

INTEGRATED PLUS / HIGH
INTENSITY USER SERVICE

Evaluation Report

2023 - 2024





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Introduction



Many things that affect our health cannot be treated by medicine alone, social prescribing recognises the direct links between regular attendance to the GP or A&E and our overall health. Addressing a wide range of social emotional and practical needs. Building resilience and linking people back into their community, improving their overall mental and physical health and reducing pressures on NHS services.

Social prescribers work closely with medical practitioners to identify those patients presenting with a medical need, where there are underlying non-medical causes that are undoubtedly influencing either their overall mental health or contributing to declining physical health. The role of a social prescribing link worker addresses the root cause and links the client to services and community support groups. This approach works so well because it connects individuals to the support they need; at the time they need it.

Our Integrated Plus service supports people aged 16 and over who frequently visit their GP, who are at high risk of hospital admission and/or who are vulnerable and could benefit from social prescribing interventions. The service aims to look at the whole needs of a person, regardless of what they might be and jointly find solutions to problems faced.

Integrated Plus identifies opportunities for people to become more involved and active in their community to help improve their wellbeing. Our team also help to ensure people are accessing services and activities appropriate to their needs.

Integrated Plus has been successfully delivering support through our social prescribing project for ten years.

Meet The Team



Sarah Fisher
Manager



Richard Moss
SPLW Brierley Hill PCN



Linsey Robinson
SPLW Halesowen PCN



Jayne Ford
SPLW Sedgley, Coseley and
Gornal PCN



Rachel Griffiths
SPLW Stourbridge PCN
Maternity Cover



Gemma Freer Wright
SPLW Kingswinford and Wordsley PCN



Aron Thornley
SPLW Dudley and Netherton PCN
Maternity Cover



Kelly Rea
High Intensity Use Lead



Ellie Pagett
High Intensity Use Lead



Aiesha Turner
SPLW Dudley and Netherton PCN



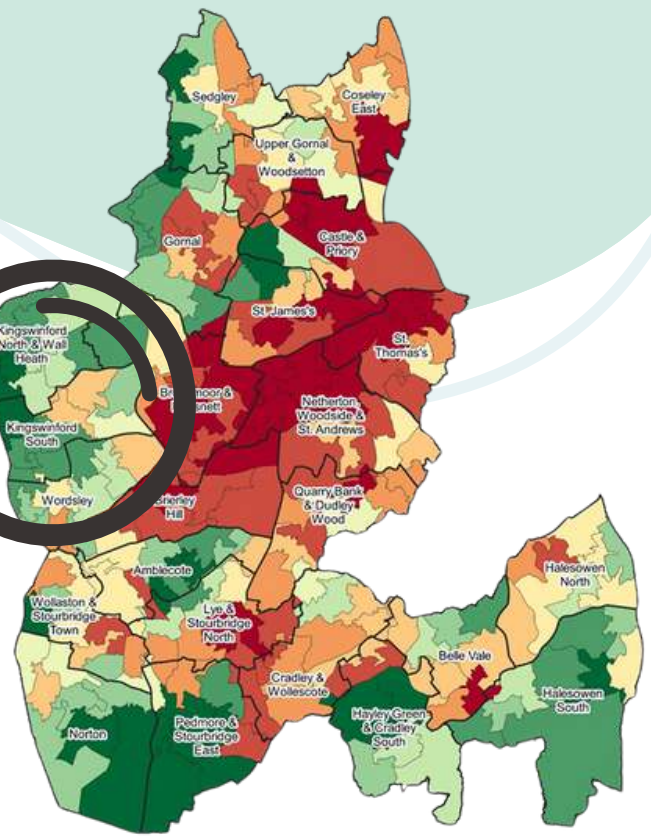
Georgia Pearsall
SPLW Stourbridge PCN

Inside the PCN: Kingswinford & Wordsley

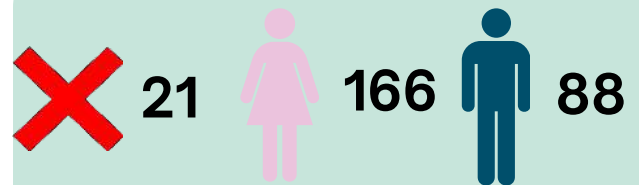
REFERRALS

There were 275 referrals made to Integrated Plus within the Kingswinford and Wordsley PCN. Out of those 275 referrals, 164 clients accepted the service. The service was declined by 34 individuals, 6 partially accessed the service, 10 referrals were deemed inappropriate and 61 individuals were unable to be contacted.

60% of the referrals made engaged.

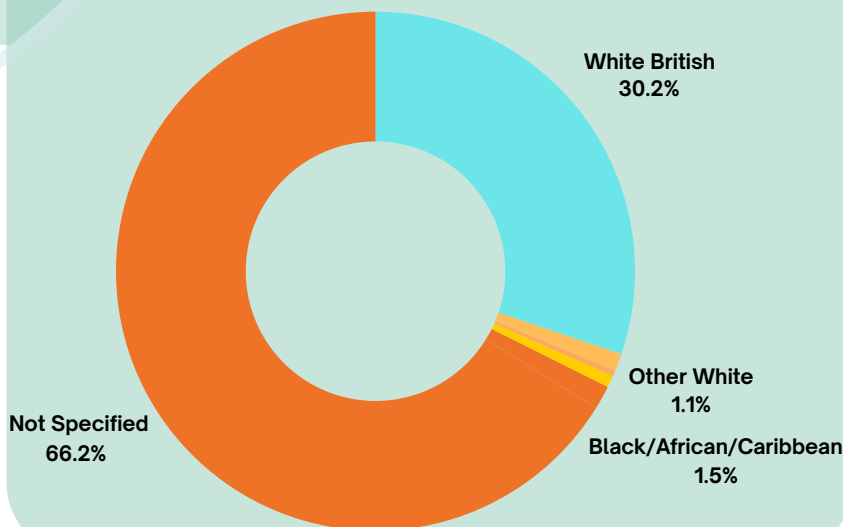


GENDER

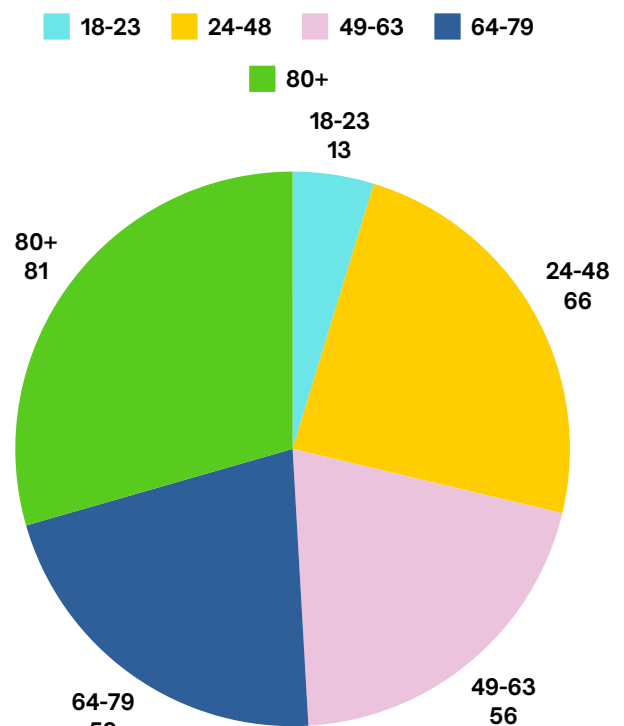


166 of referrals made were for females, 88 for males and 21 were not recorded.

ETHNICITY



AGE



The eldest client to engage is 101 years old.

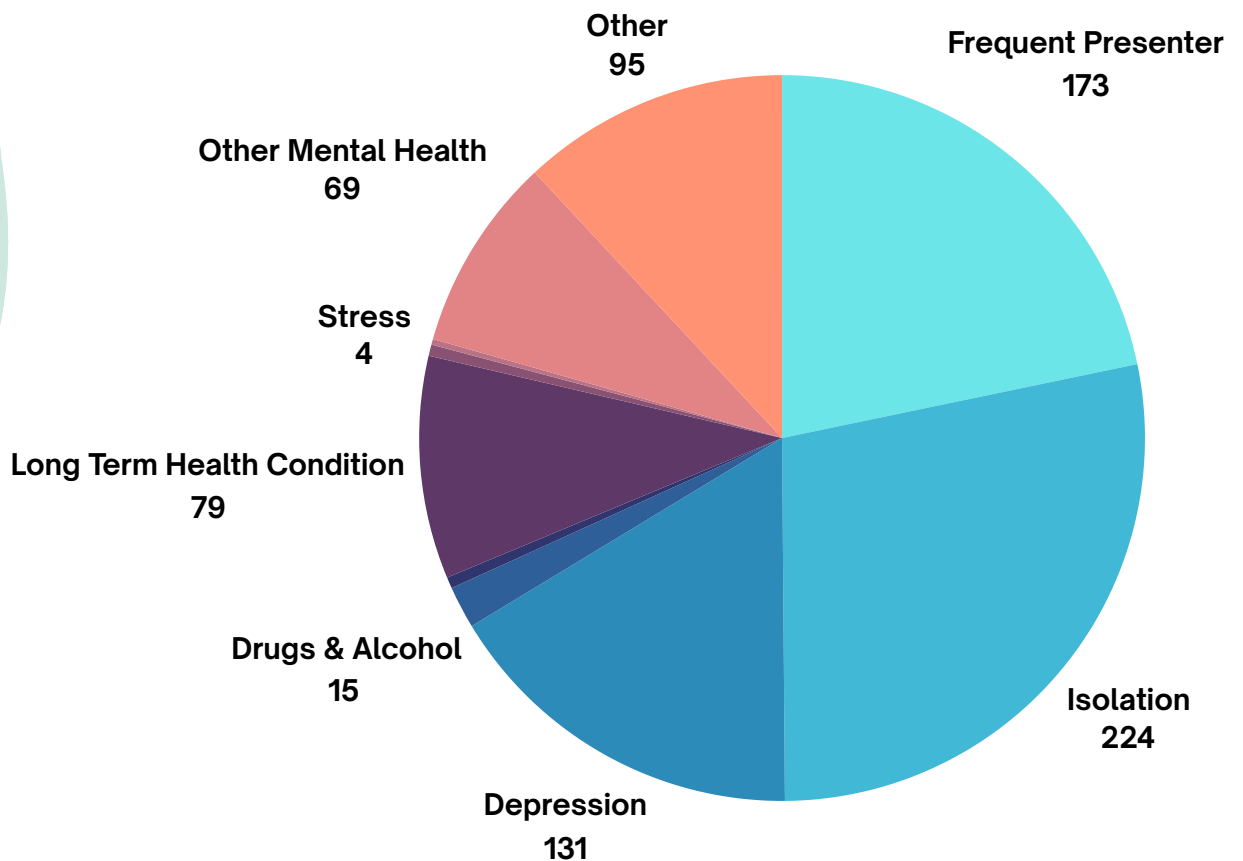


Inside the PCN: Kingswinford & Wordsley



PRESENTING ISSUES

The top three presenting issues for the PCN were depression, isolation and frequent presentation at the surgery.



*“She was understanding and patient
I appreciate her patience with me
She put time and effort into finding solutions for
me “*

Inside the PCN: Kingswinford & Wordsley



Joan and Arthur were finding some day-to-day activities were more challenging. Their GP surgery referred them to Integrated Plus to see if they could be offered anything further to help them maintain their independence.

