

### North Tyneside Social Prescribing Service

# COVID-19 UPDATE: 29 May 2020

Your Social Prescribing team continue to work remotely, making contact with patients and supporting them via telephone and video calls. Mostly working from home, our practice-facing staff have N3 connection tokens in place that ensure that the conversations we are having are visible to clinicians.

## Extra support for practices during Covid-19

In addition to taking new referrals and working with patients already on our caseloads, we are also supporting practices to contact patients identified as shielded, vulnerable or at risk during the pandemic.

In North Tyneside, the National Team are working from the shielded list from primary and secondary care: those with needs are sent daily to the local Hub of 60 redeployed council and VODA staff who organise food, meds and befriending.

We check lists from GP practices against the list the Council hold, and then contact those not on the Council's list to ensure that people don't 'fall through the gaps' in the system. From the practices across the region that we have supported so far, between **66%-94%** of patients on GP lists are not on Council lists, and would therefore not otherwise be contacted. We invite you to send over a list of shielded, vulnerable or 'at risk' patients.

#### How can you get in touch?

Lists can be emailed to the Single Point of Contact (SPOC) address <u>fcc.ntsps@nhs.net</u> - please contact your Link Worker, or contact our new Service Manager Trish Tindall if you have questions: 07851 245074

#### Covid-19 Case Study

#### Background

'Jean' is a 51-year old female from Wallsend with diagnoses of anxiety and depression, asthma and COPD. She has literacy issues and full-time caring responsibilities for her mother. At the start of the coronavirus pandemic she was ignoring government advice and continuing to travel on public transport twice daily to care for her housebound mother.

#### Intervention

Conversations with her Link Worker enabled Jean to identify that putting other people's needs above her own was putting her at risk. Rather that advising or telling Jean what to do, her Link Worker explored the pros and cons of different options. Jean agreed to a referral to Adult Social Care for care for her mother and began self-isolating from this point, thereby protecting herself and others from further risk of infection.

Jean has since identified that it was a great relief not to have to travel every day; she maintains twice daily phone contact with her mother and is assured that she is receiving good quality care. In a recent conversation Jean also agreed to a referral to the IAPT team to make changes to her mental health.

#### Outcome

Patient Activation Measure (PAM) March 2020: Initial PAM Level 1, Score 43.7 May 2020: Second PAM Level 2, Score 51.0

