself to meet my goals:	
Review – when shall we check how it's going?	
Part two – to be completed after 6 months	
What changes have taken place?	
I am happy to share my personal story?	
I am willing to complete a satisfaction survey?	
I am happy to participate in ongoing data collection and evaluation?	

Annex 2A:

Measuring impact on the individual – some useful tools

Tool	What is it?	Why should it be used?	Who should it be used with?	How often should it be used?
ONS Wellbeing Scale	Four short questions (ONS4) on life satisfaction, how worthwhile they feel their life is, happiness and anxiety levels.	ONS4 is a free nationally validated wellbeing scale, based on the person's own views.	Everyone who is referred to the link worker service.	When the person is initially referred to the link worker and at least every 6 months, for one year.
Patient Activation Measure (PAM)	PAM is a short questionnaire to identify what skills, knowledge and confidence people have to manage their own health and wellbeing. People are assessed at 4 levels of activation, which indicate how much support a person is likely to need.	This tool helps link workers to tailor their support more effectively. Free (licenses currently paid for and distributed by NHS England) To access PAM licenses, please email xxxx.	Everyone with above level 1 literacy standard (reading age of 12 years) and health needs; excluding severe mental health, dementia or learning disabilities.	When the person is initially referred to the link worker and every 6 months, for a minimum of one year.

Annex 2B:

Template for measuring impact on community groups

How many people have been connected to your group/organisation by link workers over the past 6 months?				
'We have coped well with receiving new people through social prescribing link workers in the past 6 months.' To what extent do you agree with this statement? (please tick one box below)				
Strongly agree ○	Agree ○	Neither agree nor disagree ○	Disagree ○	Strongly disagree ○
If you strongly disagree with the question above, what number of new people would you have been able to cope with in the past 6 months?				
How many volunteers are currently involved in your group or organisation?				
Are there any gaps in community provision that you have identified, and which local commissioners need to be aware of? If so, please tell us more below:				

Annex 3A: keeping people safe

Social prescribing quality assurance prompt sheet for VCSE organisations

Policies and supporting evidence:		
What we need to check	**Why we need to check it**	**Examples of supporting evidence**
Safeguarding policy Safeguarding policies and processes must be up to date and comply with current legislation. This should include Disclosure and Barring Service (DBS) check for all relevant staff and volunteers. There should be clear procedures for what to do when a safeguarding concern is raised, either by the person, their family or carers, volunteers or staff member.	Children and vulnerable adults who are referred must be protected from harm. Any organisation working with children, young people or vulnerable adults should have a clear set of guidelines about how it will keep people safe from harm and respond to any concerns.	• Records of DBS checks for staff and volunteers involved in social prescribing • Safeguarding training records or certificates • Risk assessments for lone working • Procedure for dealing appropriately and swiftly with a safeguarding concern
Notes:		
Confidentiality and data protection policy Information governance procedures must comply with current legislation and include appropriate arrangements for GDPR, data security, data protection and confidentiality.	Organisations need to protect people's personal information and keep it safe. Your policy helps us to understand what your organisation does to keep personal information safe.	• Confidentiality and data protection/procedures, dated, when last received • Copy of induction programme for staff/ volunteers, including GDPR, confidentiality and data protection induction • Confidentiality and data protection training records for staff/volunteers involved in social prescribing
Notes:		

Policies and supporting evidence:		
What we need to check	**Why we need to check it**	**Examples of supporting evidence**
Health and Safety policy Health and safety policies, risk assessments and procedures must comply with current legislation. Food handling certificates (if your organisation provides catering).	Health and safety policy and procedures aim to protect both the people and the environment where your services and activities take place. Your policy will outline the steps your organisation has taken to make sure that you have made things as safe as possible.	• Copy of Health and Safety policy/ procedures, dated, when last reviewed • Risk register and examples of appropriate risk assessments • Accident reporting procedure • Food handling certificates
Notes:		
Equality and diversity policy Equal opportunities policies and procedures must comply with all current legislation.	Equality is about being fair and making sure that everyone can fulfill their potential. Diversity is about recognising and valuing everyone's differences. Your policy tells us how your organisation is striving to be fair and equitable.	• Copy of Equality & Diversity policy dated, when last reviewed • Examples of how your service actively takes steps to include people with protected characteristics
Notes:		
Recruitment policy (staff and volunteers) Recruitment policy and procedures must comply with current legislation.	These policies demonstrate how you go about finding new people to join your organisation in a fair and effective way. This should include the recruitment of paid staff and volunteers.	• Recruitment policy • Induction checklists for staff and volunteers involved in social prescribing • Evidence of how you support volunteers, which may include a volunteer policy and volunteer role descriptions
Notes:		