Their Social Prescribing Link Worker, Gemma, met with the couple in their own home to complete an assessment and explore their needs in more detail. Joan explained that they both felt 'worn out' as they are in their 90s and often felt frustrated, more than anything, at no longer being able to physically do what they wanted. Arthur had given up driving several months ago due to no longer feeling safe which had a big impact on their independence. They have a supportive family, but the couple raised concerns about putting undue pressure on to visit amidst rising fuel costs.

Arthur was having issues with his mobility and balance and had some stumbles at home. Gemma referred him to an Occupational Therapist to explore his difficulties and to see if there were any mobility aids to assist him and reduce the risk of falls. They were provided with a perching stool and bed rail which helped them when having to stand for any length of time or getting in and out of bed. They also have two walking frames (one on each floor of the house) so they don't feel restricted to only using one floor.

Gemma supported Joan to apply for attendance allowance, which was awarded at the lower rate of £68 per week due to Joan's problems with her mobility, washing, cooking and a general lack of dexterity. The additional income has allowed the couple to pay for more help around the home and contribute to family members' petrol costs, enabling them to support the couple more with shopping, cleaning, preparing meals and doing housework.

Joan stated that she used to use hot water bottles but, due to limited dexterity and pain in her hands, she struggled to use the kettle. She was also concerned about burning herself and the bottle being too heavy for her to handle. Gemma made an application to access the Household Support Fund which funded two electric throws which they could both use to keep warm but without the added risk of burns from a boiling kettle and handling heavy hot water bottles.

Joan and Arthur felt that, in the future, they might like to start going to groups again, so Gemma provided details about how to register and use the local Ring & Ride service.

Joan and Arthur continue to maintain their independence with access to suitable equipment and with some ongoing family support.

Inside the PCN: Kingswinford & Wordsley

NHS Cost Savings

Following Integrated Plus support:

6 Months

12 Months



A&E
RUSSELLS HALL
£25,491.00

NHS FOUNDATION
TRUST A&E
£34,281

INPATIENTS
RUSSELLS HALL
£30,600

NHS
FOUNDATION
TRUST
INPATIENT
£42,500

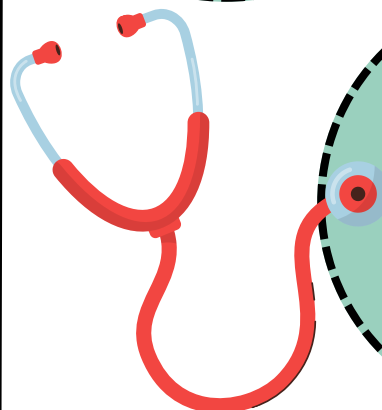


A&E
RUSSELLS HALL
£28,128.00

NHS FOUNDATION
TRUST A&E
£36,918

INPATIENTS
RUSSELLS HALL
£119,000

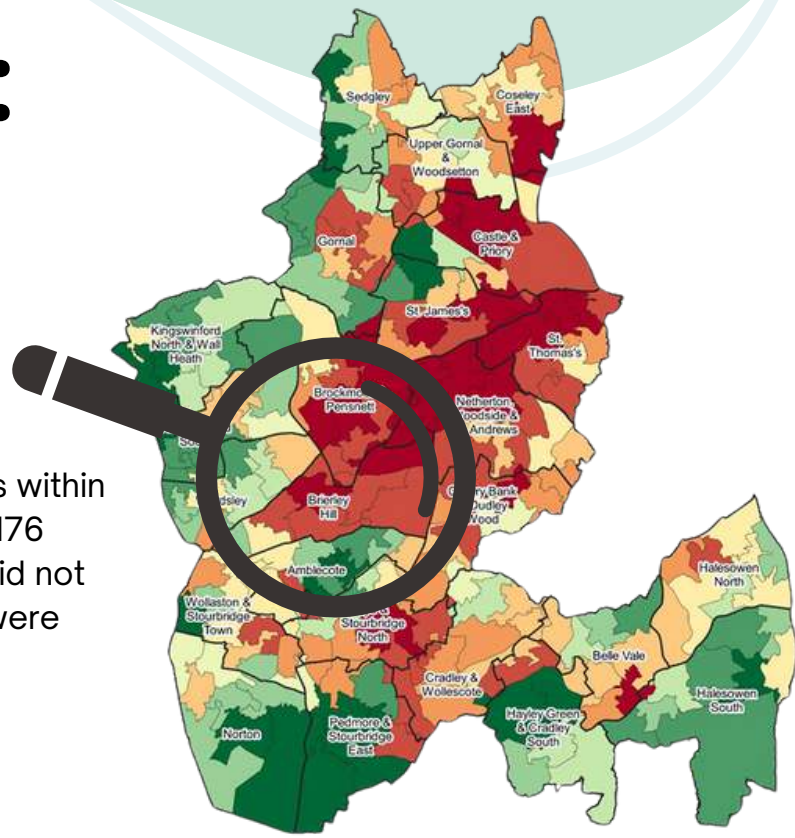
NHS
FOUNDATION
TRUST
INPATIENT
£136,000



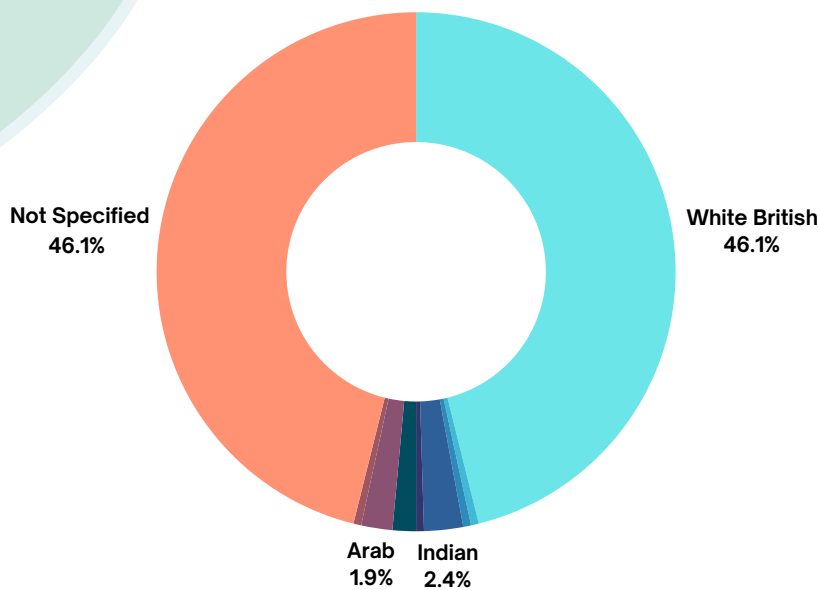
Inside the PCN: Brierley Hill & Amblecote

REFERRALS

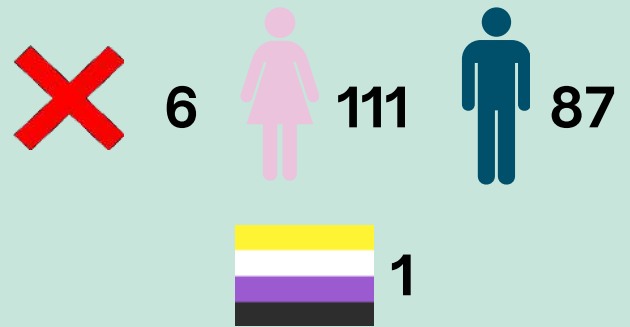
There were 206 referrals made to Integrated Plus within the Brierley Hill PCN. Of those 206 referrals, 176 individuals accepted the service. 5 declined, 1 did not attend, 8 referrals were inappropriate and 16 were unable to contact.



ETHNICITY



GENDER

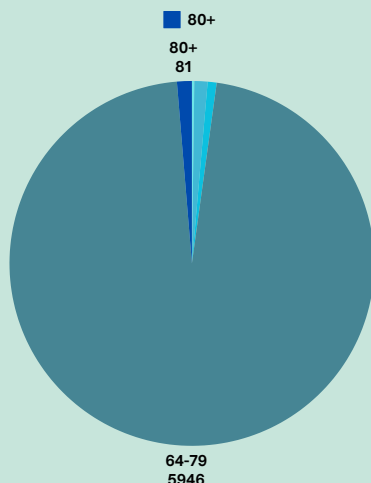


111 referrals were made for females, 87 for males, 6 not recorded and 1 for a non binary individual.

AGE



The eldest client to engage is 99 years old.

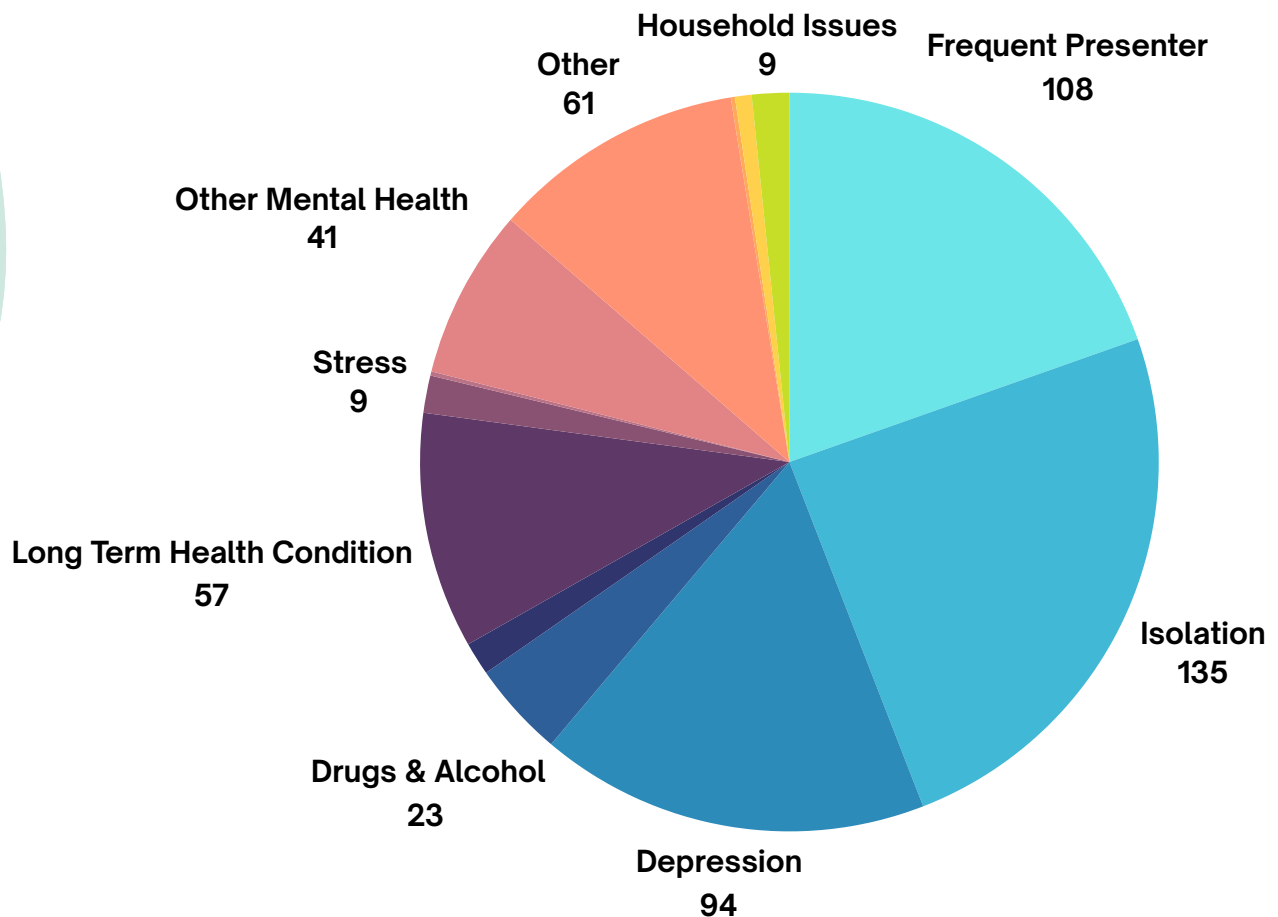


Inside the PCN: Brierley Hill & Amblecote



PRESENTING ISSUES

The top three presenting issues for the PCN were depression, isolation and frequent presentation at the surgery.



