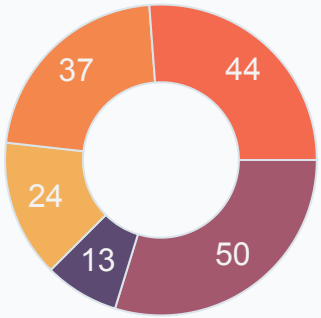
Welcome to February's newsletter. Your social prescribing team continues to support our patients with their social, emotional and physical health, and this month we share recent data, a case study and introduce our new Care Co-ordinator, Lyndsay Hogg.

Patients by practice

currently open to the Wallsend PCN social prescribing team



Bewicke	50	Garden Park	13
Park Road	24	Portugal Place	37
Village Green	44		

We are currently supporting **168** patients from the Wallsend PCN

Referrals over time

The increased capacity enabled by the arrival of our second Social Prescribing Link Worker is reflected in increased referral numbers.

We have encountered increased levels of anxiety in patients during the course of the pandemic. This case study highlights some of the graded exposure work we do with patients, working alongside the Primary Care Mental Health nurses at practices.

Background

'Ian' was referred to his practice's social prescribing team by a PCMH nurse. He is on a waiting list for Talking Therapies, is 44 years old, lives with his parents and finds it hard to leave the house.

Intervention

Ian's anxiety was so pronounced that he was initially offered weekly appointments, and has attended 100% of these. A **CBT** approach was used along with **Motivational Interviewing** and **Solution Focused** techniques to identify personalised anxiety management strategies. Ian found that breathing and grounding exercises were useful strategies for him, and he worked hard each week on completing 'homework' and goals that he set for himself.

Progress

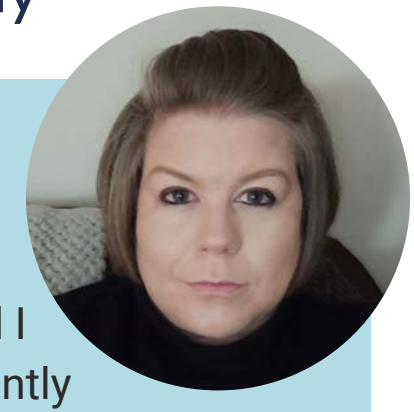
By the third week Ian had managed to go shopping on his own, and by his sixth session he had left the house for three consecutive days. At this stage appointments were extended to fortnightly: by his seventh session Ian had left the house for seven out of the past nine days. He is currently working towards attending a small group at the end of lockdown, and taking his son out for walks.

Measures

Initial PAM (21/10/2020)
Level 1 Score 42.2

Second PAM (04/01/2021)
Level 2 Score 51

Hello from Lyndsay



Hello, my name is Lyndsay Hogg and I have recently joined FCC as a Complex Lives Care Coordinator within the Wallsend PCN.

My role will complement the Link Work that Mark and Helen are doing, however here are some of the key features of Care Coordination.

Key elements of Care Coordination

My focus will be to work within **more complex situations**, and where **multiple services are involved in a patient's care.**

I will aim to provide a **central, focal point** for the **connection and coordination of services**, for example taking the lead on MDTs, with the patient at the centre of their care.

The role will require **new and innovative approaches to multi-agency working**, and I am very enthusiastic about the opportunities the role can offer to patients who might face complex life situations, or who might be finding it hard to navigate current care pathways.