



# **SOCIAL PRESCRIBING**

## Connecting Care, Enhancing Health





## INTRODUCTION

### **Support Matters**

Maintaining good health and wellbeing is important at every stage of life - especially for older adults. Research shows that nearly 100% of Canadians age 65 and up plan on supporting themselves to live safely and independently in their own home.<sup>1</sup> However, some lack natural supports like family relationships, friends and other community connections, which are needed to age in place well. As a result, many older adults rely on community-based programs to provide the social support they need to complement their medical care.

**Social prescribing** is a holistic approach to healthcare that provides a forma referral pathway for healthcare providers to connect patients to community-based services. This provides much-needed assistance – to doctors and patients alike – and bridges the gap between medical and social care services. With access to adequate food, housing, transportation and mental health support, older adults can maintain their health in the long term.

**The Unison Connect** is a social prescribing program that links the healthcare system to senior-serving organizations in Medicine Hat. This reduces the demand on healthcare professionals and better equips them to support older patients (50+). Through the program, doctors, nurse practitioners and other regulated health professionals alike, can promote healthy aging and resilience in their communities.



## **Stronger Together**

As a partner in this initiative, you play a key role in promoting social prescribing within your community. In this document, you'll find the information and resources you need to effectively communicate with key stakeholders in your region.

Together, we can support healthy aging and enhance the quality of life for older adults in Alberta.

Older adults actively participate in the community.

Unison Connect is a Social Prescribing program that bridges medical care and community resources. Through social prescribing, healthcare providers can refer seniors to community-based programs to improve their health and enhance their quality of life. Senior-serving organizations help older adults to navigate and access community supports, healthcare, housing and transportation.

Through grassroots initiatives, communitybased organizations help shape the continuum of services for older adults in Alberta.

Unison Connect is facilitated by Unison at Veiner Centre and connects older adults to community-based services and supports in Medicine Hat.



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### What is Social Prescribing?

Social prescribing is a holistic approach to healthcare that bridges the gap between medical and social care services. Through this approach, healthcare providers refer clients to community-based programs to improve their health and enhance their quality of life.

### **How it Works**

#### STEP 1 Social Prescription

A primary healthcare provider identifies a non medical need that is affecting the health and well-being of their client. After obtaining consent from the client, the healthcare provider fills out a form to make a social prescription (referral to a Link Worker).

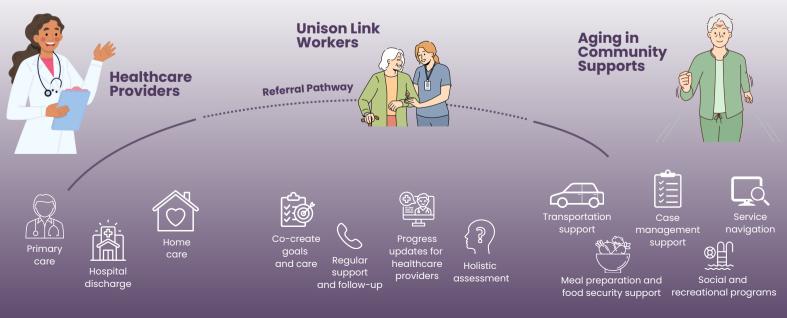
#### STEP 2 Link Worker

A Link Worker\* receives the referral and partners with the older adult to develop key health and social goals through community resources.

#### STEP 3 Support

The older adult gains access to community based supports to improve their health and well-being.

\*A Link Worker is a non-clinical professional employed by a community based, senior-serving organization. This individual builds relationships with older adults under their care and monitors their progress.





## **8 Principles of Social Prescribing**

## 1. Social prescribing requires a formal pathway to connect medical care to community-based services.

• The formal pathway supports evidence-building for the role of community-based services in supporting health outcomes.

#### 2. Social prescribing begins with an identifier.

• A healthcare professional identifies a client with non-medical, health-related social needs and makes the social prescription.

