

Written evidence submitted by the College of Medicine (PHS0396)

The NHS should be a health service not just a disease service but funding streams and pressures have continued to prevent this becoming a reality. The reasons for this need exploring.

The College believes that the Government has a vital role in legislation (e.g. smoking) but that upstream prevention is best orchestrated through localities, where a strong relationship between primary care, local authorities, the volunteer/voluntary sector, schools, retail and other local players is crucial.

Primary care should be the local arm of public health prevention interfacing with these other local players and provided with revised funding streams that encourage general practice and primary care to go beyond simply the care of patients to that of improving their ability to self-care, improve personal health and the health of the community overall. The comparative under-resourcing of primary care (and public health) over the past ten years will need attention.

The College of Medicine emphasises the role of medicine beyond pills and procedures and believes that a sustainable health service will need to think more local and also better involve whole communities in achieving its aims. The College has been largely behind the introduction of social prescribing, which it sees as a Trojan horse for extending and enabling health creating communities, which are crucial to the Wanless “fully engaged scenario”.

Social prescribing is a rapidly growing area of preventative healthcare that aims to address the root causes of poor health by linking patients with non-medical sources of support within their local community. This can include activities such as gardening, art classes, and support groups, as well as access to community services such as housing advice and financial support (1).

The importance of social prescribing lies in its ability to address the social determinants of health, which are the factors that influence health outcomes, such as poverty, housing, and education. By addressing these underlying issues, social prescribing can help to prevent the development of chronic health conditions, reduce the need for expensive medical treatments, and improve overall health outcomes (2).

Social prescribing is emerging as an important tool in helping to reduce pressures on the health system and tackle inequality in health outcomes (3,4). In England, approximately 1 in 4 primary care appointments are related to unmet social needs, such as loneliness, financial stress, or poor housing (5). Recent evidence suggests that the current NHS link worker programme could lead to 4.5 million fewer GP appointments per year, with those patients receiving community-based social solutions to their unmet social needs (6). In a recent study led by the London School of Economics, the total number of appointments saved would lead to a total of £275 million.

In addition to reducing pressure on primary care, improving patient wellbeing, and tackling health inequalities, social prescribing can play a role in reducing overprescribing as outlined by a recent campaign launched by the College of Medicine and entitled ‘Beyond Pills’ (7). The campaign was established in the wake of the Chief Pharmaceutical Officer’s National Overprescribing Review, which was published in September 2021 and revealed:

- Overprescribing costs the UK economy £2bn a year;
- 10% of prescriptions for pharmaceutical drugs are unnecessary;
- Adverse drug reactions account for 10-20% of hospital in-patient admissions; and

- At least 15% of the population take more than 5 separate medicines daily, often using one drug to treat side effects of another

The role of government in shaping, developing, and improving social prescribing policies is crucial in ensuring that this approach to preventative healthcare is accessible to all.

There are several key areas where government policy can make a difference:

1. Funding: Government funding is essential to support the development and implementation of social prescribing programmes, as well as the necessary training and resources for healthcare professionals to refer patients to these programs.
2. Integration: Government can play a key role in integrating social prescribing programmes into primary, secondary care and community, ensuring that patients have access to these programmes at the right time and in the right place.
3. Evaluation: Government can also support the evaluation of social prescribing initiatives, to ensure that they are effective and to identify areas for improvement.
4. Research: Government can also fund research in the social prescribing field to understand the best practices and evidence base for social prescribing.
5. Collaboration: Government can lead the collaboration between health and social care systems, community groups, and local organisations to identify the social prescribing needs and services in the local area.

February 2023

References

1. What is social prescribing? | National Academy for Social Prescribing [Internet]. [cited 2022 Jan 28]. Available from: <https://socialprescribingacademy.org.uk/about-us/what-is-social-prescribing/>
2. Braveman P, Gottlieb L. The Social Determinants of Health: It's Time to Consider the Causes of the Causes - Paula Braveman, Laura Gottlieb, 2014 [Internet]. [cited 2022 Jan 28]. Available from: <https://journals.sagepub.com/doi/10.1177/003335491412915206>
3. Polley M, Seers H, Fixsen A. Evaluation Report of the Social Prescribing Demonstrator Site in Shropshire -Final Report. 2019 Jan 20;
4. Kimberlee R. Developing a social prescribing approach for Bristol [Internet]. 2013 [cited 2022 Jan 5]. Available from: <https://uwe-repository.worktribe.com/output/927254>
5. Torjesen I. Social prescribing could help alleviate pressure on GPs. BMJ [Internet]. 2016 Mar 10 [cited 2022 Jan 26];352:i1436. Available from: <https://www.bmj.com/content/352/bmj.i1436>
6. Social prescribing programme can reduce pressure on primary care – new evidence [Internet]. National Academy for Social Prescribing. 2022 [cited 2022 Jan 27]. Available from: <https://socialprescribingacademy.org.uk/social-prescribing-programme-can-reduce-pressure-on-primary-care-new-evidence/>
7. Dixon M. Beyond Pills Campaign. 2022 [Cited 2022 Jan 20th]. Available from: <https://collegeofmedicine.org.uk/beyondpills/>
8. Treadwell J. National overprescribing review for England: another step forward? Drug and Therapeutics Bulletin. 2022 Feb 1;60(2):18-