



COMMUNITY



Chorley Borough Council

Social Prescribing – Empowering District Councils to Transform Public Services

Chorley Council and South Ribble Borough Council have demonstrated the huge impact district councils can have when they extend their core functions to support health and social care. Through their innovative approach, they have developed social prescribing functions embedded within early intervention and community support services, enhancing their effectiveness. The councils' local presence and networks enable them to provide comprehensive and place based support. The service has significantly improved residents' wellbeing and demonstrated substantial cost savings for the health system. This innovative approach highlights the crucial role of district councils in addressing health and social care challenges.

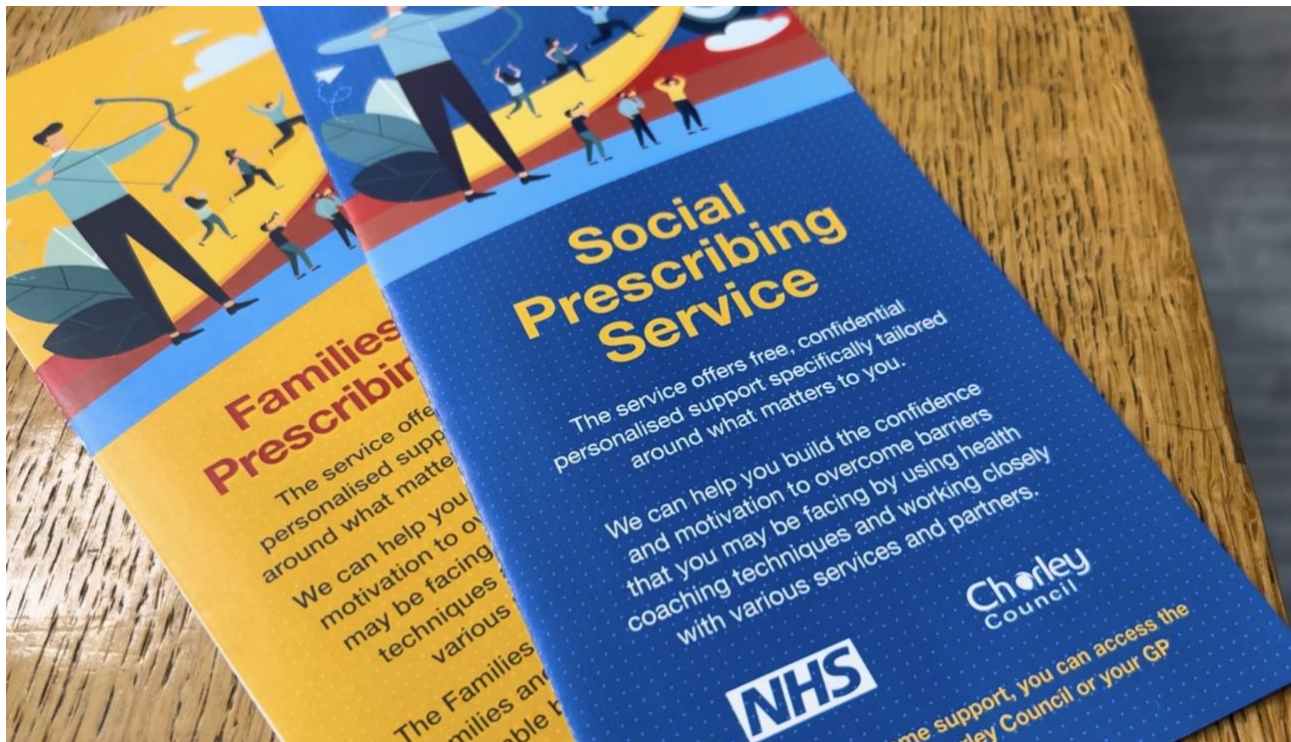
Chorley Council and South Ribble Borough Council are two sovereign district authorities in Lancashire with populations of circa 100,000 each. The two Councils work together and share a number of services including leadership but remain separate local authorities. Whilst the Communities functions and the social prescribing services that sit within them are sovereign, the teams work collaboratively to share knowledge and experience.

The social prescribing services were developed against a backdrop of unsustainable pressures across all public services. The wider context is a system that is fragmented and is increasingly based on rationing to manage demand, waiting for issues to escalate and get worse.

The councils are focused on early intervention and community support and having identified an opportunity to stretch the boundaries of what districts are typically responsible for, developed new social prescribing services. Working with health partners, the councils felt that a proactive

social prescribing function, embedded within the wider Communities directorate, was an innovative solution to the increasing pressures on health and social care.

The service was developed with a mix of funding sources; some posts are funded through core council funding, some are grant funded and some are delivered as a service commissioned by Primary Care Networks. This partnership approach with health colleagues has ensured a seamless experience for service users referred via their GP.



What are the key achievements?

The impact on the people of our boroughs is huge. From young people who have regained access to training and employment to older people experiencing extreme loneliness who have been supported to access and then volunteer with community groups, this service touches all parts of the community. These are all individuals whose situation would otherwise worsen, not only negatively impacting theirs and their families lives, but also placing unsustainable pressure on the wider system.

Using Office of National Statistics preferred personal wellbeing measure, we are able to demonstrate the impact of interventions. The phrasing used in our assessment matches that used by a range of longitudinal surveys, allowing for cross comparison against UK, Regional and Local norms and trends. The increase in score as a consequence of support from the social prescribing teams shows people's wellbeing improving to that of general population through our interventions.

We are also able to demonstrate significant system savings. Based on the information we have from service users about how many times they were using GP services and/or attending A&E, plus their opening and closing Patient Activation Measure (PAM) scores, we can see that each intervention by social prescribing saves approximately £3,500 per person to the health service alone. From April to November 2024 that is a saving of £4,669,000 in Chorley and South Ribble.

Working in partnership

The social prescribing model is not new and whilst many GP surgeries employ their own independent Link Workers, they are unable to easily access this wider network of support.

The service being delivered at a district level is key to its success. By creating a team, co-located with wider council functions including community development, active health, homelessness prevention, and employability, there is a collaborative approach to supporting service users. As councils, we can also draw on our existing networks to support service users. An example of this at Chorley Council is the PIVOT team which stands for Partnership, Integration, Vulnerability, Outcomes, Transforming. The network includes Police, Community Fire Safety, Lancashire Care Foundation Trust, Chorley Council teams, Children and Families Wellbeing Service, Children Social Care and Lancashire Volunteer Partnership. The network works with the social prescribing service to help people to improve their wellbeing and access support from within their communities. During the period of March 2024 and February 2025 the Chorley Pivot Team have received 55 referrals. These cases have been for families and individuals with multiple complex needs such as hoarding, declining mental health, loneliness, isolation, substance misuse, homelessness, financial issues and bereavement. Pivot has worked in partnership to provide support and intervention, together they have closed 46 cases within the same period, there are currently 9 open cases the partnership is working on.

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