

# KE Seed Fund 2021/22

## Final Project Report



### 1. Project Information

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Division	Medical Sciences
Project Title	Social prescribing and the cultural sector: Fostering understanding and problem solving
Start and End Dates	23 <sup>rd</sup> June 2022 (one day event)
Website (if applicable)	<a href="https://socialprescribing.phc.ox.ac.uk/outreach/events/knowledge-exchange-event-2013-social-prescribing-and-the-cultural-sector">https://socialprescribing.phc.ox.ac.uk/outreach/events/knowledge-exchange-event-2013-social-prescribing-and-the-cultural-sector</a>
Co-apps	Kamal Mahtani (CEBM), Emma Webster, Harriet Warburton (Oxford University Gardens, Libraries and Museums, GLAM), Helen Shearn (Helen Shearn Consultancy Arts, Heritage, Health and Wellbeing)
Funder	The Knowledge Exchange Seed Fund, which is supported by the University of Oxford's Higher Education and Innovation Fund (HEIF) and allocated by Research England  <i>Views expressed in this report of those of the authors and not necessarily those of the funder or of their host institutions</i>

### 2. Project Overview

People's health and well-being can be affected by a range of factors, including those that might be classed as 'non-medical' (e.g. loneliness, debt, housing problems). Social prescribing is one means of supporting people with social, economic or environmental concerns or problems that have a negative impact on how they feel physically, mentally and/or emotionally. It involves connecting people to 'community assets' – groups/charities/organisations/services that could help with their non-medical needs (e.g. groups to meet others or organisations that can offer advice on things like housing or debt management).

Link workers are a key part of social prescribing. They are often employed to work in GP practices. They meet with people who tend to be referred to them by a medical

professional. Link workers develop an action plan with individuals to 'treat' their non-medical needs. This may involve connecting the person to relevant community assets, including to 'cultural offers' (e.g. becoming a museum volunteer, joining a singing group, or taking part in a book club) if relevant to an individual's needs and preferences.

As part of an on-going collaboration between colleagues from CEBM and GLAM, applicants Tierney, Mahtani and Webster were part of a team that undertook a UKRI-AHRC-funded study<sup>1</sup> that explored the role of the cultural sector as part of social prescribing for older people. It highlighted that the use or involvement of the cultural sector in social prescribing might not be optimised because:

- Cultural sector staff are unsure about what social prescribing is and how they can be involved;
- Link workers do not understand how the cultural sector might support social prescribing, seeing the cultural sector as not relevant to people they assist, or not being clear how to access cultural sector provision.

The research suggested a need for greater dialogue and understanding between link workers and cultural sector staff. Our knowledge exchange event aimed to bring together these two groups, to enable them to share ideas and create solutions to working together more effectively in supporting social prescribing. At the event, we also shared findings from the research mentioned above, and we provided attendees with the opportunity to try out creative/cultural activities that could form part of a social prescription.

The event was organised by members of the Oxford Social Prescribing Research Network (OxSoP). It is a collaboration that brings together people with an interest in social prescribing. Members include individuals involved in delivering social prescribing (e.g. link workers), supporting social prescribing (e.g. voluntary sector organisations, cultural sector representatives), or evaluating/studying social prescribing. It holds meet about six times a year (online or in-person) and has also arranged knowledge exchange events like this one.

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<sup>1</sup> Mantani, Tierney et al. Optimising cultural provision to improve older people's wellbeing through social prescribing in the context of COVID-19: Realist review and evaluation (<https://socialprescribing.phc.ox.ac.uk/research/projects/social-prescribing-for-older-people-in-the-time-of-covid-drawing-on-the-cultural-sector>). This research was funded by UKRI/AHRC (AH/V008781/1). Views expressed are those of the authors and not necessarily those of the funder.

### 3. Final Project Summary

The event proceeded in line with what was suggested in our application. It took place on 23<sup>rd</sup> June 2022. It ran from 10am-3.30pm at the King's Centre, Oxford. Despite rail strikes on the day and ongoing cases of COVID, we had 48 people attend. The timetable for the event was as follows:

10.00am: Arrival and registration – tea and coffee

10.15am: Welcome

10.25am: Warm up activity

10.40am: Research presentation

10.55am: Small group discussions and feedback

11.50am: Discussion on solutions

12.15pm: Time for short activities, when those attending will be invited to contribute to the following:

- *Washing line of knowledge* – to list examples of when the cultural sector has supported their/others well-being.
- *Ideas board for current examples of cultural sector provision* – to list things happening in the cultural sector that could be part of social prescribing.
- *Ideas board for new cultural sector provision* - to list ideas for initiatives/activities that could be run by the cultural sector as part of social prescribing.
- *Research ideas board* – to list ideas for future research on the topic of social prescribing and the cultural sector.

