

Social Prescribing MONTHLY REPORT

**MAY
2026**

Working in partnership in
East Lancashire



Social Prescribing is a person-centred, holistic approach to health and wellbeing that connects individuals to non-clinical sources of support within their community.



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What Is Social Prescribing?

Social prescribing offers a way to access non-medical support within the wider community. It connects people with local services, groups, and activities that help address emotional, social, and practical challenges recognising that issues like loneliness, housing problems, or financial stress can all affect our health and wellbeing.

Referrals are open to everyone and can come from schools, councils, health and care professionals or you can refer yourself.

Social prescribing can help people to:

- Build confidence and reduce feelings of isolation
- Manage mild to moderate mental health needs
- Access community services and peer support
- Take part in volunteering, training, or employment
- Improve quality of life and regain independence

By addressing the broader factors that influence health, social prescribing works alongside traditional medical care. It reduces pressure on NHS services, provides early intervention, and empowers individuals to take greater control of their wellbeing.

In East Lancashire, BPRCVS and HRVCVS deliver high-quality social prescribing in partnership with Primary Care Networks (PCNs), the voluntary sector, and other local partners. This work is supported by Integrated Care Board (ICB) and Lancashire County Council Adult Social Care (LCC ASC) funding, and relies on the strength and diversity of our local community groups.

21,246

Total number of referrals since commencement.

Includes HRVCVS figures from Jan 2020 to March 2020 and again from March 2022 excluding May 2022.

8,179,710

Approximate saving in GP appointment costs

Average GP = £64 per patient per 10-minute face to face appointment.

Average 6 visits per patient = £385 x 21,246 patients.

NB: this is GP time only taken from <https://www.pssru.ac.uk/pub/uc/uc2020/2-communityhcstaff.pdf> and does not take into account all other NHS services, other statutory services, etc.

254,952

Hours of SP Support

(Average of 2 hours per session x 6 sessions x 21,246)

This photograph is from one of the groups supporting the Social Prescribing Programme, Anne's Crafty Crop - the beautiful cards and bookmarks they made at one of their sessions.

Meet The Team!



Lynne Hargreaves-Walker
Health & Wellbeing
Programme Manager



Tracey Noon
Operations
Manager

Burnley



Louise Howorth
Social Prescribing
Linkworker (BE)



Vicky Ogretmen
Social Prescribing
Linkworker (BE)



Lois Metcalfe
Social Prescribing
Linkworker (BE)



Christina Howarth
ASC Social Connector



Carol Driver
Social Connector



Joanne Green
Social Connector



Annie Anderson
ASC Social Connector
Holding all areas

Pendle



James Smith
Social Prescribing
Linkworker (PE)



Amy Whitham
Social Prescribing
Linkworker (PW)



Zoe Bell
Social Prescribing
Linkworker (PW)



Ummul Fayyaz
Social Prescribing
Linkworker (PW)



Pam Bailiff
Social Prescribing
Linkworker (PE)



Farrah Rafiq
Social Connector



Rebecca Hayworth
ASC Social Connector



Mandy Richardson
Social Connector

Rossendale



Jonathan Sheriff
Social Connector



Julie Heywood
ASC Social Connector

Group & Volunteer Support Team



Heather Starkie
Funding Co-ordinator



Rebecca Nolan
Group Support &
Training



Julie Overson
Project Support



Salma Liaqat
Admin Support



Lorna Powell
Admin Support



Caroline Littleworth
Volunteering & Group
Support Co-Ordinator



Kim Procter
Volunteering for Wellbeing &
Community Hub Project Support
Worker

Children & Young People Team



Sammie Taylor
Social Prescribing
Linkworker – C&YP
(PW)

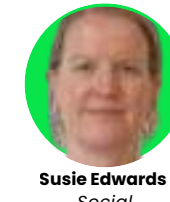


Sania Farzana
Social Prescribing
Linkworker – C&YP
(PW)
currently on maternity
leave

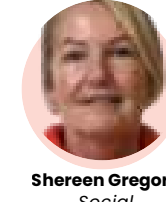


Sylvia Pickles
Social Prescribing
Linkworker – C&YP (PE)

