



Evaluation Report



November 2017



Key Findings

- The service has been effective in reducing GP Practice attendances by an average of 11.6% in Kirklees based on a snapshot sample at ten GP Practices
- There was a significant impact on GP Practice attendance in North Kirklees with a 26.7% reduction in GP Practice appointments and 20.6% reduction in GP appointments
- Greater Huddersfield GP Practices saw an increase in overall attendance by 5.9% and a 9.9% increase in GP appointments. However, this data was significantly skewed by one surgery.
- Recommend further work with Greater Huddersfield GP Practices including New Street Surgery where individuals showed significant increases in their GP Practice attendance to ensure appropriate referrals to BiK.
- A snapshot sample of Individuals referred to the service reported improvements in health / wellbeing when surveyed at 9 – 12 month review point and 65% of individuals have remained active in community settings.
- Impact on demand for Adult Social Care and Hospital Care to be included in future evaluations



Contents

Key Findings

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1. Introduction

The purpose of this report is to describe the findings of an evaluation of the service to support individuals away from GP Surgeries and into community support, to improve health / wellbeing outcomes for individuals and to reduce costs for mainstream services.

Purpose	Better in Kirklees supports individuals with one or more long-term conditions (LTC) away from mainstream health and care services and into community support, to improve health / wellbeing outcomes for individuals and to reduce costs for mainstream services.
Content	People using the Better in Kirklees service are provided with formal and informal referrals to services in voluntary and community settings that help them manage their long-term conditions to provide a more holistic approach to improving health / wellbeing.

Better in Kirklees (BiK) is a Social Prescribing service. It began as an in-house Kirklees Council pilot and was run by the Community Partnerships team. It was externally commissioned in winter 2015 and has been delivered by an external provider, Touchstone and Yorkshire Sport Foundation, since February 2016.

2. Scope of Evaluation and Methodology

The aim of this evaluation is to assess how far the service is achieving its purpose. Specifically, the aim of the evaluation is:

- a. To assess the impact of the service on individuals GP Practice attendance (GP Data Analysis)
- b. To assess the impact of the service on individuals health / wellbeing (Health / Wellbeing Survey Analysis)

To achieve this, we have recorded and evaluated qualitative and quantitative data to demonstrate:

- Outputs
- Outcomes
- Return on investment

Better in Kirklees works with high numbers of individuals – 1200+ - we designed the evaluation to capture two snapshot samples which included:

a) GP Data Analysis

Individuals referred to BiK between January – March 2017 and who are registered with ten GP Practices.

North Kirklees	Greater Huddersfield
Broughton House Surgery	Fieldhead Surgery
Calder View Surgery	Grange Group Practice
Grove House Surgery	Lockwood Surgery
Kirkgate Surgery	New Street Surgery
North Road Suite (RHC)	Speedwell Surgery

For this group we used six main methods of data collection

- GP appointments 4 months prior to BiK referral
- Total GP Practice appointments 4 months prior to BiK referral
- GP appointments 4 months following BiK referral
- Total GP Practice appointments 4 months following BiK referral
- GP Practice patient notes
- Wellbeing Worker notes on Care First system
- Interviews with Practice Managers

We gathered GP appointment data for 71 individuals. Another 5 individuals were no longer registered at GP Practices listed, 3 were unknown and 1 deceased. We gathered the information by visiting 7 GP Practices and phoning one. Two GP Practices opted to complete the task independently.

b) Health / Wellbeing Survey Analysis

Those who have been contacted to complete health / wellbeing survey

For this group we used 4 main methods of data collection

- Survey – baseline data collected retrospectively at review point
- Survey – 9 – 12 month review
- Review interviews by telephone
- Re-referrals to BiK

Survey data was sought from 59 people 9-12 months after referral to BiK. 42 completed the survey, 17 declined or were unable to complete.

Individuals surveyed were phoned as part of a review asking six questions about health /wellbeing. Baseline data was collected retrospectively at review point and may be subject to limitations. Baseline data is now being collected as part of the first contact from August 2017 ready to review in April 2018

c) Findings

3.1 Outputs

GP Referrals	Other referrals	Total
53	19	72

See Appendix A for breakdown of referral source by GP Practice

3.2 Outcomes

GP Data Analysis

GP Practice attendance records indicated an **11.6% reduction in total GP Practice appointments** and **7% reduction in GP appointments** for individuals referred to BiK.