12.30pm: Lunch

1.20pm: Afternoon activities start (see below for details)

2.50pm: End of afternoon activities – tea and coffee

3.00pm: Evaluation

3.15pm: Final reflections

3.30pm: End of the event

We started the event with some brief warm-up activities, delivered by a colleague from the Oxford Playhouse, which encouraged people to interact from the outset of the day. We then had a short (15 minutes) presentation on the research we conducted around the topic of older people and the cultural sector as part of social prescribing. This was followed by small group discussions (six groups in total) on:

- a) What do link workers think is the role of the cultural sector in social prescribing? What are the barriers to using this sector as part of a social prescription? What are the enablers to using this sector as part of a social prescription?
- b) What do cultural providers think about social prescribing? What might encourage them to be involved? What might dissuade them from being involved?

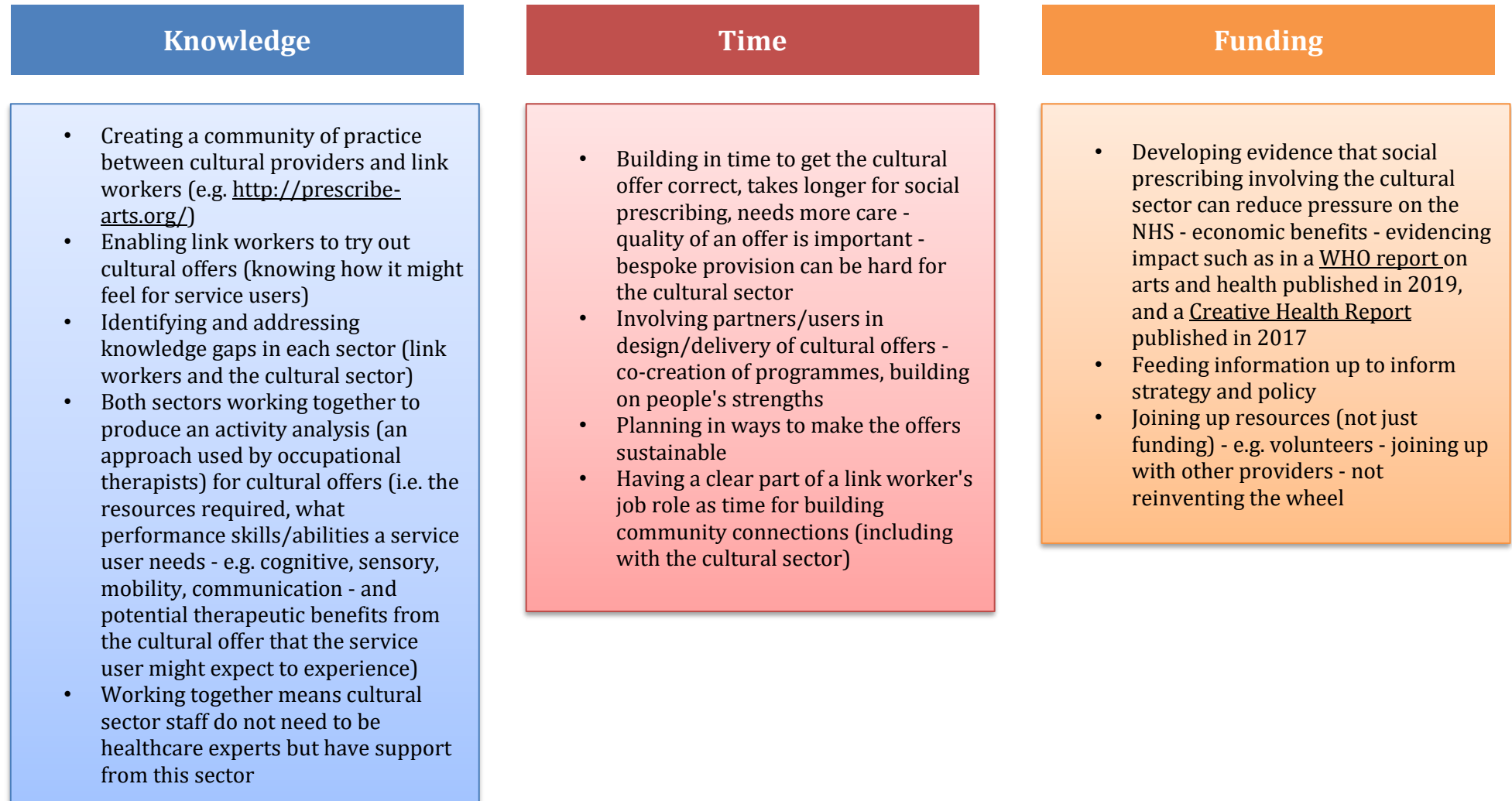


**Figure 1: Tree of understanding, highlighting the barriers and enablers for link workers and cultural providers working together in social prescribing**

Each group was facilitated by a member of the events team who had met in advance to arrange how to run this part of the day. These individuals made notes of what was said and reported back to the main group what was discussed. Key enablers and barriers from each group were posted on a ‘tree of understanding’ (see Figure 1).