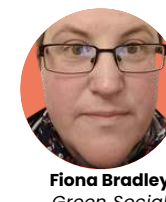
Hyndburn & Ribble Valley



Susie Edwards
Social
Prescribing Lead



Shereen Gregory
Social
Prescribing
Linkworker



Fiona Bradley
Green Social
Connector



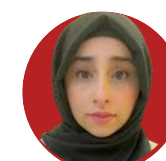
Julie Mallinder-Smith
Social
Prescribing
Linkworker



Dorothy Parsons
Project Support



Zoe Mount
Social
Prescribing
Linkworker



Maria Malik
Social
Prescribing
Linkworker



Chelle Simpson
Social
Prescribing
Linkworker



Ian Targett
Social
Prescribing
Linkworker

Burnley

451

**Referrals So Far
This Year**

19

**New Connector
Referrals**

18

**Closed Connector
Cases**

46

**Current/Active
Connector Cases**

78

**New Linkworker
Referrals**

66

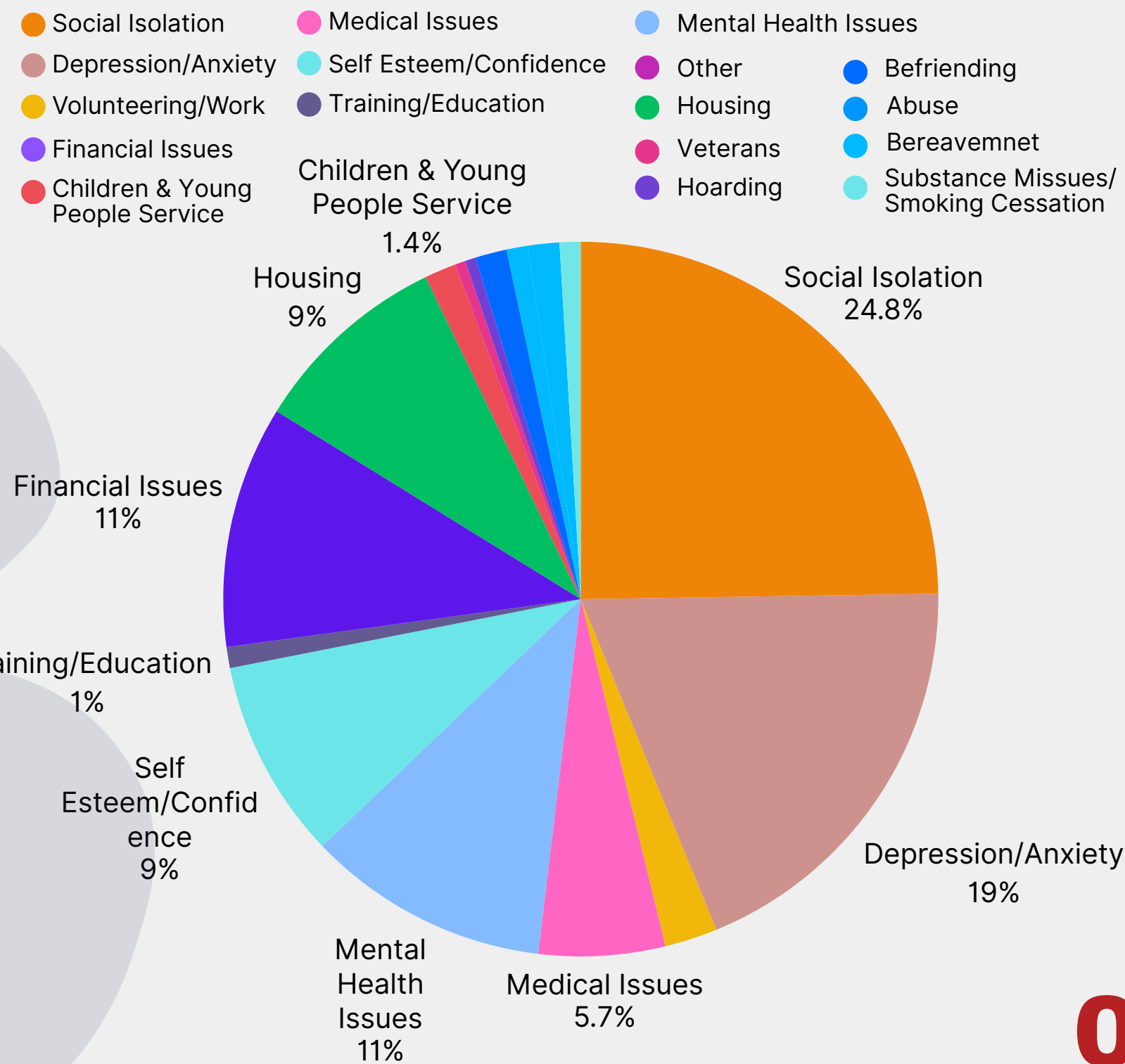
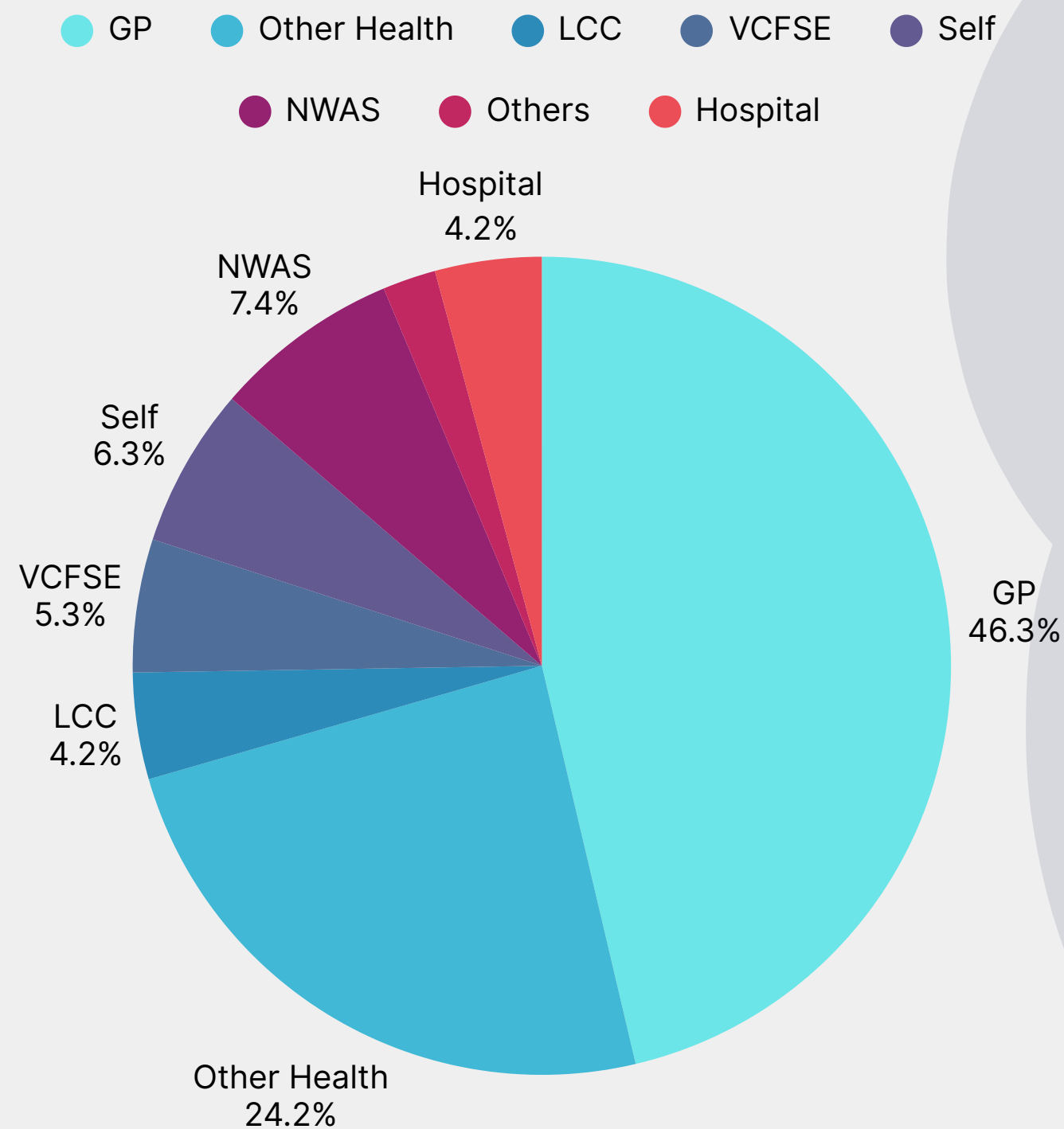
**Closed Linkworker
Cases**