	GP Practice Appointments		GP Appointments	
	4 months prior to BiK referral	4 months after BiK referral	4 months prior to BiK referral	4 month after BiK referral
North Kirklees	176	129	126	100
Greater Huddersfield	152	161	101	111
Total	328	290	227	211

North Kirklees

- 26.7% reduction in GP Practice appointments, 20.6% reduction in GP appointments
- Individuals referred to BiK by GP Practice Staff had 27.8% reduction in GP Practice appointments, 18.6% reduction in GP appointments

Greater Huddersfield

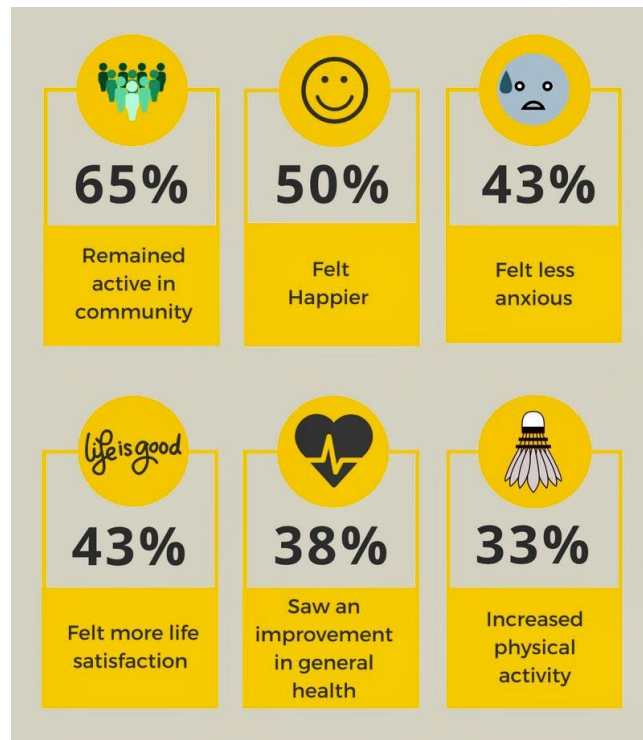
- Greater Huddersfield – 5.9% increase in GP Practice appointments, 9.9% increase in GP appointments
- Individuals referred to BiK by GP Practice Staff had 11% increase in GP Practice appointments, 19% increase in GP appointments

Health / Wellbeing Survey Analysis

The survey was completed over the phone with 42 individuals and measures the difference between how they felt when they were referred to BiK compared with 9 – 12 months after.

60% of people surveyed wanted to continue working with BiK to identify more community activities to get involved in.

See Appendix B for breakdown of analysis



Qualitative Outcomes



Tim’s Story

Tim’s GP at Lockwood Surgery put him in touch with BiK in an effort to improve his health and wellbeing, after he attended two GP and three nurse appointments in a four month period. Tim said he was interested in having more opportunities to socialise, and eventually decided to enrol on the LAB Wellbeing course. Tim didn’t visit his GP Practice in the four months following his referral to BiK and in the months after that, he made the decision to push himself even further by doing an access course.

“There’s a great need for Social Prescribing in General Practice. We haven’t got time to know what’s out there for people. There’s only so much we can do.”

- Jean Siedlecka, Practice Manager at Broughton House Surgery

“The majority of referrals from Calder View are coming from everybody but the GPs. Nurses and Health Care Assistants can refer to BiK as part of their Care Planning. We’ve had locum GPs working here and can’t have the same expectations of them.”

- Clare Townend, Practice Manager at Calder View Surgery

Melissa’s Story

Melissa came across BiK when waiting for a GP appointment at Grange Group Practice. She took a leaflet and then got in touch to explore volunteering opportunities. Melissa took voluntary redundancy in 2015 and wanted to explore working in the mental health field. She ended up leading on a project mapping befriending schemes for BiK which included learning how to use spreadsheets and going on some data protection training. These skills helped Melissa to get back in to full time, paid employment

“Volunteering with Better in Kirklees was a confidence boost. It made me realise that do still have some skills! I enjoyed being in an environment where people were bothered about helping people to achieve things. I’d still be there if it wasn’t for my new job.”

3.3 Return on Investment

Based on snapshot data there has been a reduction in 16 appointments for 71 individuals over a four month period. Using the PSSRU Unit Costs of Health and Social Care, this equates to £44 per GP appointment x 16 = £704. So far BiK has had 1203 referrals and a further piece of research would be needed to provide a full cost impact of service on GP and other Practice and Social Care staff.

d) Analysis and Reflection

Better in Kirklees has proven to be successful in overall reduction in GP Practice attendance as well as improving health / wellbeing. The following points aim to aid the future delivery of the service as well as discussion points for commissioners in considering how we evaluate the service in the future.