Since I made that phonecall (to IP), it's 'been rolling and rolling with help' - 'it was so quick'.

Inside the PCN: Brierley Hill & Amblecote



***David, a single father, was referred to Integrated Plus just over six months ago. His referrer had identified several areas of complex needs ranging from financial hardship, debt, social isolation and mental health. *David also suspected he had undiagnosed ASD.**

***David's senior link worker visited him in his home and together they co-produced a plan. David described his situation as feeling like he was drowning. This was due to a combination of his debt, lack of finances, and inability to cope with his mental health/social isolation. He also spoke about struggling to cope with practical daily tasks, not knowing where to start. When co-producing the support plan *David was encouraged to think about which of his needs were his greatest priority.**

***David also spoke about the shame of living in his flat with no carpet and a washing machine that did not work and how it did not feel like a home. His Link worker applied for a range of grants, including some to offer support with clothing for his three-year-old son.**

***David had been off work for several months; his link worker was able to tap into a local service 'Thrive into Work' Where *David worked closely with a vocational employment advisor.**

As well as needing to overcome complex mental health needs, *David no longer had the means to travel to work. *David completed a phased return following the purchase of a bicycle through Active Black Country. The senior Link worker assisted *David to access free childcare, further paving the way to a successfully return to his employment. After 6 months intensive support, *David has had four rooms in his home carpeted, a washer dryer was purchased via a small grant application and he has successfully completed his phased return to work. *David is on the waiting list to have his assessment for his potential neurodiversity.

Inside the PCN: Brierley Hill & Amblecote

NHS Cost Savings

Following Integrated Plus support:

6 Months

12 Months



A&E
RUSSELLS HALL

£1,758

NHS FOUNDATION
TRUST A&E

£10,548

INPATIENTS
RUSSELLS HALL

£18,700

NHS
FOUNDATION
TRUST
INPATIENT

£34,000



A&E
RUSSELLS HALL

£14,943

NHS FOUNDATION
TRUST A&E

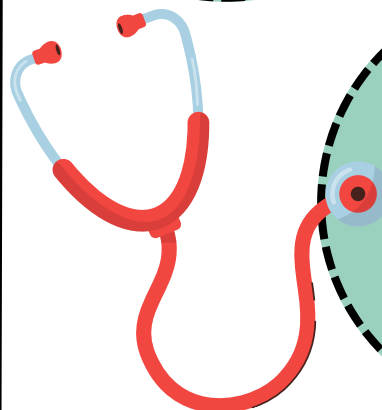
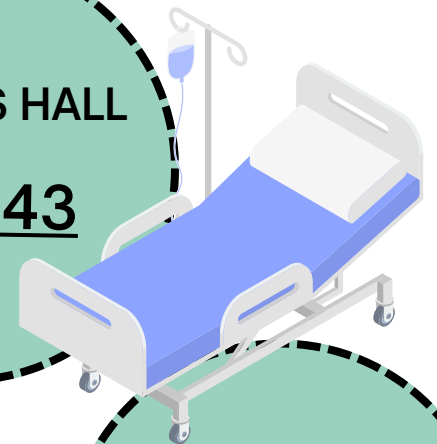
£18,459

INPATIENTS
RUSSELLS HALL

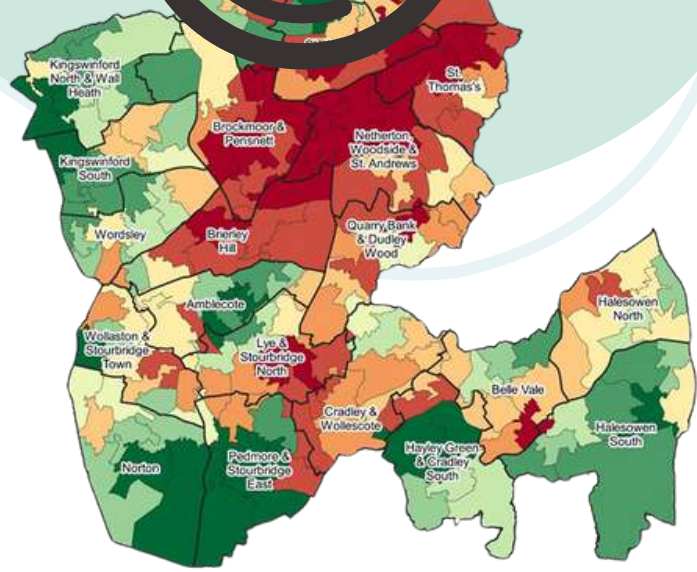
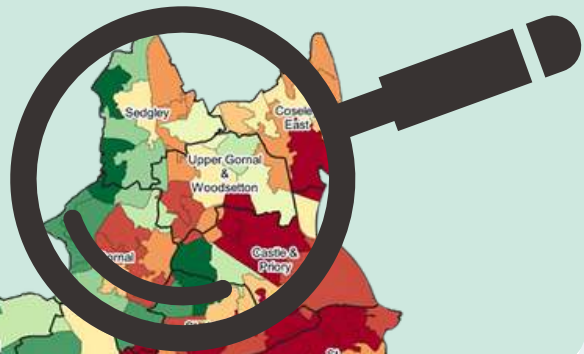
£79,900

NHS
FOUNDATION
TRUST
INPATIENT

£107,100



Inside the PCN: Sedgley, Coseley & Gornal

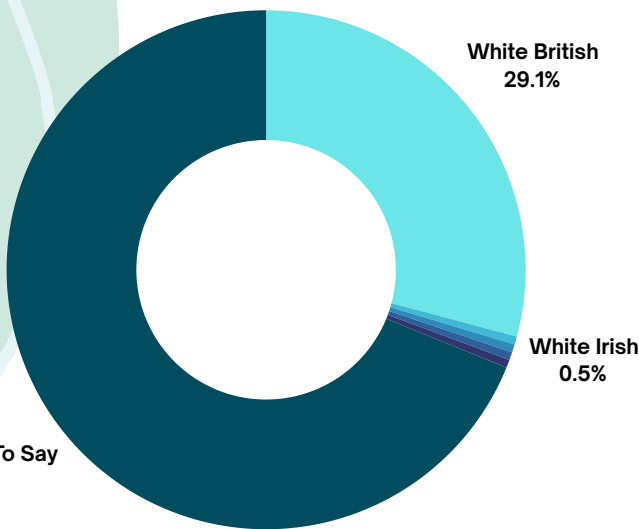


REFERRALS

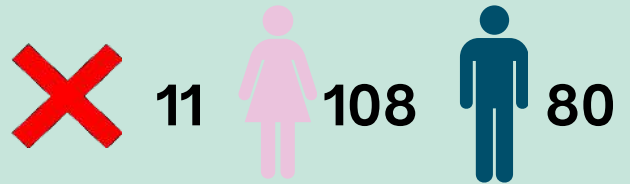
There were 199 referrals made to Integrated Plus within the SCG PCN. Of those 199 referrals, 182 individuals accepted the service. 5 declined, 1 did not access full service, 5 referrals were inappropriate and 6 were unable to contact.

ETHNICITY

- White British
- White Irish
- African
- Indian
- Pakistani
- Prefer Not To Say



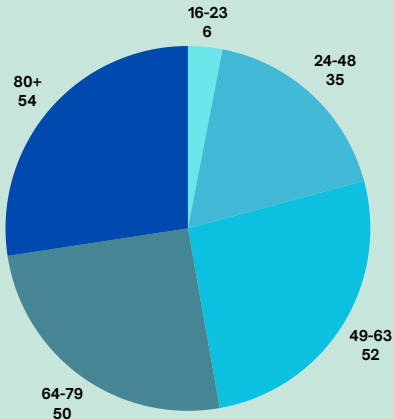
GENDER



108 referrals were made for females, 80 for males and 11 were not recorded.

AGE

- 16-23
- 24-48
- 49-63
- 64-79
- 80+



The eldest client to engage is 96 years old.

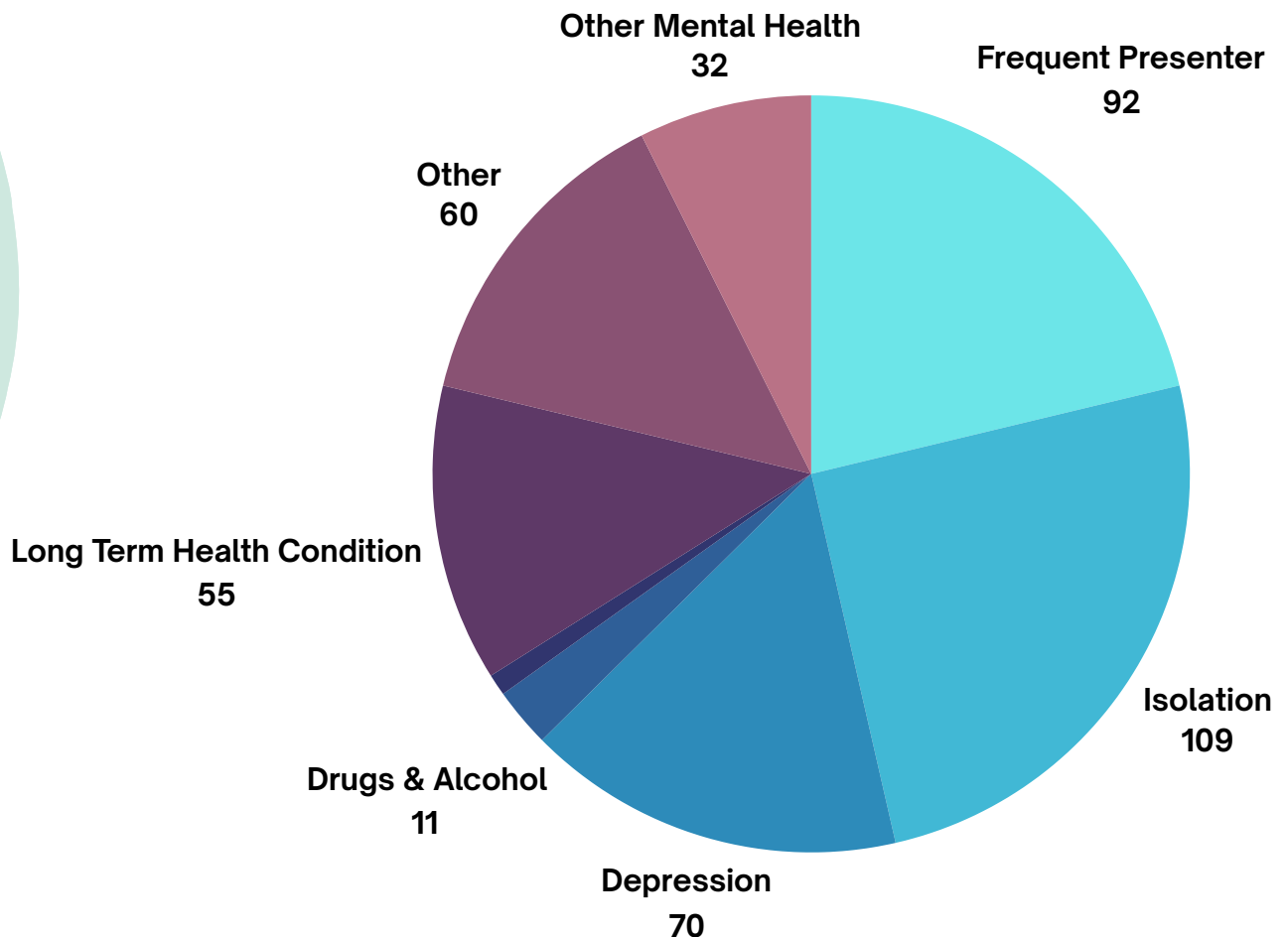


Inside the PCN: Sedgley, Coseley & Gornal



PRESENTING ISSUES

The top three presenting issues for the PCN were depression, isolation and frequent presentation at the surgery.