Policies and supporting evidence:		
What we need to check	**Why we need to check it**	**Examples of supporting evidence**
Training and development Training and development plans for staff and volunteers enable you to provide an effective service.	To ensure that all roles (voluntary & paid) supporting social prescribing are suitably supported with appropriate training and people have sufficient skills and competencies to fulfill their roles To ensure that the organisation meets legal requirements for first aid training.	• Training and development plans for staff and volunteers involved in social prescribing • First aid certificates
Notes:		
Actions agreed:		

Agreement to connect through social prescribing:

Representative of primary care network:

Name: _____

Signature: _____

Date: _____

Representative of VCSE organisation:

Name: _____

Signature: _____

Date: _____

Annex 3B:

Social prescribing quality assurance prompt sheet for small volunteer-led community groups

Documents and supporting evidence: The social prescribing link worker will work with your community group to support your readiness to be involved in social prescribing.		
What we need to check	**Why we need to check it**	**Examples of supporting evidence**
Public Liability Insurance Does your community group have its own public liability insurance or meet in premises with public liability insurance?	It is necessary to have appropriate public liability insurance in place in case anyone has an accident and is injured at your group. If you don't have your own public liability insurance, you should meet in public premises that are insured.	• What would happen if someone who had been connected to your group tripped over an object and fell during a group session?
Notes:		
Safeguarding for vulnerable adults and children Does your group include children and/or adults who are vulnerable? If so, do you have Disclosure and Barring Service (DBS) checks for people who work with vulnerable people? Does your group have any written guidelines for how to keep vulnerable people safe, including any procedures for responding when someone says they don't feel safe or raises a safeguarding concern?	Children and vulnerable adults who are referred must be protected from harm.	• Are group members ever in 1-1 situations with vulnerable adults or children? What can you proactively do to avoid group members being in 1-1 situations with vulnerable adults? • If group leaders are worried about the physical or mental health of people who have been referred by you, what steps would you take to refer people back to the PCN or to emergency medical support? • If someone raises a safeguarding concern or says they feel unsafe, what would you do to deal with this appropriately and swiftly?
Notes:		

Confidentiality and data protection Does your group keep information about members or people who are referred on paper files or online? If so, you should have procedures that comply with GDPR to protect data and confidentiality.	All data that is kept about a person should be held according to GDPR legislation.	• How does your community group keep personal information about group members secure? • Who is allowed to see personal information about group members?
Notes:		
Health and safety risk assessments Health and safety risk assessments should be carried out, when starting new activities and using equipment. Food handling certificates are needed (if your community group provides catering).	Health and safety procedures protect people (and the environment) from harm.	• If your group is about to undertake a new activity, such as a trip to the seaside, or gardening session, which introduces new tools, do you carry out risk assessments? • Can you show examples and talk through how you carry out risk assessments?
Notes:		
Equality and diversity We need to ensure that community groups are inclusive and accessible No one should be discriminated against, on the grounds of race, age, disability, gender and the other protected characteristics covered by the 2010 Equality Act. We need to consider the active steps your group takes to ensure that everyone can be fully involved.	It is illegal to discriminate against people on the grounds of the protected characteristics. Equality is about being fair and making sure that everyone can fulfill their potential. Diversity is about recognising and valuing everyone's differences.	• Can you explain how your community group ensures that everyone is comfortable and included? • Could you give some examples of how your group actively takes steps to include everyone, such as ensuring meeting places are accessible? • A participant with limited knowledge of the English language is referred to your group and is finding it difficult to understand and engage in the activities you offer. How would you support this person?
Notes:		

Recruitment of new members and training volunteers
We need to check that community groups recruit new members and volunteers fairly.
If you have volunteers, they are supported through:
• clear roles
• ongoing support
• regular training, where needed
	To ensure that everyone is supported to build skills, knowledge and confidence within the group.
	To ensure that all volunteers are supported with appropriate training to fulfill their roles.
	To ensure that the group meets legal requirements for first aid training.
		• How does your community group support new members?
		• How are people within your group supported to build knowledge, skills and confidence?
		• Do you have volunteers? If so, do they have:
		  • role descriptions
		  • ongoing support/ supervision (particularly when they are new in their role)
		  • training (including training records and plans)
		• Do relevant volunteers have First Aid certificates?

Notes:		
Governance arrangements: does your group have a constitution which guides how the group operates? Please provide a copy.		Received: yes ◯ no ◯
Financial accounts: does your group have a bank account and keep records of income and spending? Please show latest bank statements and accounts.		Received: yes ◯ no ◯
Actions agreed:		

Agreement to connect through social prescribing:

Representative of primary care network:

Name: _____

Signature: _____

Date: _____

Representative of community group:

Name: _____

Signature: _____

Date: _____

Notes

Notes

Contact us

Personalised Care Group
NHS England
Skipton House
80 London Road London
SE1 6LH
england.socialprescribing@nhs.net
https://www.england.nhs.uk/personalisedcare/social-prescribing/