**SPLW Case study**

Based in the inner west of Newcastle Upon Tyne  in a GP surgery, Helena Ali works as a Social Prescribing Link worker (SPLW). She describes Social Prescribing as “a focus on what matters to the person, helping them to identify the barriers (how they can get there) and overcoming those together". “To be a good SPLW you need to do your research, find out what is going on in your area—you really do need to know all the mapping services”. She has found that many of her colleagues were not aware of social prescribing, nor what it could achieve, but because she is in a primary care setting and is “showing my face at all the meetings” she now has a good relationship with her colleagues and is constantly receiving referrals from GPs.

Before working as a SPLW, Helena was a Public Health Specialist at the local clinical commissioning group (CCG). Her role there was to look at what issues affected the accessibility of local services and ensure that diverse local populations were being adequately supported.  This gave her a good knowledge of local services that she believes is  essential when starting out as a SPLW  –  alongside being non-judgmental and having “a good sense of humour”.

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One of the key responsibilities of SPLWs is to connect individuals with local support from community groups and advice services, helping them to achieve their goals, be it joining the gym or gaining academic qualifications – “You need to be a good networker and know how to link in with other colleagues successfully so that all the support is joined up” advises Helena.

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However, the focus isn’t just on the final outcome. Helena describes the process of building one-to-one relationships as a “journey” in which skills and trust are developed incrementally, particularly when working with people who are coping with multiple issues: “I had someone with anxiety and health problems and for them the experience was to help them on their way to going to college and getting some qualifications. It took a good year to build the trust with them, and that was done by constantly listening and having empathy and not just looking at what their issues were but looking at the bigger picture and what might be causing those anxieties”.

Having supported 120 individual service users over a six-month period, Helena, who is part-time, describes her work as “constantly busy” but “really fulfilling”. As Social Prescribing is further integrated into the current health care system, these figures highlight the capacity for SPLWs to relieve some of the pressures faced by GPs. As Helena says; “Working alongside GPs, we can support them to support their patients. Time is in short supply for GPs, but link workers are able to spend time getting alongside people who struggle to manage their own healthcare, supporting them to tackle their social issues and become independent.”

For Helena, Social Prescribing offers an exciting vision for the future based on a “360 approach” to health: “If your housing and bills are all paid then you are likely to be happier than if you need to deal with that *on top* of health concerns. That’s where social prescribing can really help”.