A discussion involving the whole group took place next. This gave those present the opportunity to propose solutions to some of the issues identified in small groups, which might stop cultural providers and link workers collaborating in social prescribing. Figure 2 highlights key issues raised.

**Figure 2: Key solutions to overcoming difficulties to the cultural sector and link workers collaborating in delivering social prescribing**

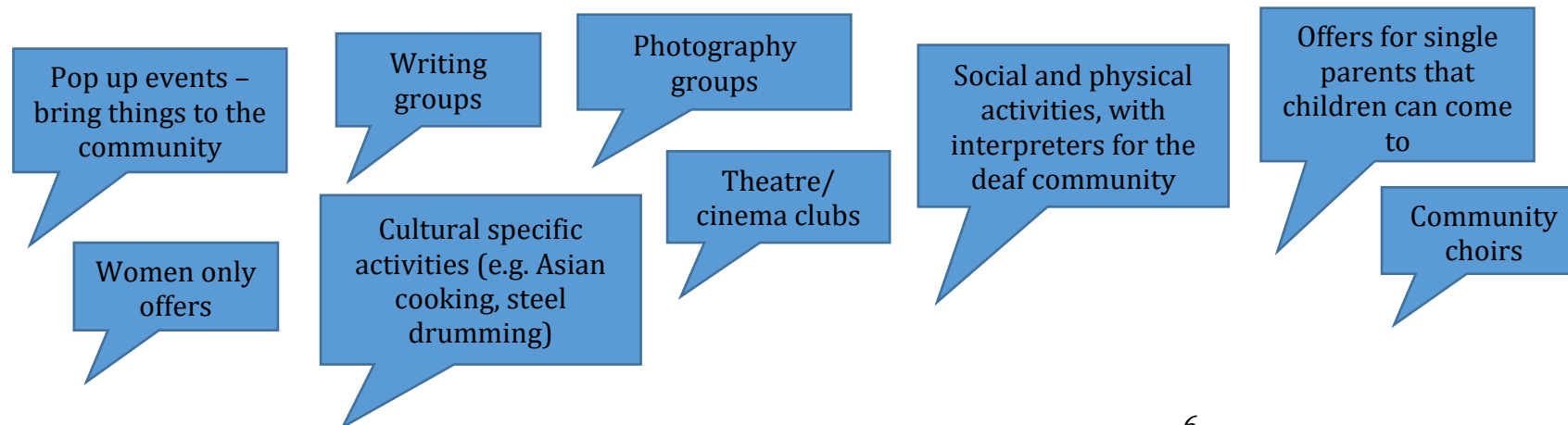


Just before lunch, participants were invited to contribute to ideas boards that were placed around the room. They asked people to make comments/suggestions on three key areas:

**1. Current cultural provision that could form part of a social prescription** – here is what those attending listed as examples of existing activities/events/institutions in the cultural sector that could form part of social prescribing:

- Brampton Community Hub (exhibitions/workshops)
- Oxford Dance Festival – engagement projects
- Dance for Parkinson’s programme
- Age UK Oxfordshire social prescribing are going to work with Hope project at the museum
- Libraries – scrabble club, crochet groups, lots of activities
- Oxford Youth Partnership Networking – monthly online meetings
- The Mill Art Centre – Banbury
- Cutteslowe Garden Project – offers experiences of micro-enterprise (e.g. crafting/art and selling products to visitors)
- The Story Museum – dedicated early years story based play available – cost-free to target families

