



University of East London



# — SOCIAL PRESCRIBING FOR — CHILDREN AND YOUNG PEOPLE

# NoLimitsHelp CASE STUDY



Dr Marcello Bertotti, Dr Darren Sharpe, Jacob Naylor, Aldrich Gonsalves, and Hasnain Novak

#### **BRIEF DESCRIPTION**

NoLimitsHelp in Southampton is one of four pilot sites delivering youth social prescribing since October 2018. The programme was funded by the Department of Health & Social Care, coodinated by StreetGames, and evaluated by Dr Marcello Bertotti at the University of East London. Initial model included a Link Worker receiving referrals and supporting CYP (Children and Young People) with a number of sessions. Across all of their services, NoLimitsHelp carries out an initial assessment to ascertain the need of CYP referred (triaging), and the appropriate service is then offered to the CYP for their individual need or aspiration. For social prescribing, the Link Worker then conducts the introductory session where the support needs and any other risk factors are discussed. The Link Worker and the service user then agree the date for the next meeting and work together to develop a suitable list of options. These may include NoLimitsHelp direct support or a range of other potential options for external referral to organisations within the community.

#### **MAIN TARGET GROUP**

Children and Young with emotional support and/or physical/mental disabilities aged 11-24 (mean=16).

#### **REFERRAL SOURCES/ROUTES**

Internal (other NoLimitsHelp services) 38%, followed by GPs and public health nurses, schools/colleges, and CAMHS (14.3% each).

#### **HOW REFERRED**

Leaflet and referral form followed by telephone call to assess the feasibility for the scheme.

#### **RATE OF REFERRAL**

Total number of people referred (24) (Oct 2018- Dec 2019).

#### MAIN REASONS FOR REFERRAL

Main reason for referral is mental health (38.5%), followed by social isolation/loneliness (21.2%) self-care (7.7%) and work (7.7%).

#### **ROLE OF LINK WORKER**

On average, link worker and service user have four sessions (initial assessment, review twice and closing), although this depends on need. As a result of issues with recruiting and retaining LWs, for a period, the role of the LW was spread across the organisation. However, more recently, the model has changed back to the initial stated model which includes an initial triaging, referral to a dedicated link worker, with oversight from the project manager.



#### **DETAILS OF SESSIONS**

On average LW and service users have four sessions. These are delivered flexibly either at the NoLimits Advice Centre which is an open access hub based in the City Centre, in the community or in the participant's home. Each first home visit is conducted by two NoLimitsHelp staff as per lone working policy. Introductory sessions will identify the needs and potential risk factors for participants. At this stage, a baseline questionnaire and wellbeing star are completed. The follow up session reviews whether there have been any changes from the first session (e.g. any different risk), and the Link Worker presents the options for referral. The review session is then completed at the agreed future time, and this will close the case. Each session takes around an hour.

Any safeguarding matters arising or support needs identified throughout these sessions will be addressed immediately to ensure the safety and wellbeing of service users, others, including members of staff. This enables a holistic approach to supporting service users and means that they have the best chance to access the provision identified that will support their progress and development, social inclusion, peer inclusion, and emotional and mental wellbeing.

#### **REFERRALS TO**

Within the organisation to: No Limits Counselling, No Limits Groups including Teen Safe House (Mental health), Safe House, Time4U (learning disabilities), Space4U (YP in mental health crisis), Young Carers, COSMO (children of substance misusing others), Womens Group and Breakout (LGBTQ+).





# EVALUATION

Key findings from other events (e.g. knowledge learning exchange event)

## ADVANTAGES/STRENGTHS

- Through advice centre (drop-in service) No Limits can access YP who do not engage with primary care.
- Harness the opportunities to link up with the VCSE sector. e.g. national videogame museum offered free monthly access for groups of YP.

### DISADVANTAGES/CHALLENGES

- Issues with recruitment, the LW post was vacant for 3 months.
- Issues with encouraging GPs to refer.

### IDEAS FOR FURTHER DEVELOPMENT FROM OTHER EVENTS

- LWs work alongside the NHS community engagement officer to support outreach to YP not engaged in regular services.
- Work with Education welfare officers to support children and young people who are not attending school often due to the mental health and social isolation.