“It was nice to know that somebody out there was keeping an eye open for something that might be of benefit to me”

Inside the PCN: Sedgley, Coseley & Gornal

NHS Cost Savings

Following Integrated Plus support:

6 Months

12 Months



A&E
RUSSELLS HALL

£25,491

NHS FOUNDATION
TRUST A&E

£24,281

INPATIENTS
RUSSELLS HALL

£30,600

NHS
FOUNDATION
TRUST
INPATIENT

£42,500



A&E
RUSSELLS HALL

£28,128

NHS FOUNDATION
TRUST A&E

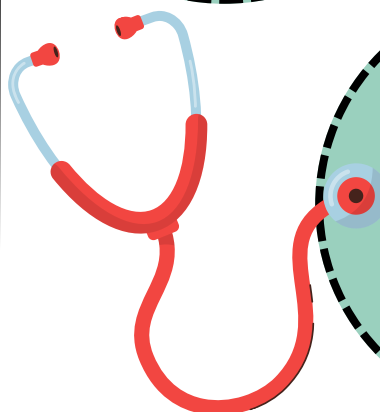
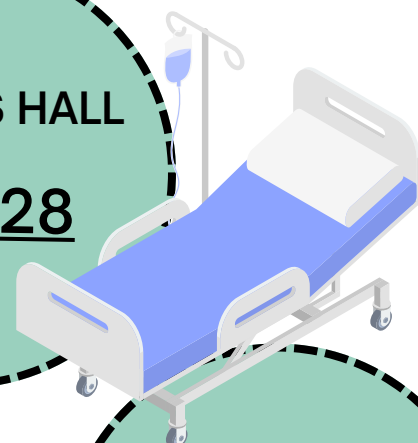
£36,918

INPATIENTS
RUSSELLS HALL

£30,600

NHS
FOUNDATION
TRUST
INPATIENT

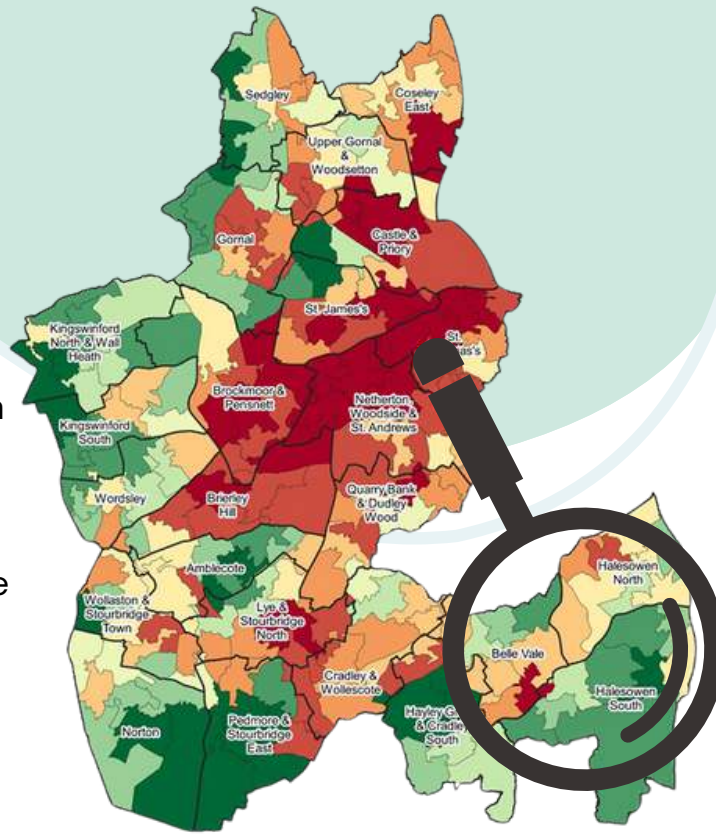
£136,000



Inside the PCN: Halesowen

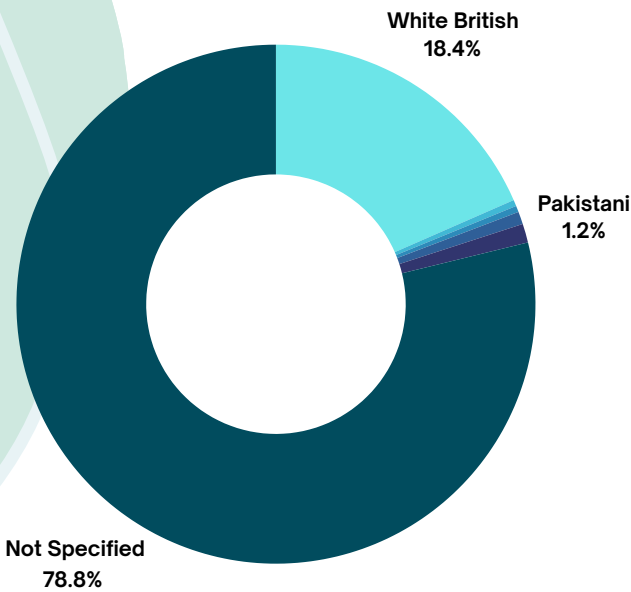
REFERRALS

There were 255 referrals made to Integrated Plus within the Halesowen PCN. Of those 255 referrals, 188 individuals accepted the service. 8 declined, 8 did not access full service, 6 referrals were inappropriate and 36 were unable to contact. 1 individual did not attend the appointment and 8 were supported by the PCN.

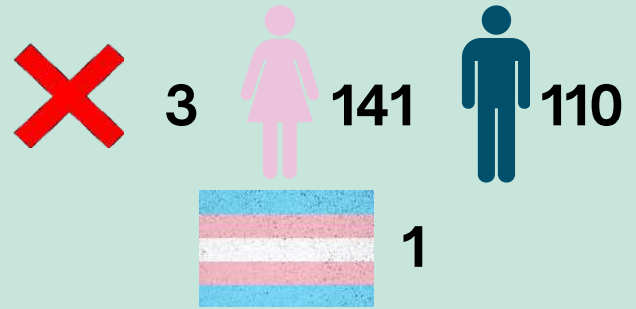


ETHNICITY

- White British
- White Asian
- African
- Caribbean
- Pakistani
- Not Specified



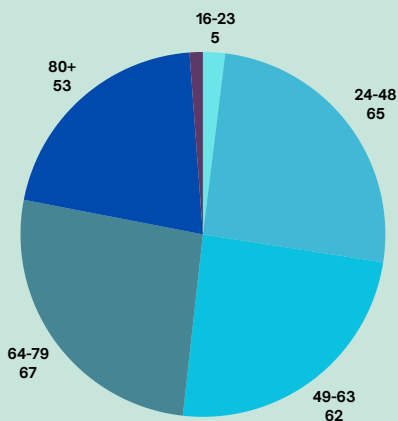
GENDER



141 referrals were made for females, 110 for males, 3 were not recorded and 1 individual was transgender.

AGE

- 16-23
- 24-48
- 49-63
- 64-79
- 80+
- Not Recorded



The eldest client to engage is 97 years old.


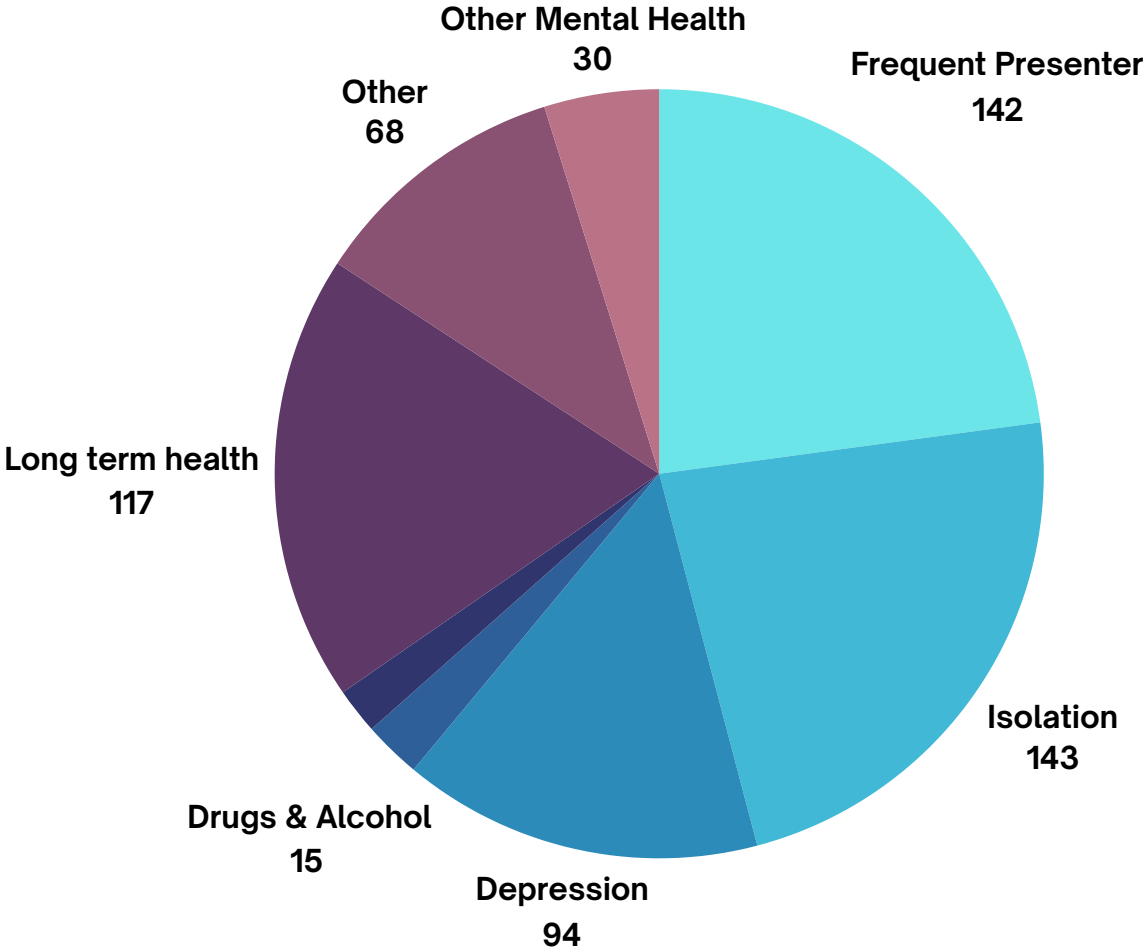


Inside the PCN: Halesowen



PRESENTING ISSUES

The top three presenting issues for the PCN were , isolation, frequent presentation at the surgery and other.