• A Link Worker (or equivalent), who is a non-clinical professional, receives the social prescription from the healthcare professional. This individual can then partner with the client to develop key health and social goals.

#### 3. Social prescribing is a holistic, person-centred approach.

• Clients have complex needs, but they also have unique goals, passions and gifts.

#### 4. Social prescribing is strength-based.

• Clients are encouraged and supported to share their strengths through peer groups, volunteering with community partners, and even leading group classes. Social prescribing empowers clients to take a more active role in managing their own health.

#### 5. Social prescribing is co-creative.

• Clients work in partnership with providers and Link Workers to design a social care plan that meets their needs and utilizes their gifts.

#### 6. Social prescribing is community-led.

• Supporting clients to become more connected to their communities and peers builds resilience.

#### 7. Social prescribing is not a one-size-fits-all approach.

• Some clients may require more support from a Link Worker to address multiple goals.

#### 8. Social prescribing is rooted in health equity.

• Effective social prescribing includes working with clients to remove the barriers they face to health and well-being.



## **Changing the Conversation**

Social prescribing is an approach to healthcare that views older adults holistically. It recognizes that clients are more than their current challenges and needs – they also have unique goals, passions and gifts.

Integrating medical care and community-based services, social prescribing represents a culture change. It offers a new way to think about and deliver healthcare and social care services.



When it comes to healthcare providers caring for older adults, here's how social prescribing shifts the conversation:



#### Before

"What's the matter with you?"



#### After

"What matters to you?"



### **Key Messages**

#### 1. Older adults need community-based services to complement their medical care.

Over 80 per cent of a person's health depends on social determinants of health like adequate food, housing, income and relations with others.<sup>2</sup> Social prescribing bridges the gap between medical and social care services. This allows healthcare professionals to easily refer patients to community-based programs to improve their health and enhance their quality of life.

#### 2. Social prescribing allows healthcare providers to focus on what they do best caring for the medical needs of their patients.

Healthcare providers are often the first to identify when an older adult has a nonmedical need like loneliness that is affecting their health and well-being. For busy healthcare providers, it can be challenging and time-consuming to find community based programs for older adults. Through social prescribing, healthcare providers can connect clients to a Link Worker for support. This individual partners with older adults to develop key goals and access community-based resources. Social prescribing reduces the demand on healthcare providers and better equips them to support older adults.

#### 3. Older adults deserve a life of independence and dignity.

In Canada, nearly 100% of seniors aged 65 and older plan on supporting themselves to live safely and independently in their own home for as long as possible.<sup>3</sup> Social prescribing empowers older adults to age in place and avoid the need for higher levels of care prematurely. For those who live alone and lack natural supports like family relationships, access to community-based services helps reduce the need for reactive healthcare. This ensures that older adults can thrive in community.

#### 4. Social prescribing helps reduce the length and frequency of hospital stays. This results in significant cost savings for the province and alleviates pressure on the healthcare system.

2. Hood CM, Gennuso KP, Swain GR, et al. County health rankings: relationships between determinant factors and health outcomes. Am J Prev Med 2016;50:129-35.doi:10.1016/j.amepre.2015.08.024

3. National Institute of Ageing (NIA)/TELUS Health Survey (2020)



In Alberta, the average cost of a hospital stay is \$9,000. Social prescribing is a holistic approach to healthcare that prevents costly emergency room visits and premature reliance on long-term care facilities. Through this formal referral pathway, healthcare providers can refer older adults to community-based resources to support their overall health. This preventative intervention helps improve both short- and long-term health. As a result, older adults are better supported to live safely at home with less reliance on the healthcare system.

## 5. Alberta's aging population needs more community-based programs to stay healthy.

Investing in more community-based programs and resources helps older adults to live safely in their own homes for longer. This decreases the demand for long-term care facilities, reactive healthcare services, and preventable emergency room visits. However, there is a significant gap between cost pressures and current funding for communitybased, senior-serving organizations. Sustainable funding is needed to ensure the workforce can keep up with the current demand and prepare for the future needs of Alberta's aging population.