**2. Ideas for new cultural provision that could form part of a social prescription**



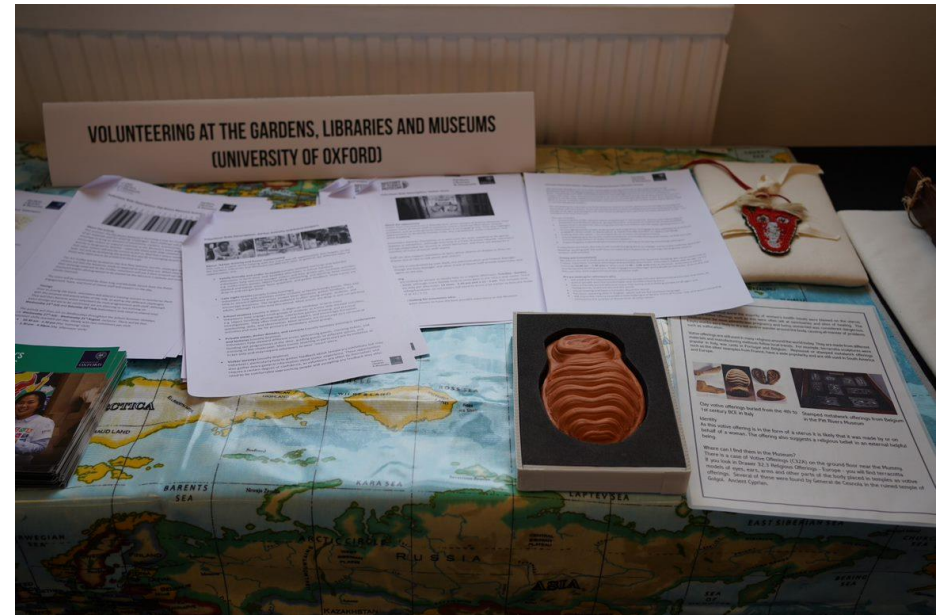
**3. Suggestions of topics/areas for future research** – these included thinking about diversity and how to engage different communities in cultural offers; understanding the relative impact of number of sessions, to explore the value of occasional sessions as opposed to regular, frequent sessions; how to measure impact (e.g. using a recovery star) and specific benefits of specific activities; how to evaluate arts/cultural/heritage sector in a way that gets health policy makers to take notice; how to build bridges between different stakeholders and mapping the infrastructure needed for this to succeed; use of augmented reality technology to support those who are more isolated.

The afternoon offered those present the opportunity to try different creative/cultural activities. This was to encourage link workers to think about these as options for service users and to further facilitate networking:

- Origami
- Slow art
- Knitting, crocheting and pom pom making
- Drawing based on museum objects
- Drawing cartoon dinosaurs
- Mindfulness and meditation (in nature)
- Object handling
- Music/singing
- Dancing



There were also stalls run by cultural providers, including TeaBooks (a project by Age UK Oxfordshire, which organises sociable book groups for the over-60s), the Museum of Oxford, the Oxford Social Prescribing Research Network (OxSoP) and GLAM. Those attending could talk about cultural provision with stall holders that might be relevant to social prescribing.