79

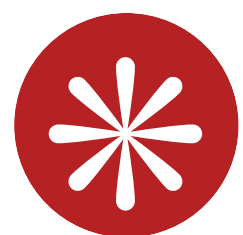
**Current/Active
Linkworker Cases**

Burnley Referrals From

Supporting People With



Burnley Group & Volunteer Support Team



Burnley		Group Support
Supported	36	Unique Groups
Support Given	51	Hours of Group Support
SP Team Attended	61.5	Hours of Meetings
SP Team Attended	7.5	Hours of Training
SP Teams Referred into	42	VCFS Organizations
SP Teams Referred into	20	Statutory Organisations
Burnley		Volunteering
Enquiries Recieved	17	Individuals
Signed up for Training	4	Individuals
Currently Volunteering	39	Individuals

East Lancashire is very lucky to have ICB funding for small community organisations – without which our SP Team would not have any destinations for the people we help.

As well as supporting individuals the SP locality teams work closely with the wider BPRCVS & HRVCVS Teams to support vital community groups who provide the valuable services that support the people we support.

Burnley

Ben: “If you look up to the mountains you will always see the sunlight”

Background of Client

Client is a man in his 40’s who has physical health issues and a medical condition which means he is visually impaired and he has recently been registered blind. He also has a diagnosis of Bi-Polar Disorder and depression & anxiety.

Initial Assessment and Support Provided

In my initial meeting with the client, he said due to his health conditions and losing his sight he has had to give up work and he had lost confidence in going out due to fear of tripping and falling. His wife works most days and so he said he is in the home alone a lot and said he feels depressed and sometimes stays in bed all day. He was struggling with ADL’s and wasn’t cooking or eating properly.

I referred him to ASC for some support during the day, and I also referred his wife to Carers Link as she was feeling the strain with working full time and caring for her husband.

I gave him information for Pendleside meals on wheels, Burnley Blind Society social group, Pendle Sight Loss support group, Diabetes peer support group, Limitless Cycling for exercise and Communicars for transport.

I referred him into the RNIB Eye Care Liaison service at BGH for advice, information and possible equipment to help him.

ONS4	Life Satisfaction	Worthwhile	Happiness	Anxiety
Initial	2	2	3	8
Final	6	6	8	5

Overall Ben’s wellbeing has significantly increased particularly his feelings of happiness thanks to Social Connections

Client Outcomes

RNIB Eye Care Liaison Officer has been in contact, and she has referred him to ROVI and referred him for a low vision assessment, and he has been provided with some equipment to help him.

ASC have completed a financial assessment and are looking to put in a package of care, including a carer to take the client out to social activities.

I met him at the Limitless Cycling session in Thomspen Park, and he had a go on a side-by-side tandem bike with another attendee. He said he really enjoyed it and said will be attending the cycling again.

