

Social prescribing and the arts in Wales: learning from the 'HARP' programme

Introduction

Arts activities could play a huge role in alleviating ongoing pressure on the NHS via social prescribing. In [HARP - Health, Arts, Research, People](#), a partnership between Arts Council of Wales, Nesta and Y Lab (Cardiff University), we're exploring how to generate, grow and learn about impactful creative innovations that support people's health and wellbeing in Wales through supporting [13 arts and health partnership projects](#) with funding, coaching and networking opportunities.

Many HARP projects have a social prescribing focus, and through our work with them we're seeing the following themes and recommendations emerge from our work. Please note these recommendations come directly from Nesta so whilst they are informed by our work with the HARP teams, we do not speak for them. We have also responded directly to some of the questions posed in the PowerPoint presentation provided by Nicola Evans.

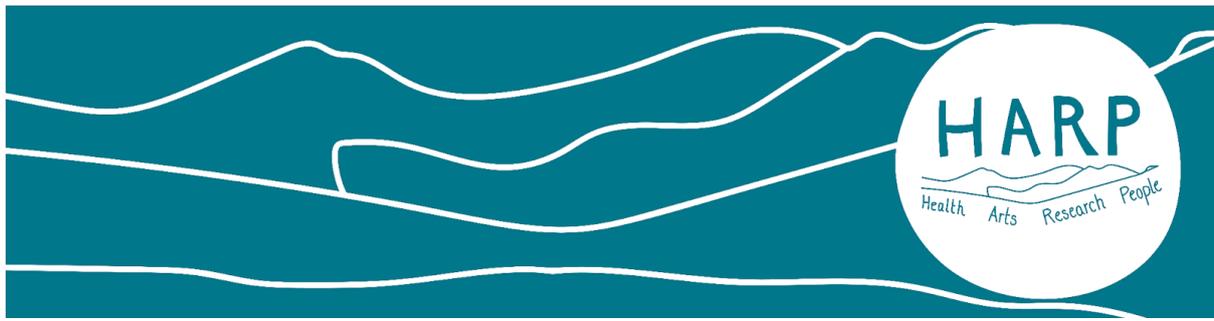
1. Learning and recommendations regarding social prescribing from HARP

Public sector roles

The different local approaches to social prescribing across Wales allow local people and providers to take the lead, however the huge variation and multitude of approaches that your model recognises can be very challenging for arts organisations and practitioners to navigate, and some areas of Wales have much better provision and more clarity than others. We perceive a distinction between 'universal' projects to support general wellbeing and mental health, which appear to work better alongside local authorities and voluntary associations, and 'specific' arts projects aimed at people with a particular condition or treatment need are more aligned to the health boards.

- **Recommendation:** Arts practitioners/organisations would benefit from having more clarity around who could be referring people to their projects. It would benefit them- and therefore the population - if the roles of primary, secondary and community care organisations in relation to social prescribing were well articulated in the Framework.
- **Recommendation:** We believe a tiered approach could help clarify the goals and roles of social prescribing in Wales around population health (whatever they may be). A good example is the [IAPT 'Stepped Care' model](#) is used in England to show a hierarchy of needs and access points for mental health support. This has similarities to your mapping of 'holistic-light' social prescribing offers but additionally talks about pathways and responsibilities at each level.





Resourcing

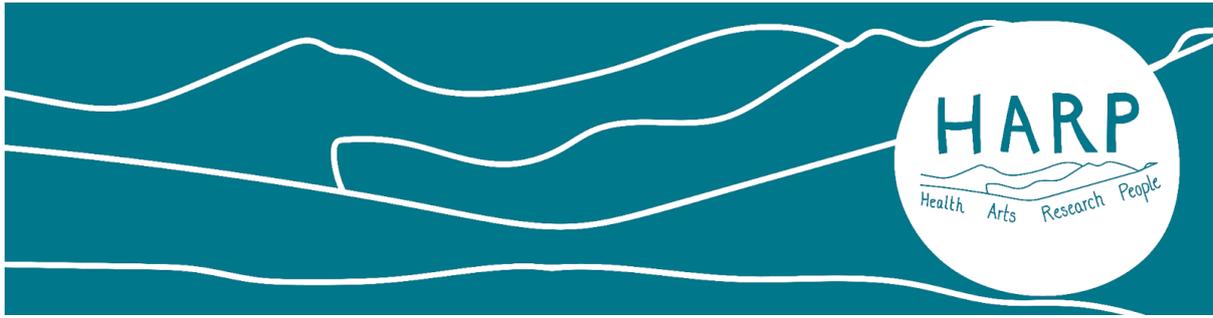
A key aim of community connectors / social prescribers is to connect with projects they can rely on to be maintained long term. Connecting people to arts activities also takes time, which health and care staff don't always have. In some HARP projects community connectors attend projects with people, sort out tech needs for online projects and help build people's confidence to attend, whereas others report that community connectors cannot do more than give people a number to call.

- **Recommendation:** For social prescribing to have long term benefits for people and reduce pressure on systems, there need to be enough community connectors or social prescribers to meet the demand.
- **Recommendation:** Alongside funding for community connecting and social prescribing teams, it would help if reliable long-term core funding was available to maintain community groups longer term and make them more reliable referral partners.
- **Recommendation:** Local authorities and/or health boards could be supported to identify key community projects and fund them long term to ensure a consistent service to patients.
- **Recommendation:** The sector could benefit from having some central, national coordination and networking points to develop national knowledge, skills, and evidence, as well as giving arts and health providers a place to help them navigate who to contact in their own local area. This is distinct from the work of the [Wales Centre for Social Prescribing Research](#), whose focus is rather on building the evidence base.

Cultural and administrative shifts

Social prescribing requires significant shifts for many health and care professionals, logistically, administratively and philosophically. This is especially true for arts projects: adopting a view that creative activities can prevent or help to manage ill-health blurs the boundaries around health and care systems. This presents challenges for health professionals, such as establishing safe referral pathways to (and from) arts activities, knowing which activities will benefit which people at what time, and trusting that the arts practitioners are equipped to work with vulnerable people. We believe the evidence base around arts and social prescribing also needs developing so that health partners see it as a viable and worthwhile thing to invest time in.

- **Recommendation:** training and support for health and care professionals at the earliest stages and throughout their career, to help them understand the benefits of arts and social



prescribing. Training should also help them to learn the mechanisms and processes they need to follow to support their patients to safely access the best arts and community projects.

- **Recommendation:** training and support for community connectors and arts practitioners - to safely engage with vulnerable people in their communities (e.g. Mental Health First Aid training).
- **Recommendation:** scope/consider a social prescribing accreditation scheme for community arts practitioners.
- **Recommendation:** A clear set of goals for social prescribing in Wales and investment in a centralised measurement team would help arts projects to better measure their impact in the right areas.