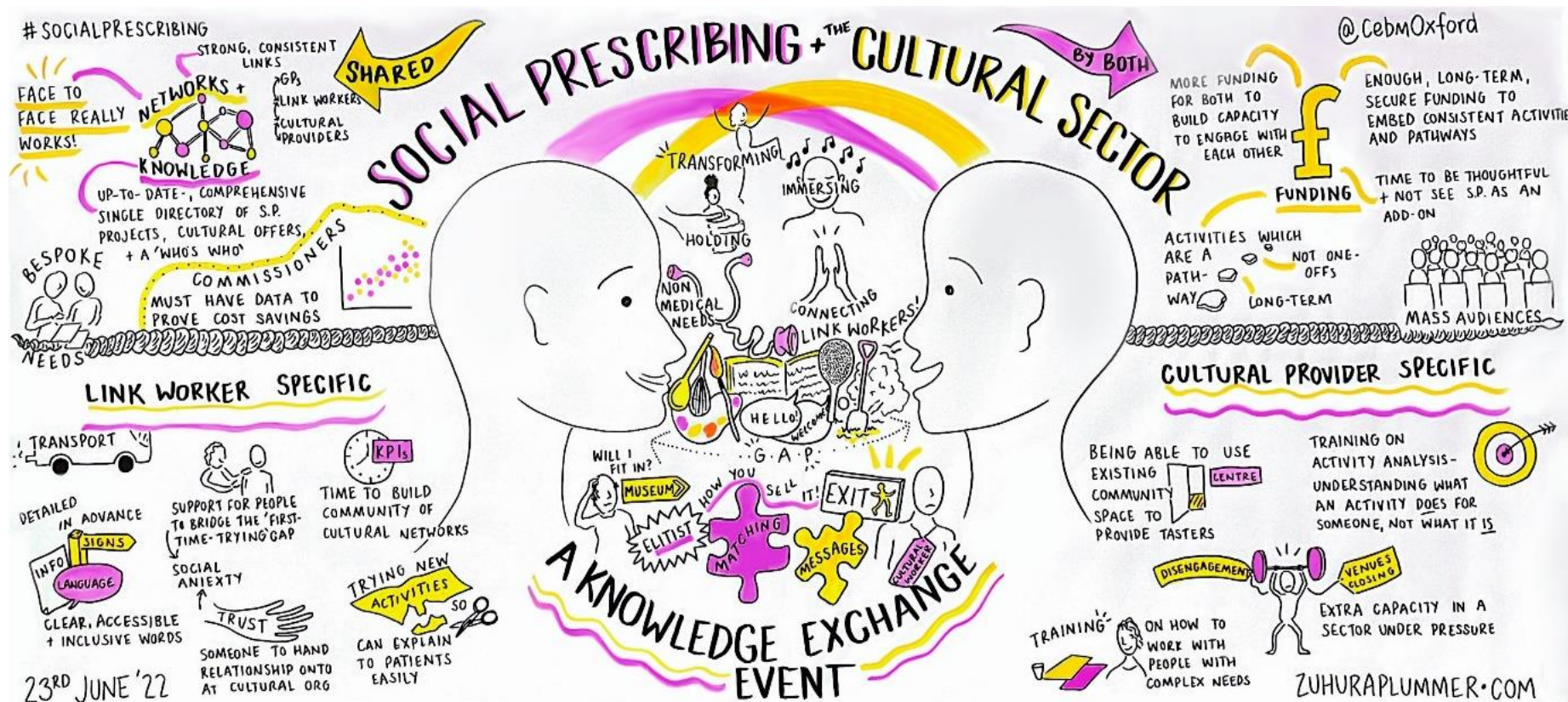


During the day, topics discussed were captured by an artist/graphic recorder, Zuhura Plummer, who documented what was discussed as a schematic (see below). At the end of the event, she talked those present through the key aspects she had picked up, which are illustrated in Figure 3. She highlighted things that came up in conversations as needed for the cultural sector to be involved in social prescribing. Some issues were common across link workers and cultural providers – e.g. funding, developing relationships to provide bespoke provision to people in need. Other issues were specific to one of these groups. For example, link workers talked about doing risk assessments, identifying what people might be interested in, how to sell cultural activities to a range of individuals (who might not see this as their ‘thing’). For cultural sector staff, issues



covered included perceptions of people engaging in social prescribing and their needs, representation within activities and those attending activities (diversity), health funders/commissioners seeing arts and culture as 'fluff', a need to evidence benefits of cultural engagement, involving a range of people in the planning of cultural activities/offers.

Figure 3: Schematic developed by artist Zuhura Plummer during the day to summarise topics discussed



## 4. Outcomes and Impacts

Those present heard about and were able to discuss the research we carried out on the cultural sector and its role in social prescribing for older people. We also provided them with a 12-page report developed from this research so that they could learn more about it.

Participants proposed a range of new ideas for future research in this area and potential cultural offers that could be part of social prescribing (see above). We hope that the CEBM team, in collaboration with GLAM colleagues, will take some of these forward for future grant applications.