4.1 Analysis

There is a stark contrast between the impact of the service in North Kirklees and Greater Huddersfield. There was a significant reduction in GP Practice attendance in North Kirklees - 26.7% reduction in GP Practice appointments, 20.6% reduction in GP appointments. In Greater Huddersfield there was a 5.9% increase in GP Practice appointments, 9.9% increase in GP appointments. It could be due to a higher

proportion of the people referred in Greater Huddersfield having significant underlying medical issues which meant it was not the most productive time for them to benefit from social prescribing. This includes one individual who attended 49 GP Practice appointments over the 8 month snapshot period. **According to English indices of deprivation, nine out of the ten GP Practices we have identified for this evaluation scored as deprived or very deprived.**

When we looked closely at New Street Surgery there were a number of individuals who had significantly increased GP Practice attendance after referral to BiK. We will do some work with this surgery to look at why these patterns emerged and explore how we can support them to identify people who are ready for social prescribing. When we removed New Street Surgery from the Greater Huddersfield calculations there was a 4.8% reduction in GP Practice appointments and 4.6% increase in GP appointments. **This resulted in an overall 17% reduction in GP Practice appointments and 10.3% reduction in GP appointments for Kirklees.**

The data shows that the service has been effective at connecting people with long-term conditions in to community activity to improve health / wellbeing. It could be suggested that **individuals take longer than anticipated to make significant and sustained changes in their behaviour and activity.** This is indicated by the 60% of people who wanted to remain involved with BiK after review point. One explanation could be due to individuals moving through 'contemplation' and 'preparation' for activity before becoming more active.

4.2 Recommendations for future work

When analysing GP appointment data it would be good to consider the time that is taken for referrals to be processed, contacted and connected before outcomes can be measured. It is also likely that there will be different outcomes for individuals who are provided with information to self serve and those who are supported and confirmed in to community activity. Data on demand for Adult Social Care and Hospital Care to be included in future evaluations. Due to holdups with the NHS data sharing agreement we were unable to gather this data at time of writing this report.

The Survey used as part of this evaluation encourages individuals to focus on things like health, anxiety and life satisfaction that may or may not improve after Better in Kirklees involvement. In order for future evaluations to be ethically robust it should be of value to the individual and community. This could take the form of **a tool that enables a larger sample of individuals track their own progress over a longer period.** Many forms of measuring wellbeing are linear in terms of starting off at A, having X number of sessions and coming out at B. Our experience in delivering this service suggests that this isn't the way community members interact with Better in Kirklees or their community. To propose a different way of working that focusses on improved outcomes might include offering a consistent base of support and interacting with individuals in the way that they want to access the service.

Appendix A

North Kirklees

GP Surgery	No. GP Referrals	No. Other referrals	Total
Broughton House Surgery	3	0	3
Calder View Surgery	11	0	11
Grove House Surgery	1	8	9
Kirkgate Surgery	5	0	5
North Road Suite (RHC)	7	2	9
Total	27	10	37

Greater Huddersfield

GP Surgery	No. GP Referrals	No. Other referrals	Total
Fieldhead Surgery	4	0	4
Grange Group Practice	6	9	15
Lockwood Surgery	4	0	4
New Street Surgery	6	0	6
Speedwell Surgery	6	0	6
Total	26	9	35

Appendix B

Question	Quantitative Results
How involved in Community Activities are you now?	<p>40 people responded</p> <ul style="list-style-type: none"> • 50% no change in activity • 40% increase in activity • 10% decrease in activity • 65% remained active in community setting
How is your health in general?	<p>42 people responded</p> <ul style="list-style-type: none"> • 38% improvement or significant improvement in general health • 36% no change • 26% decline in general health
How physically active are you?	<p>42 people responded</p> <ul style="list-style-type: none"> • 43% no change in physical activity • 33% increase in physical activity

	<ul style="list-style-type: none"> • 24% decrease in physical activity
How happy did you feel yesterday?	<p>42 people responded</p> <ul style="list-style-type: none"> • 50% felt happier • 19% felt no change • 31% felt less happy
How anxious did you feel yesterday?	<p>42 people responded</p> <ul style="list-style-type: none"> • 43% felt less anxious • 38% felt more anxious • 19% felt no change
Overall, how satisfied are you with your life nowadays?	<p>40 people responded</p> <ul style="list-style-type: none"> • 43% reported increase in life satisfaction • 32% reported decrease in life satisfaction • 25% reported no change
Request for re-referral to BiK	<p>42 people responded</p> <p>25 people (60%) wanted to continue working with BiK to identify more community activities they could attend.</p>