HEALTH AND SPORT COMMITTEE

SOCIAL PRESCRIBING OF PHYSICAL ACTIVITY AND SPORT

SUBMISSION FROM- West Dunbartonshire Community & Volunteering Services (TSI)

To what extent does social prescribing for physical activity & sport increase sustained participation in physical activity & sport for health and wellbeing?

West Dunbartonshire CVS believes that social prescribing for physical activity and sport can help increase participation long-term. However, the sustained engagement and success of the referral depends on the receiving services and the options they provide. For example, whether a buddying style support is available to new joiners, which would provide support and improve long-term engagement for service users. Furthermore, sustained participation is more likely if time is spent with engagers to identify what success will look like to them and then that goal is worked towards jointly.

Who should decide whether a social prescription for physical activity is the most appropriate intervention, based on what criteria? (e.g. GP, other health professional, direct referral from Community Link Worker or self-referral)

We believe that all parties (GPs, Link Workers etc.) should be aware of the option of physical activity as a social prescribing referral. However, the ultimate decision should lie with the individual. We believe that while other parties can play a vital role in advocating the option, to increase the likelihood of sustained engagement with the process, the individual must ultimately be responsible for the decision.

What are the barriers to effective social prescribing to sport and physical activity and how are they being overcome?

A key barrier to effective social prescribing of sport & physical activity is the breadth of provision available to individuals. Furthermore, those most likely to benefit from this type of social prescribing are also likely to be the clients who require the most labour intensive work to assist which can be difficult to manage with limited resources.
Another barrier is that funding provision can often be too short-term and only helps with the setting up of services. When demand subsequently grows, then funding is often withdrawn leaving services expected to be able to become stand-alone which is not always possible. More long-term funding needs to be available to allow established services to continue to operate effectively.

It is also vital that health care professionals have trust in the provisions available, as referrals require a degree of comfort that the services at their disposal are well managed and resourced which is not always the case. Here in West Dunbartonshire, services listed for social prescribing suitability receive a suite of dedicated TSI support giving reassurance of their viability and sustainability.

Also, the focus of sports clubs and associations is rarely on the inclusion of social prescribing clients. It is important that these organisations are supported so that they feel part of the physical activity pathway.

**How should social prescribing for physical activity and sport initiatives be monitored and evaluated?**

We believe that in order to effectively monitor and evaluate social prescribing for physical activity & sport there must be a follow up discussion with those involved once they have been participating for a period of time to establish how effective their provision has been.

Only by speaking directly to service users will you be able to examine what is or isn’t working for them and establish what benefits they are getting from the physical activity and use this information to improve support for future social prescribing clients.

Although this may be labour intensive we believe it is the only way to effectively evaluate the services as simply measuring numbers of clients referred doesn’t give any information to improve the service for future clients.