Feedback from a questionnaire, completed by 34 participants at the end of the day, suggested the event had been successful in enabling people to network. Questionnaire results included:

- A high average score for enjoyment of the day (4.8 out of 5)
- A high average score for ability to contribute to the day (4.1 out of 5)
- A high average score for the event being successful at meeting its key aim of bringing together link workers and cultural sector staff to enable them to share ideas and create solutions so they can work together more effectively in supporting social prescribing (4.4 out of 5)
- The majority of the people completing a questionnaire said they would continue the learning and conversations they had during the event by:
  - Attending similar networking meetings (28 respondents)
  - Attending future OxSoP meetings (25 respondents)
  - Arranging one-to-one follow-ups with people met on the day (23 respondents)
- Only one respondent said they made no new connections through the event
- Comments left on the questionnaire are listed in section 6 below - they highlight how link workers have been encouraged to try new approaches in their work in terms of the kinds of activities they may offer to their patients, thereby opening up new avenues for collaboration between the cultural sector and healthcare providers

We had 25 new people sign up to the OxSoP mailing list – on the day or by email afterwards. This means we now have over 100 people who are part of this network. Many of the new people signing up were link workers. It is important to have their perspective as part of the group, given that they are on the frontline, delivering social prescribing. Five of the new people signing up to the mailing list attended an OxSoP meeting held online on 6<sup>th</sup> July.

## 5. Testimonials

We had a number of positive comments on the questionnaire about the day. A selection are listed below. Proposed areas for improvement mentioned on the questionnaire are listed in section 7 below.

*"It opened my eyes to the present state of social prescribing with all its facets, partnerships, challenges and opportunities." (Cultural provider)*

*"Enjoyed sampling activities - much easier then to recommend to patients." (Link worker)*

*"It has been a great opportunity to meet others, learn and share ideas, and do some networking too." (Link worker)*

*"Really nice to hear what is happening in the sector, not just focusing on challenges, but also solutions." (Cultural provider)*

*"Extremely useful to see the range of organisations involved in social prescribing and stimulating to consider potential projects and partnerships." (Cultural provider)*

*"I thought it worked very well as a learning experience, networking and a change to try out some brilliant activities." (Cultural provider)*

*"Discussion and opportunity to think about opportunities and gaps. Activities were fun and got ideas flowing. Networking and useful connections I'll follow up on." (Link worker)*

*"It was useful to get a sense of what's on offer and be able to describe in more detail, but also the activities were just really fun!" (Link worker)*

*"It was great to get an insight into what people can expect from the events so that I can tell them about the groups with confidence." (Link worker)*

*"Good to connect and feel part of a wider picture." (Cultural provider)*

*"Opportunity to network with people in my own sector (museums) and wider plus great activities." (Cultural provider)*

*"It was the first time I have met any social prescribers. As a small grassroots charity it has been so difficult to find the contacts, so it was really incredibly useful to be able to show what we do." (Cultural provider)*

*"Meeting people develops strengths. Use of shared resources and greater scope for referral." (Link worker)*

*"I enjoyed all elements of the day. Well presented and not flat or death by PowerPoint. Thank you." (Link worker)*

*"I thought it was all great. Well thought out and interactive without feeling uncomfortable." (Link worker)*

*"The whole event was perfect! Everything was so well planned and executed from the warm up to the discussion groups and afternoon activities. All of your team were incredibly friendly, helpful, professional and approachable - amazing achievement." (Cultural provider)*

## 6. Reflections

A key challenge was a national train strike and increasing cases of COVID-19, meaning that some people pulled out of attending. We had one activity provider (who was due to run a session of forest bathing) who was ill and not able to attend. We had enough activities to keep people busy, but there were a number of attendees who wished to try forest bathing. We are discussing running a forest bathing session later in the year to which we can invite participants from the knowledge exchange event who expressed an interest in trying.

We did try a remote activity – having someone provide a dance session online. However, the internet connection was not the best and, therefore, this did not work out as planned. We improvised by using a telephone on loud speaker. After the event, the dance instructor provided a video of what she had planned to show to those present, which was shared with all attendees.

In terms of feedback on the questionnaire from those attendees, suggested changes/improvements included:

- A break in the morning
- Coverage of how to measure and evaluate social prescribing
- Presence of other stakeholders (e.g. commissioners, policy makers, funders, health professionals, community groups)
- Swap tables in the morning between activities to meet more people
- More information on completed research and future research
- Staggering activities in the afternoon

The event succeeded because we held several planning meetings (n=10) about it. This degree of investment in terms of time and energy was essential to ensuring that the day ran smoothly.