#### 6. Social prescribing promotes health equity.

Non-medical factors like loneliness and poverty can have a significant impact on the overall health of an individual – especially older adults. Social prescribing promotes health equity by addressing social needs that affect health and well-being. This includes access to adequate housing, food, transportation, income and social support. Everyone deserves to reach their full health potential.

## 7. Social prescribing helps community-based organizations to better demonstrate the impacts of their current programs and services.

Through social prescribing programs across the province, Healthy Aging Alberta is assessing the impact of community-based programs and services. As a formal referral pathway with intentional data collection, social prescribing helps to improve the coordination of non-medical services that support healthy aging in community and enhance the quality of life for older adults. Based on the evidence demonstrated through social prescribing programs, HAA is advocating for a sustained investment in communitybased programs and services that are crucial for a robust social prescribing model.



## 8. Community-based, senior-serving organizations empower older adults to age in place and participate in their community.

Social prescribing programs require a network of organizations to provide holistic, wraparound supports to older adults. In each community, multiple organizations with different services and expertise partner together to best meet their needs. This support helps older adults to live safely at home longer and avoid dependency on the healthcare system. In addition, social prescribing offers a more relational approach to care, as older adults work directly with an assigned Link Worker. This individual builds relationships with older adults under their care and monitors their progress. As a trusted resource, the Link Worker can also attend appointments, make exercise group referrals or help older adults to complete a benefits application form.

## 9. Social prescribing integrates community-based services into the continuum of care for seniors.

Healthy Aging Alberta brings together community-based organizations around a common framework for action – to improve health and social outcomes for older adults. HAA also facilitates collaborative action to integrate community-based services into the larger seniors' continuum of care, alongside systems such as health and housing. Through social prescribing programs across the province, healthcare providers can connect older adults to community-based programs as a holistic and preventative form of care.





### Resources

#### WEBSITES:

- Canadian Institute for Social Prescribing www.socialprescribing.ca
- Healthy Aging Alberta Social Prescribing https://calgaryunitedway.org/healthy-agingalberta/social-prescribing
- World Health Organization A Toolkit on How to Implement Social Prescribing www.who.int/publications/i/item/9789290619765
- National Center for Biotechnology Information Establishing Internationally Accepted Conceptual and Operational Definitions of Social Prescribing Through Expert Consensus: A Delphi Study Protocol <u>www.ncbi.nlm.nih.gov/pmc/articles/PMC9881447</u>



### **About Healthy Aging Alberta & Social Prescribing**

Healthy Aging Alberta is a rich network of community-based, senior-serving organizations and allies across our province united by a shared vision: to make Alberta one of the best places in the world to grow older. HAA serves as a convener and an advocate for organizations that provide community-based, senior serving supports and programs. As a network, HAA ensures the needs of the sector are better understood within government and among members of the public.

In Alberta, HAA is supporting 10 communities to establish a provincial programmatic approach to social prescribing service delivery for older adults. Through the Social Prescribing for Older Adults Program, HAA is responsible for the following:

- Establishing shared principles;
- Ensuring that social prescribing programs focused on older adults are aligned through best practice guidelines;
- Developing a shared evaluation framework;
- Collecting and analyzing data;
- Reporting to funders on outcomes and impact;
- Liaising with various provincial stakeholders, including Alberta Health Services, the Government of Alberta, and the Health Quality Council of Alberta;
- Convening a provincial community of practice;
- Advocating and facilitating future investment in social prescribing programs for older adults across Alberta;
- Working with the Canadian Institute for Social Prescribing to ensure that work in Alberta is aligned with the National Social Prescribing Framework.

Services can be delivered in-home or community. Clients must live within Medicine Hat or Cypress County and will be contacted within one week of the referral being received.

#### FOR MORE INFORMATION:

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