*“She was very personable and efficient.
She made things happen that she said she would”*

Inside the PCN: Halesowen



*Laura is a 79-year-old single female. She was referred to Integrated Plus by her Dudley Talking Therapy worker for support needs identified around loneliness and isolation. An initial assessment took place, after some negotiating, as *Laura felt that her home was not very tidy, and she was ashamed to let anyone in.

*Laura eventually agreed to a home visit where it was determined that she was struggling to maintain her home environment.

She struggled with low level hoarding impacting her ability to clean the property. She expressed concerns about being evicted if her landlord saw the property and disclosed that she didn't let people in her home for the fear of being judged. Laura expressed that she had been trying very hard to make a start on clearing and throwing away 'stuff' she no longer needed, but felt the task was too overwhelming. Additionally, due to Laura's mental health complexities, she is on medication that affects her energy levels and motivation, making the task seem even more difficult. There were rooms *Laura refused to show her link worker the bedroom and bathroom, but she allowed her to see the kitchen and living room. Both were in disarray and unliveable due to clutter.

A discussion took place about decluttering and a supported clean, which would mean throwing away rubbish she had collected. *Laura agreed that with support, she would be willing to declutter and allow a cleaner to come in and address the living room and kitchen. She felt that (with continued support) this would motivate her to address the rest of her home a little bit at a time.

Her link worker approached an independent cleaning company 'Loulabelle's Home Help' for a quote and then applied to the BRIC fund for the Clean and Clear at a cost of £72 for 6hours.

Her link worker and another member of the team joined *Laura and together they all helped with the work to maximise the support.

*Laura was overjoyed by this. She was now able to sit in her living room as chairs had been freed up, clothes put away and rubbish thrown. The kitchen was also cleaned and cupboards replenished with clean cups and cutlery, The fridge was cleaned and disinfected. Both rooms were now liveable and functional again.

She could not express her thanks enough and felt very motivated by the work that had been achieved together *Laura said that she had never felt so motivated to continue and that this really was the starting point for future decluttering.

Inside the PCN: Halesowen

NHS Cost Savings

Following Integrated Plus support:

6 Months

12 Months



A&E
RUSSELLS HALL

£23,733

NHS FOUNDATION
TRUST A&E

£62,409

INPATIENTS
RUSSELLS HALL

£90,100

NHS
FOUNDATION
TRUST
INPATIENT

£112,200



A&E
RUSSELLS HALL

£49,224

NHS FOUNDATION
TRUST A&E

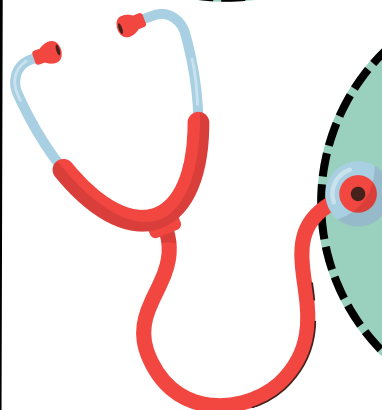
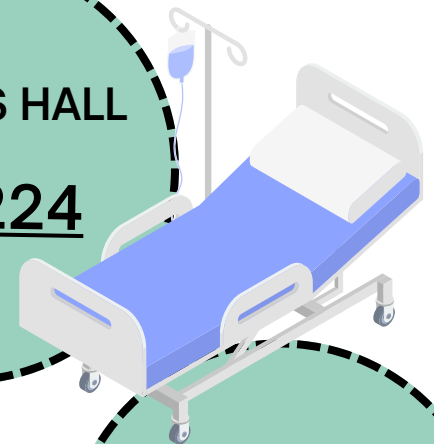
£120,423

INPATIENTS
RUSSELLS HALL

£389,300

NHS
FOUNDATION
TRUST
INPATIENT

£426,700

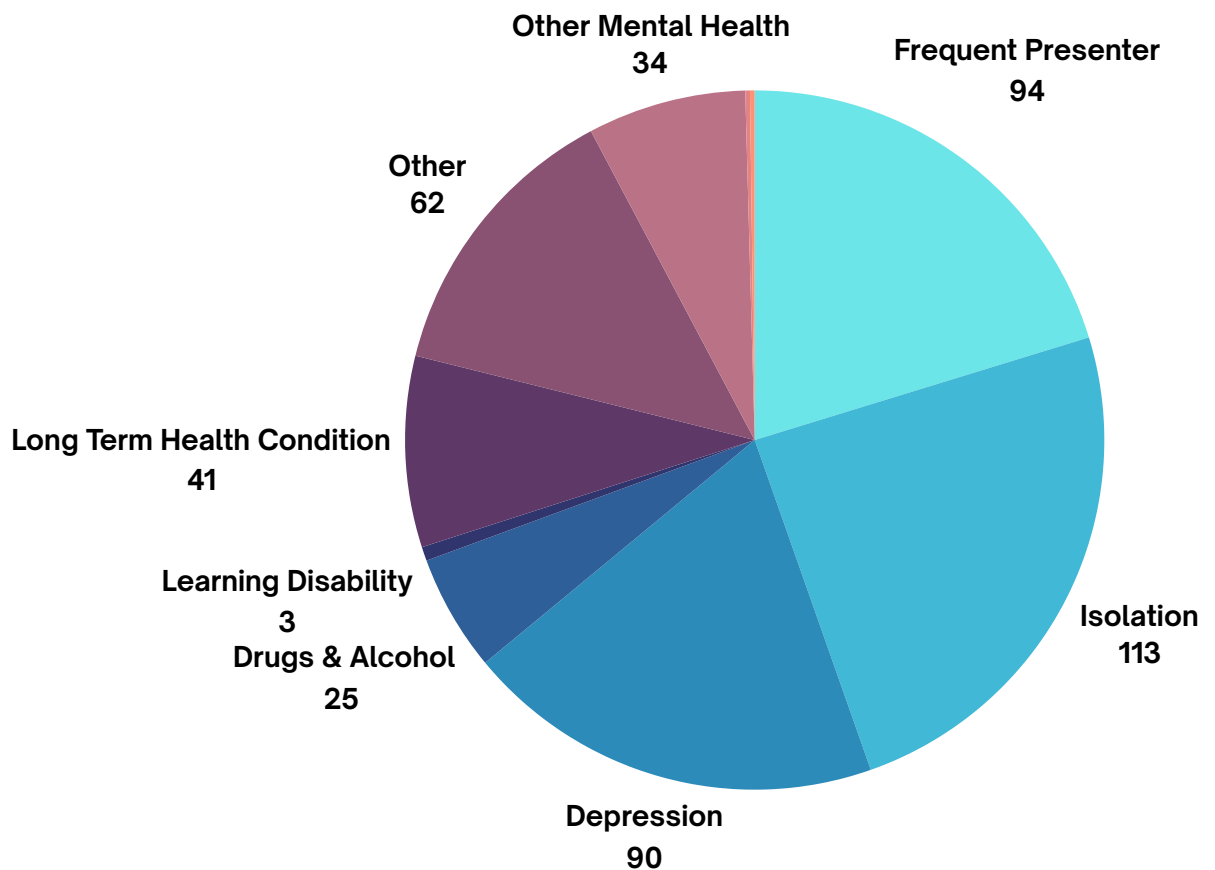


Inside the PCN: Stourbridge & Lye



PRESENTING ISSUES

The top three presenting issues for the PCN were , isolation, frequent presentation at the surgery and depression.



“She went out of her way to help“

“She was ‘thorough’ and Roman ‘quite happily sat there for two hours’ during the assessment and ‘didn’t choose to leave the room’ which has happened in the past with professionals. He ‘chatted very easily to her’.*

Inside the PCN: Stourbridge & Lye



An IP Client has put together a few powerful words around how he feels surrounding his anxiety.

**I wake up in the morning, sunlight's streaming through my room
But instead of feeling warmth, I feel impending doom
Every little noise makes me jump out of my skin
I'm afraid of everything, don't know where to begin**

**I'm afraid of spiders, I'm afraid of heights
I'm afraid of the dark, I'm afraid of lights
I'm afraid of love, I'm afraid of pain
I'm afraid of losing, I'm afraid of gain**

**I check the locks twice before I go to bed
But still, I lay there wide-eyed, thoughts running through my head
What if something's lurking in the shadows of my mind?
I'm afraid of everything, it's got me in a bind**

**I'm afraid of silence, I'm afraid of noise
I'm afraid of slavery, I'm afraid of choice
I'm afraid of failure, I'm afraid of success
I'm afraid of starting, I'm afraid of the rest**

**Anxiety grips me like a vice
Paralyzed by my own device
Every little step feels like a plunge
I'm afraid of living, I'm afraid of lungs**

**I'm afraid of aging, I'm afraid of youth
I'm afraid of liars, I'm afraid of truth
I'm afraid of endings, I'm afraid of starts
I'm afraid of breaking, I'm afraid of hearts**

**I'm afraid of everything, it's my constant refrain
But maybe facing fear, I find a little gain
So I take a deep breath and step into the fray
I'm afraid of everything, but I face it anyway**



Inside the PCN: Stourbridge & Lye

NHS Cost Savings

Following Integrated Plus support:



12 Months

A&E
RUSSELLS HALL
£50,103



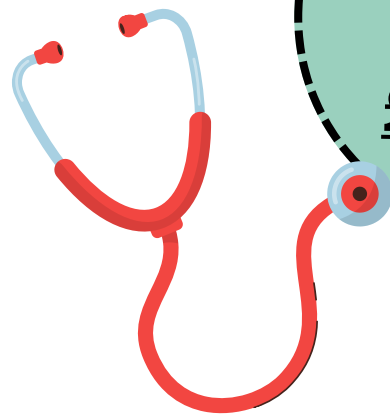
NHS FOUNDATION
TRUST A&E
£47,466



INPATIENTS
RUSSELLS HALL
£137,700



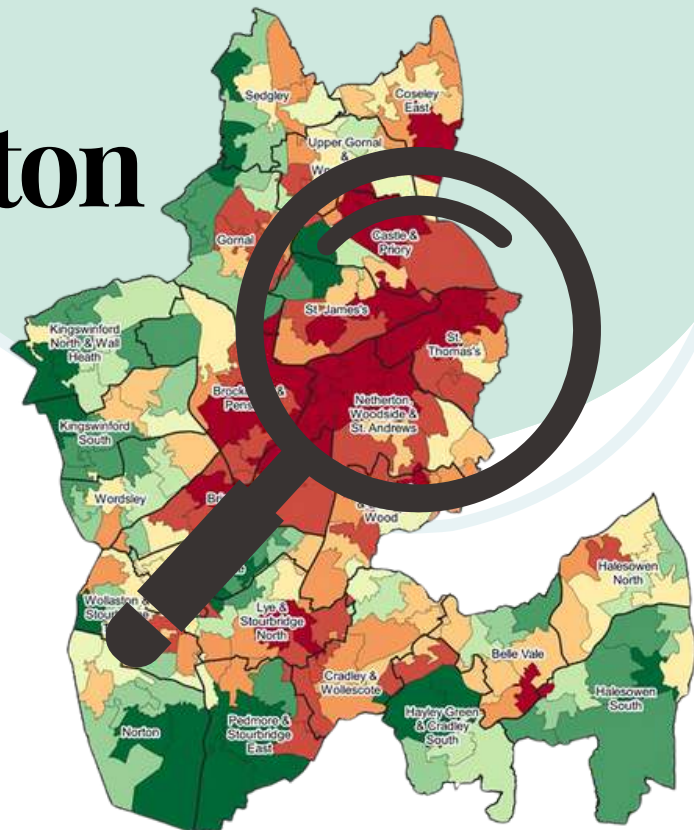
NHS
FOUNDATION
TRUST
INPATIENT
£158,100



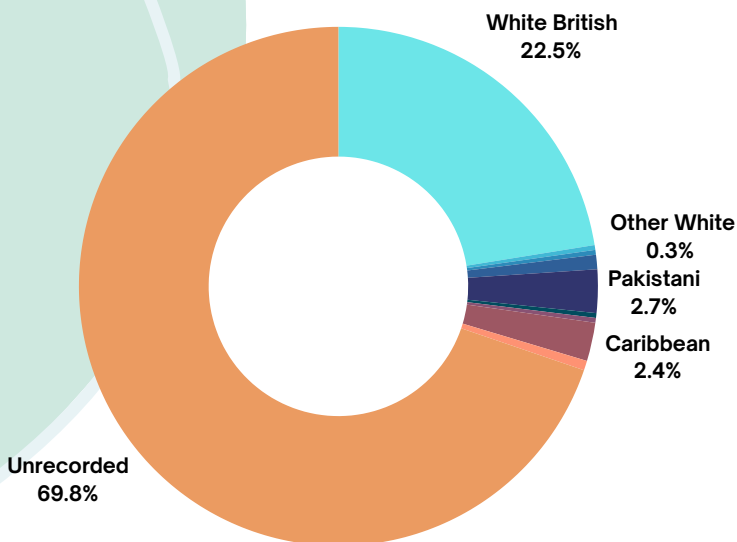
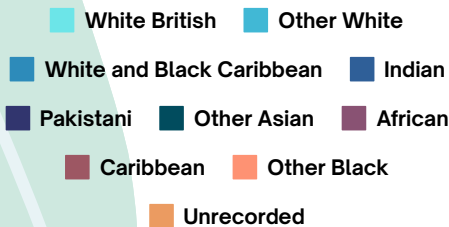
Inside the PCN: Dudley & Netherton

REFERRALS

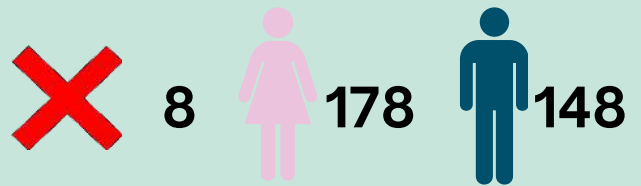
There were 334 referrals made to Integrated Plus within the Dudley & Netherton PCN. Of those 334 referrals, 254 individuals accepted the service. 15 declined, 2 did not access full service, 46 referrals were inappropriate and 14 were unable to contact. 3 were supported by the PCN.



ETHNICITY



GENDER

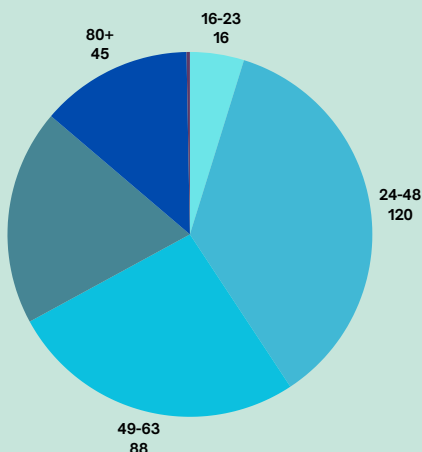


178 referrals were made for females, 148 for males and 8 were not recorded.

AGE



The eldest client to engage is 95 years old.

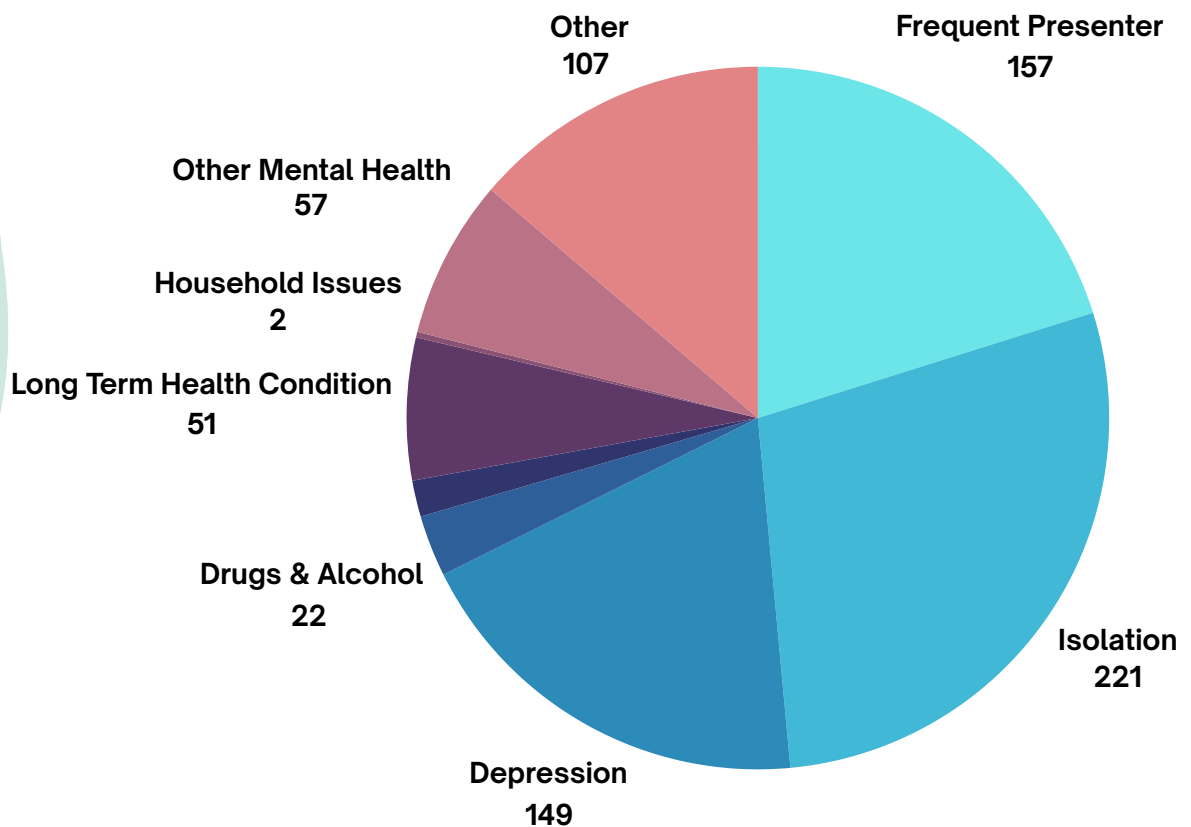


Inside the PCN: Dudley & Netherton



PRESENTING ISSUES

The top three presenting issues for the PCN were , isolation, frequent presentation at the surgery and depression.



*“The ‘list is endless’ of the things she has helped with “
“She ‘goes the extra mile’ and ‘picks up on things quickly””*

Inside the PCN: Dudley & Netherton

NHS Cost Savings

Following Integrated Plus support:



6 Months

12 Months



A&E
RUSSELLS HALL

£48,345

NHS FOUNDATION
TRUST A&E

£51,861

INPATIENTS
RUSSELLS HALL

£44,200

NHS
FOUNDATION
TRUST
INPATIENT

£27,200



A&E
RUSSELLS HALL

£85,263

NHS FOUNDATION
TRUST A&E

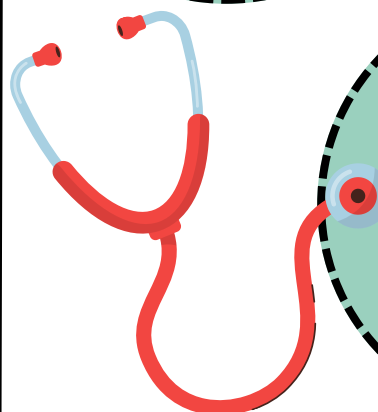
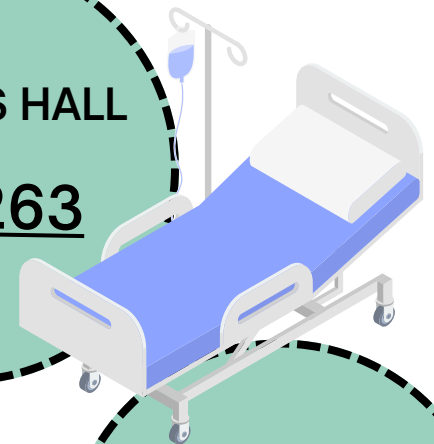
£95,811

INPATIENTS
RUSSELLS HALL

£149,600

NHS
FOUNDATION
TRUST
INPATIENT

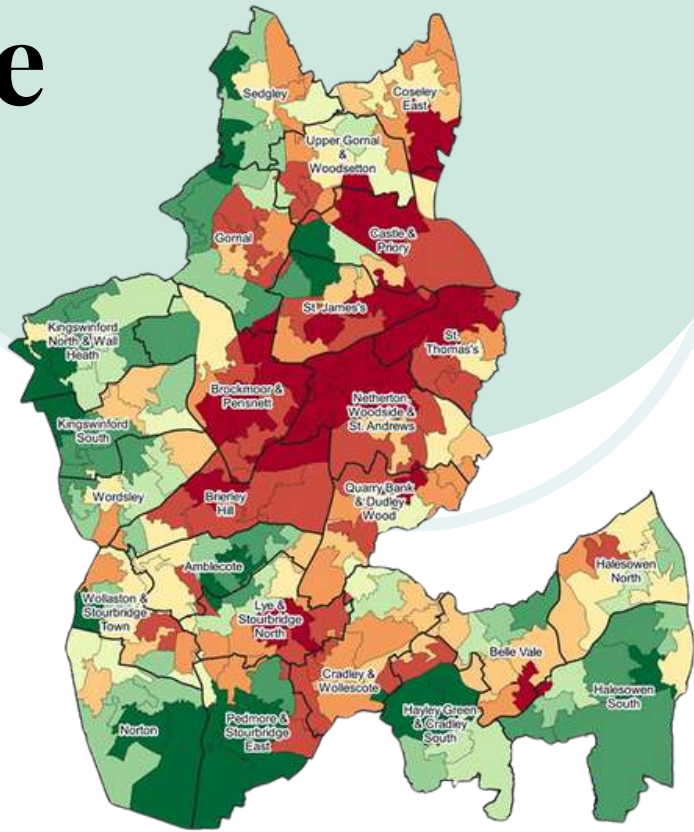
£144,500



High Intensity Use

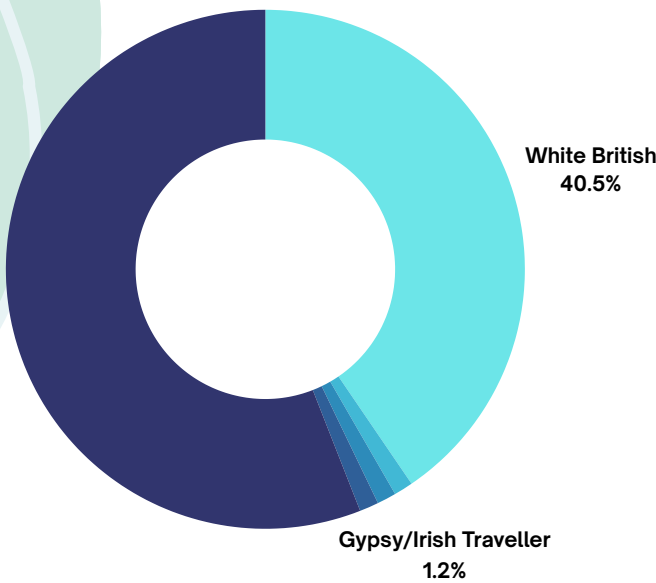
REFERRALS

There were 84 referrals made to Integrated Plus for the High Intensity Use Leads. Of those 84 referrals, 79 individuals accepted the service. 3 declined, 1 did not access full service and 1 was unable to be contacted.

