Case for Support session discussion group conversations

**Plans for the future**

**Delivery models**

* Transition from online to physical meetings
* Hybrid/blended/integrated solution for ways of working, recognising that for some users distance models are more accessible and that others would value or prefer face-to-face – ideas for video calling participants into the meeting
* Transition point
  + Participant-led discussions taking place with different groups about whether they want to remain online/over phone or to meet up physically
  + moving from staff to volunteers

**Participation**

* Starting a physical group -using Reading Friends incentives to encourage participation
* Housebound library service starting again using volunteers going into homes and talking and reading to participants
* Concern about going into people’s houses from public health but Libraries Connected toolkit is being used and suggest that this is feasible
* Building on work so far on Reading Friends
  + How to expand beyond what took place during the funded period, particularly for small projects trying to grow in size and scope

**Audiences**

* Key areas for future work include care homes where there will be enormous need post pandemic as well as housebound people and young people
* Key audience of older participants as they may still be feeling lonely and isolated as restrictions are lifted

**Funding routes**

* Covid recovery funding -a key route as priority is around connection, reducing loneliness and social isolation
* Important priorities outlined in [Government recovery action plan](https://www.gov.uk/government/publications/covid-19-mental-health-and-wellbeing-recovery-action-plan)

**Medical and health routes**

* NHS/hospital trusts
* [Clinical Commissioning Groups](https://www.england.nhs.uk/ccgs/) (CCGs) have themed rounds of funding
* [Find out more about commissioning](https://www.england.nhs.uk/commissioning/) but also about how [Integrated care systems](https://www.england.nhs.uk/integratedcare/) (ICS) are being [rolled out](https://www.england.nhs.uk/2021/03/nhs-achieves-key-long-term-plan-commitment-to-roll-out-integrated-care-systems-across-england/) across the country and [Kings Fund](https://www.kingsfund.org.uk/publications/integrated-care-systems-explained#legislative-change) explain how the legislative proposals will mean the disbanding of CCGs

**Local authority routes**

* Local Government Association
* Adult social services/adult social care– important for positioning of libraries
* Health and Wellbeing Boards
  + Find out who is sitting on the Health and Wellbeing Board in your local authority and look at their priorities
  + Look at the [Joint Strategic Needs Assessments](https://www.gov.uk/government/publications/joint-strategic-needs-assessment-and-joint-health-and-wellbeing-strategies-explained) for your local authority and wards
* Public health often have the remit for tackling loneliness and its impact on wellbeing and a good route for funding as well as social prescribing
* Covid outbreak management funds
* Friends of library groups can be great for advocacy, promotion, and some financial support
* Area teams: i.e., neighbourhood teams/officers in wards – connecting with them as they receive funding to help residents in their wards
* Budget for shared reading could be used

**Trusts and national agencies**

* Local Trusts and Foundations, local charities and charitable trusts
  + Personal relationships and word of mouth important
* Arts Council England

**Supermarkets, partnerships and sponsorship**

* Supermarkets can promote, provide refreshments, or sponsorship (Tesco and Waitrose specifically mentioned).
* [Tesco Community Grants](https://tescobagsofhelp.org.uk/) which used to be called Bags of Help
* [Coop](https://causes.coop.co.uk/) choose community causes with applications opening each spring
* What does your project need? What relationships can be developed?
  + A partner or funder may provide resources, refreshments, a venue to run sessions, or an event space, publicity materials, promotion and PR, or investment for these aspects of a project etc.
* Sponsorship of groups may be possible

**Tips**

**Participation**

* Attracting new members and extending reach using Facebook broadcast or more outreach work, connecting with local organisations
* Arranging activities to get people talking is key to attracting new participants
* Places of welcome -coffee mornings with a focus on books/magazines
* Big lunch get together -virtual lunches for the volunteers and befrienders -an opportunity for them to come together and share their experience
* Participants starting to take ownership and run their own activities
* Skills development of group members

**Funding and partnerships**

* Connecting with the right organisations
* Good to think about reciprocal relationships to make sure priorities are in line: what do they want, as well as what do you need?
  + If corporate, then consider key aspects of their CSR: Corporate Social Responsibility. They may want to promote or fund a community group with a case study about how they have made a difference to their community
* Elevator pitch prepped with a follow up call for key stakeholders/funders
* Connecting with local link workers as part of social prescribing. Can provide referrals or promote. What are they saying about local communities and what are the health and wellbeing priorities in their local areas? See Appendix 1 for contact emails of English regional leads.

**Challenges**

* Challenge with restarting physical groups. Some concerns and hesitation from participants to return to in-person meetings.
* Challenge of moving from a library driven model to a greater focus on volunteers- many of the projects in the roll out have not had experience of volunteer delivery, recruitment and management and will need support and resources
* Recruitment of volunteers slow at times or needing to be paused following capacity constraints
* Tried to reach digitally excluded but difficult. Skills to use Zoom are advanced
* Staffing and resourcing are challenging, with library budgets under pressure
* Deeper relationships and connections mean that there might be disclosures coming out more in conversations, so knowing internal safeguarding processes is crucial and maintaining boundaries in a befriending relationship is important
* More tips appreciated

**Finding the best routes**

* Finding the right ways into funding and the right people is challenging
* Not always sure how to link with local social prescribing networks
  + Link workers are employed by lots of different organisations
  + [Regional learning coordinators](https://www.england.nhs.uk/personalisedcare/social-prescribing/support-and-resources/learning-coordinators/) – see Appendix 1 for contact email addresses
  + The Reading Agency have contacts at the National Academy for Social Prescribing so can use their newsletter for promotion

If you would like to share additional plans, advice, ideas for funding routes, tips or challenges, then please let us know at [readingfriends@readingagency.org.uk](mailto:readingfriends@readingagency.org.uk)

**Appendix 1 - July 2021**

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| **Region** | **Contact details** |
| North West | [anne-marie.morrison@seftoncvs.org.uk](mailto:anne-marie.morrison@seftoncvs.org.uk)  [sophie.glinka@nhs.net](mailto:sophie.glinka@nhs.net)  (Greater Manchester)  [Charlotte@the-bureau.org.uk](mailto:Charlotte@the-bureau.org.uk) |
| North East, Yorkshire & Humber | [jackie.jamieson1@nhs.net](mailto:jackie.jamieson1@nhs.net) (NE)  [David.cowan1@nhs.net](mailto:David.cowan1@nhs.net)  (Y&H) |
| Midlands | [maria.willis1@nhs.net](mailto:maria.willis1@nhs.net)  (East Midlands)  [michelle.howard@theaws.org](mailto:michelle.howard@theaws.org) (West Midlands) |
| East of England | [sian.brand2@nhs.net](mailto:sian.brand2@nhs.net) |
| South West | [rhian.loughlin@nhs.net](mailto:rhian.loughlin@nhs.net) |
| South East | [Malcolm.bray1@nhs.net](mailto:Malcolm.bray1@nhs.net) |
| London | [lianna.martin@nhs.net](mailto:lianna.martin@nhs.net) |

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