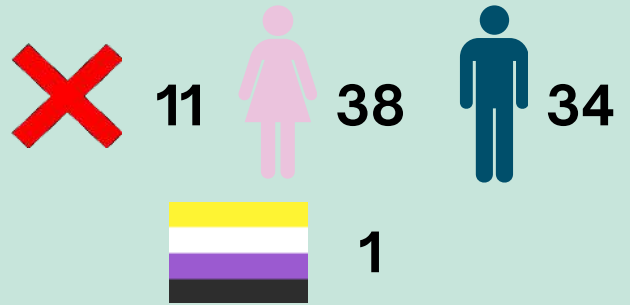


ETHNICITY

- White British
- Gypsy/Irish Traveller
- White and Black African
- Other Mixed
- Not Recorded



GENDER

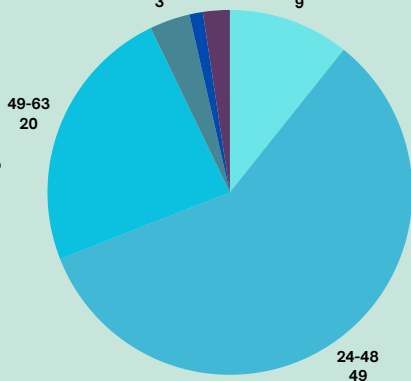


38 referrals were made for females, 34 for males, 11 were not recorded and 1 non binary individual.

AGE

- 16-23
- 24-48
- 49-63
- 64-79
- 80+
- Not Recorded

The eldest client to engage is 87 years old.



Dudley Safeguarding People Partnership
@DudleyDSPP

Last week at our Safeguarding Adults Board we had a presentation from @intplusdudley around High Intensity Users of hospital settings.

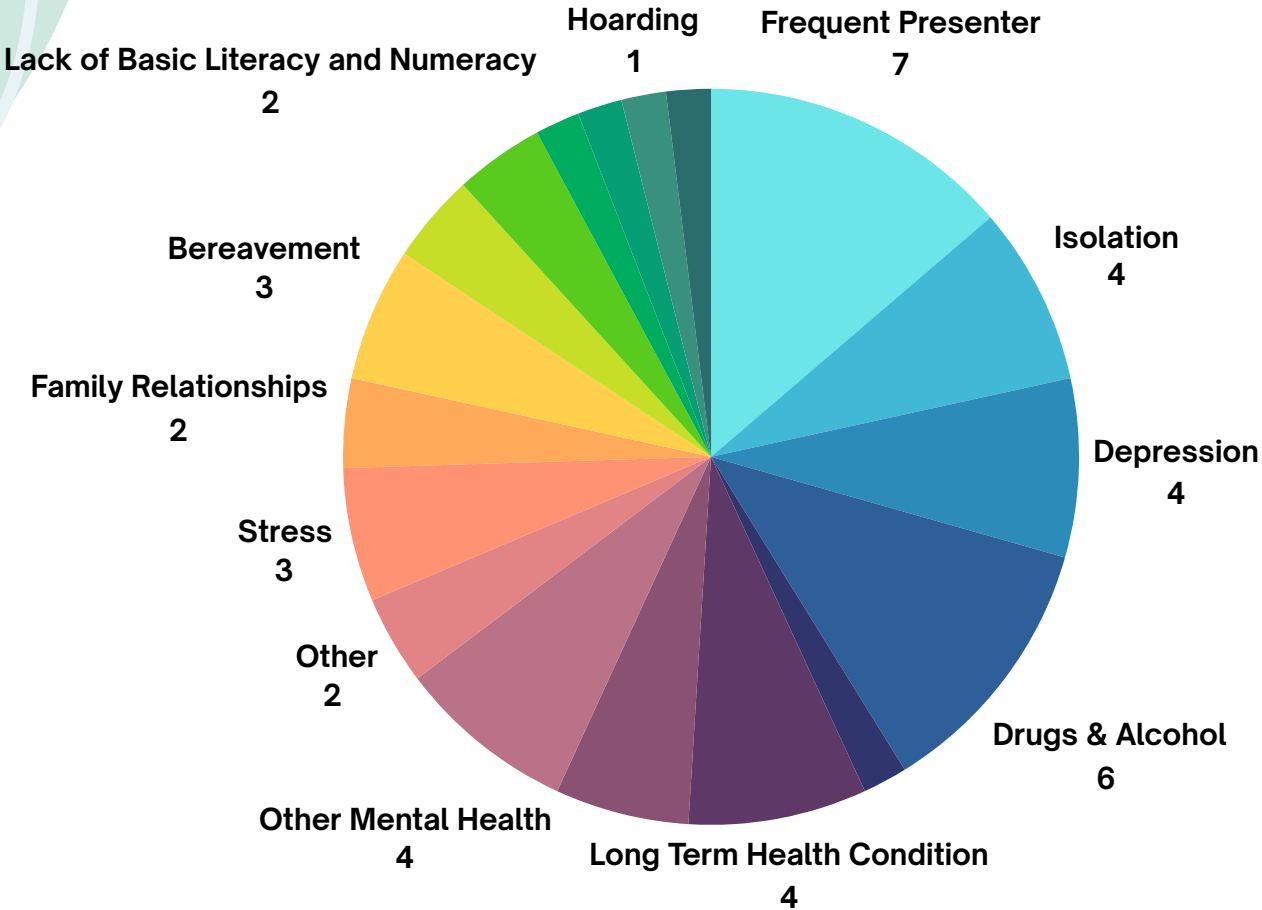
It was great to hear some of the fantastic preventative work that goes on within the Borough.



High Intensity Use

PRESENTING ISSUES

- Frequent Presenter
- Isolation
- Depression
- Drugs & Alcohol
- Learning Disability
- Long Term Health Condition
- Household Issues
- Other Mental Health
- Other
- Stress
- Family Relationships
- Bereavement
- Lack of Basic Literacy and Numeracy
- Debt
- Benefits
- Domestic Abuse
- Hoarding
- Carers Support



High Intensity Use



Bill* was referred into the HIU service due to his frequent attendance to A&E. With over 50 admissions in 12 months, he was one of the Trust's highest attenders. His presenting issues related to substance misuse, relationship breakdown, homelessness and poor mental health. I began working with Bill and identified through his initial assessment that he had a robust network of support, but nothing that addressed his isolation and loneliness. Bill and I met weekly, I supported Bill to attend an alcohol support group held at Russell's Hall Hospital which allowed for the nurturing of relationships between myself and Bill and the Alcohol Care Team.

We would meet in various locations within the community to encourage Bill to leave the house and reduce his isolation. We used the BRIC (Building Resilience in Communities) funding to facilitate Bill attending an Alcoholics Anonymous conference in Blackpool. This conference allowed him to be around like-minded people and supported him on his journey of recovery.

Bill began writing a book about his life story, this too aided his recovery. He recalled the traumatic experiences he had as a child and used the written word to process and heal. The BRIC funding was again accessed to publish his book, which incentivised Bill. He became a sponsor for an individual who accessed support from the Alcohol Care Team at Russell's Hall and supported him to attend AA groups.

Bill's mental health improved, and he completed a 6-month period of sobriety. Recovery is not linear and stressors resulted in Bill engaging in a lapse. This saw a slight increase in unplanned admissions to Hospitals across the borough. The professionals and I took a multiagency approach and held an MDT, with Bill present, to compile a robust post-discharge care plan, with his wishes and feelings at the forefront.

Bill commented that the non-judgemental approach I used has been a key part of his engagement. He advised that previous services were unsuccessful because they were too rigid and that he preferred the flexibility of our service.

Bill has recorded a podcast with me where he talks about his story. To listen please visit [Stream episode Will's Story by Dudley CVS podcast | Listen online for free on SoundCloud](#)

High Intensity Use

NHS Cost Savings

Following Integrated Plus support:



6 Months

12 Months



A&E
RUSSELLS HALL

£174,921

A&E
RUSSELLS HALL

£487,845

NHS FOUNDATION
TRUST A&E

£240,846

NHS FOUNDATION
TRUST A&E

£63,288

INPATIENTS
RUSSELLS HALL

£161,500

INPATIENTS
RUSSELLS HALL

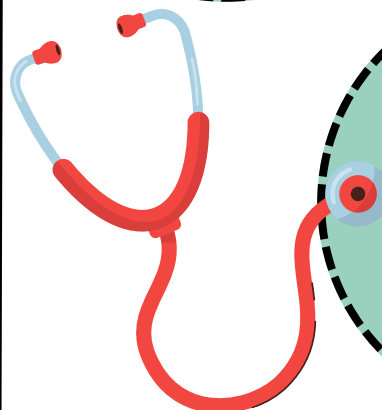
£389,300

NHS
FOUNDATION
TRUST
INPATIENT

£173,400

NHS
FOUNDATION
TRUST
INPATIENT

£426,700



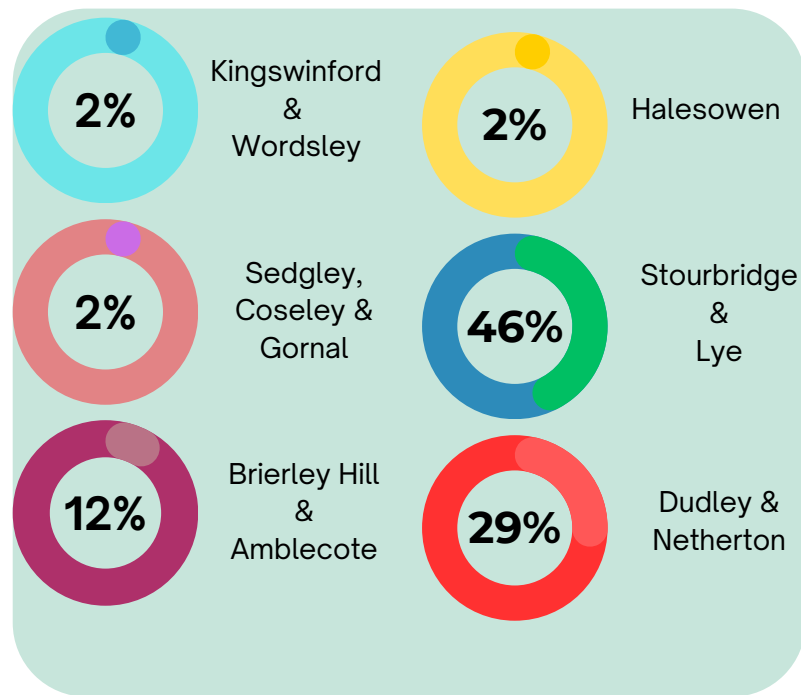
Safeguarding



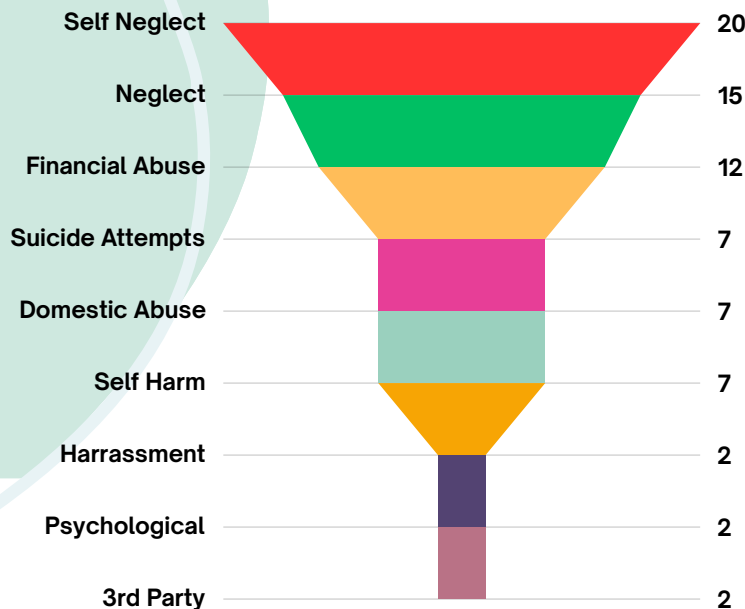
Across the year, 41 records of concern were raised regarding safeguarding by the Integrated Plus team. There were 35 concerns raised regarding adults and 5 regarding children.

Written within the team meetings agenda is a safeguarding discussion. This is an opportunity for the team to discuss live cases that are complex and allows the team to advise and reflect.

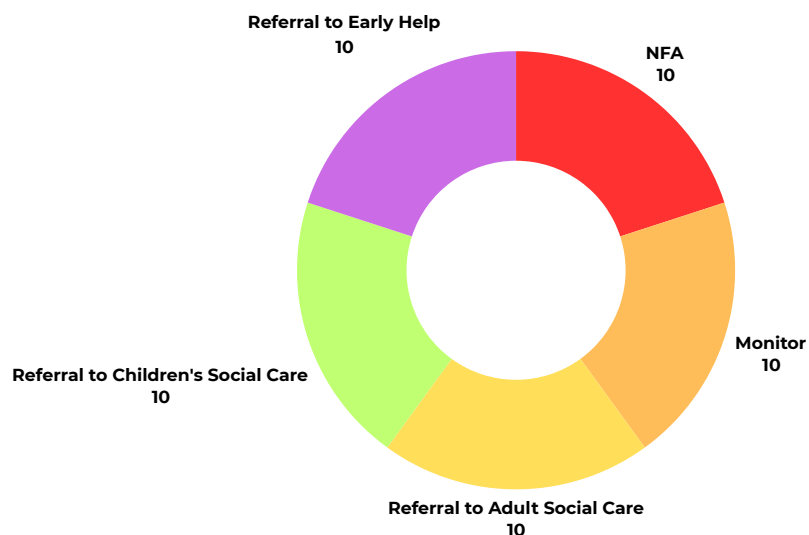
PCN Data



Reason for Concerns:



Outcomes:



Maureen's* Story



Client Overview

Maureen was referred to Integrated Plus with anxiety following an acquired brain injury. An infection of the brain caused the loss of use of her right hand, with limited movement of both legs and an inability to register left from right, making it impossible to use a mobility scooter or wheelchair. Prior to the brain injury, Maureen had been an outgoing, independent lady, who had travelled the world with her job as a sewing machine saleswoman. Now however, her physical limitations have made her frustrated and anxious, desperately trying to regain some independence. Maureen was extremely self-conscious of the pace she walked, worrying about 'holding others up'.

Clients aspirations?

Maureen's aspiration was to be able to travel on her own to places she wanted to go. Maureen retained her fiercely independent spirit and a laudable will to achieve her goals. At the time of assessment, Maureen was only leaving the house when her daughter or a friend took her out. This would be to somewhere like Merry Hill where she could then be seated in a wheelchair and pushed around. Maureen's aims were to do this on her own, or to meet a friend. A constant worry was how she was going to get out of the taxi.

Maureen's* Story



IP Intervention

My work with Maureen began with a home visit, establishing what was realistic for her to achieve and to help to build sufficient self-confidence to take the first steps. Referrals to the Falls Team, Headway, and for a new walking aid were made, as Maureen had not had a new walking aid in 18 years. Information on exercise classes for balance and strength was also provided for Maureen.

After a period of visiting and reassurance, Maureen built up the courage to take a taxi and meet me at the local supermarket. Maureen expressed feelings of anxiousness and apprehension, but also that she felt she needed to do this. Maureen found this very difficult and was very teary when I first met her, but with gentle encouragement I persuaded Maureen to look at her achievement rather than at the barriers she faced, Maureen progressed to feelings of empowerment.

It was apparent on the when we first met that Maureen was struggling to carry her phone and purse either in her coat pocket or hand, making it difficult to use her walking aid. I asked why she didn't have a bag. Maureen disclosed that she felt 'vulnerable' when carrying a bag, 'People can see how disabled and vulnerable I am and may take it.'

A BRIC fund application was made for a hip bag, she was able to put around her waist and under her coat. This freed up her hand, improved mobility and provided reassurance the bag could not be seen.

We continued meeting for several weeks, each time Maureen expressing that she was feeling more and more confident to do this without me. 'I can do this, can't I?' She would say to me.

Maureen's* Story



Impact

The next meeting we arranged was in Merry Hill. This was a huge leap for Maureen and a very challenging one and she became tearful at the magnitude of the task. However, we made it to a coffee shop where we sat and chatted. Maureen disclosed that she felt this trip was a little optimistic. I asked why she felt this was a next step.

Maureen then disclosed that she had been to the local supermarket, independently, and unaided by anyone. She had done what she had set out to do and this had encouraged Maureen to go a little further afield. Maureen had been to the supermarket on two occasions, taken a book and sat in the Café area. “Mission Completed!” Were her words.

Maureen does want to build up to Merry Hill but now acknowledges the difficulties with such a large place. However, this has not stopped her planning other trips and now she wants to attend groups and activities in her area, something she thought she could never do.

Financial Inequalities



Of the 317 local authorities in England, Dudley is ranked 104th in terms of deprivation, with some areas of the borough among the top 10% most deprived.

As part of the teams' efforts to deliver added value we have identified key areas where we can achieve long-term impact. Our work has included elements that address and reduce financial inequalities – a major contributory factor to health inequalities. There is currently little evidence to support the effectiveness of social prescribing in reducing financial inequalities. However, through evaluation we will identify success and learning outcomes and shape the service in the coming year.

112 of our clients accessed our finance welfare drop-in clinics which resulting in £82,664 increased income, this was from benefit entitlement checks, support with claims and appeals. £6000 was distributed amongst 62 clients via our Building Resilience in Communities fund and 45 households were able to access £7,500 from the Household Support Fund. Providing essential provisions like food and fuel. ‘

‘He got me immediate help with funding for my gas and electric bills which took the pressure off me financially’. It was ‘practical, solid help’ which is ‘quite rare’ these days.

Onward Referral Data



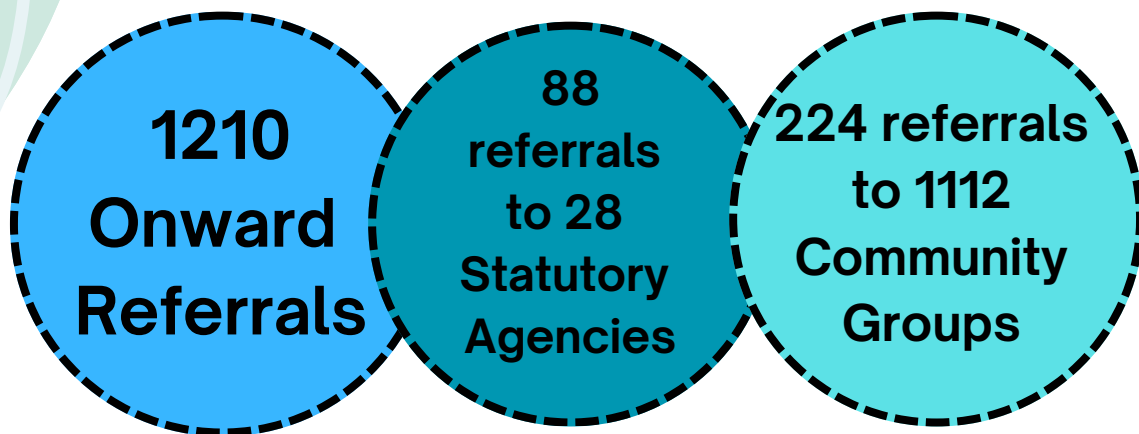
Capacity Building

Building the capacity of Dudley's not-for-profit sector is at the heart of the Dudley CVS mission. We strive to ensure that organisations and individuals have the knowledge, skills and resources they need to operate effectively and sustainably. Though led by our Group Development team, responsibility for this work is shared across Dudley CVS, including Integrated Plus.

Although their work is predominantly focused on individual clients, the team hold a wealth of knowledge about the borough's not-for-profits and can be the first to spot issues related to capacity. They are alive to the pressures groups face from reduced funding and the cost-of-living crisis and are mindful of not overwhelming small groups with too many referrals. They are invested in supporting a thriving not-for-profit sector, ensuring the widest possible suite of options to explore together with their clients.

Onward Referrals

Integrated Plus made 1210 forward referrals to 272 different statutory and community groups. 88 referrals were to 28 statutory organisations and 244 referrals were made to 1122 community groups.



Looking Ahead...

From April 2024 we launch our social prescribing micro grants program - Spring into Action, helping our clients to grow through what you go through. This will enable a wider range of not-for-profit groups to develop projects and contribute to our vision of Dudley as a nurturing, caring, vibrant and strong community. Micro grants will enable small groups to deliver a series of community projects, while open-ended support from our Group Development team will strengthen them organizationally and ensure their longer-term sustainability.

Celebrating Success

Overall cost savings to the NHS made by both Integrated Plus and HIU.



6 Months



A&E
RUSSELLS HALL
£299,739.00

NHS FOUNDATION
TRUST A&E
£389,945

INPATIENTS
RUSSELLS HALL
£606,900

NHS
FOUNDATION
TRUST
INPATIENT
£173,400



12 Months



A&E
RUSSELLS HALL
£743,634.00

NHS FOUNDATION
TRUST A&E
£419,283

INPATIENTS
RUSSELLS HALL
£1,181,500

NHS
FOUNDATION
TRUST
INPATIENT
£1,432,300