Client Comment

“Thank you I feel very happy. If you look up to the mountains you will always see the sunlight”

Pendle

442

Referrals So Far
This Year

2

New Connector
Referrals

13

Closed Connector
Cases

23

Current/Active
Connector Cases

59

New Linkworker
Referrals

56

Closed Linkworker
Cases

127

Current/Active
Linkworker Cases

Reporting on behalf of Pendle East PCN

18

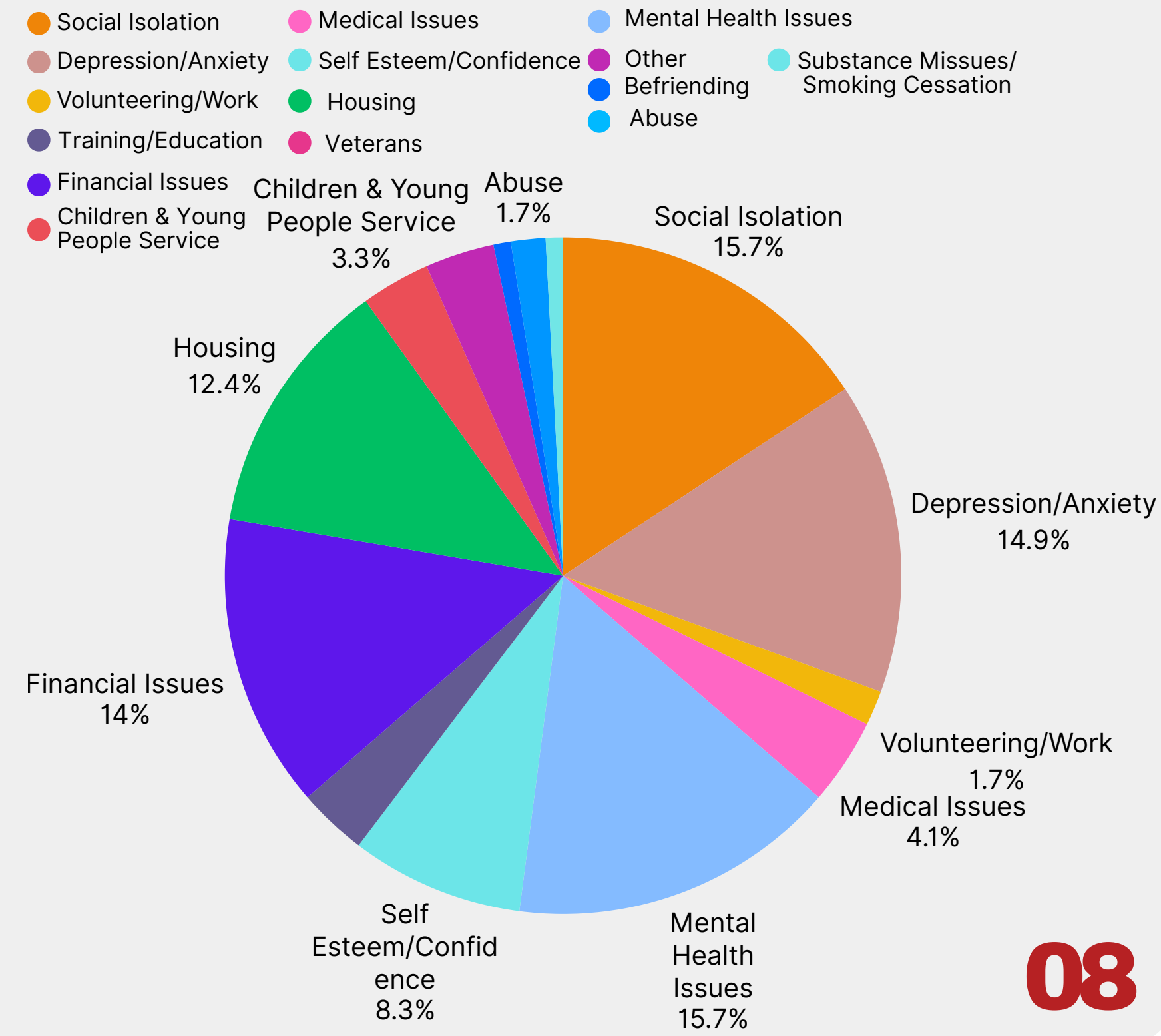
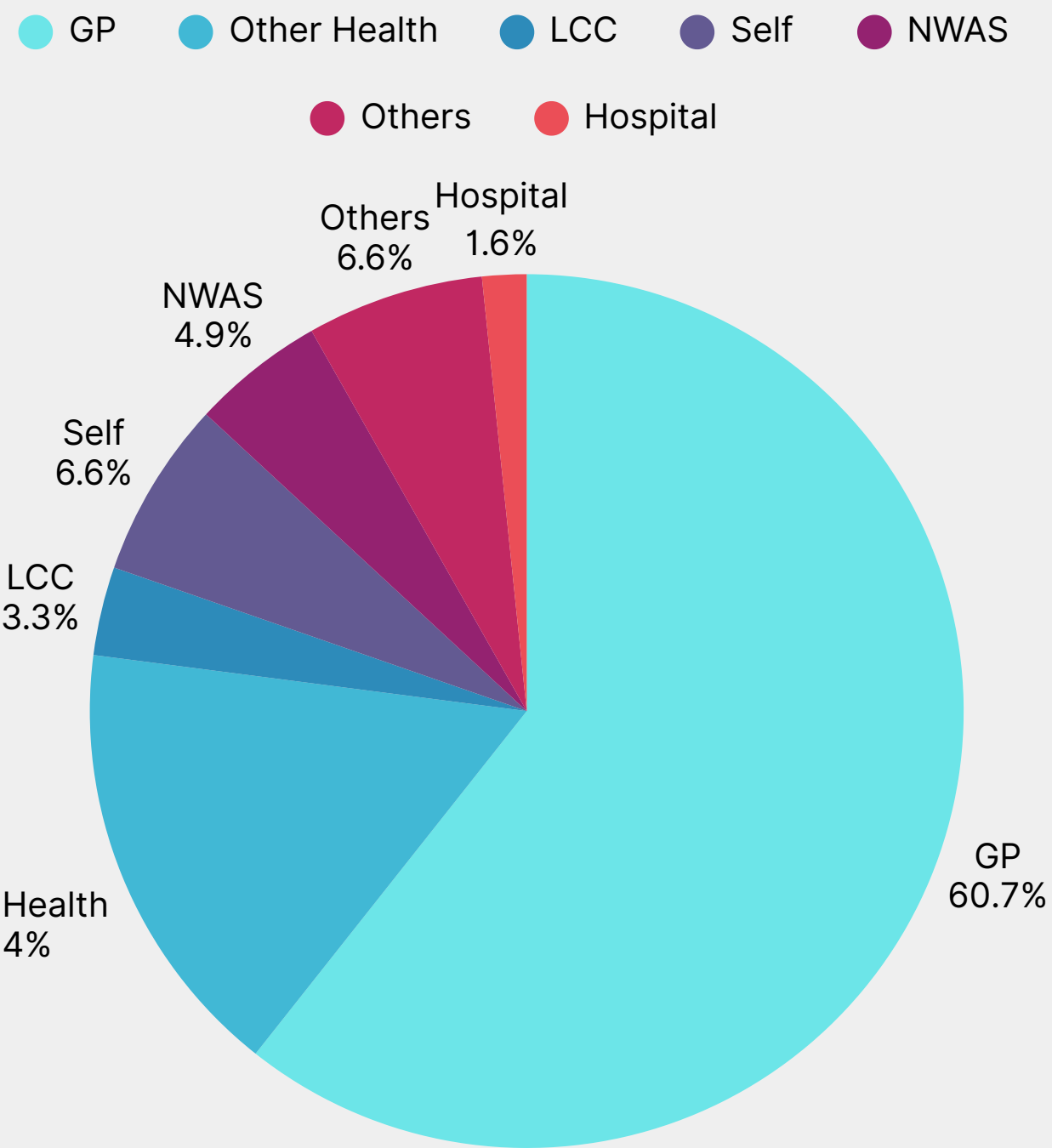
New Linkworker
Referrals

3

Closed Linkworker
Cases

Pendle Referrals From

Supporting People With



Pendle Group & Volunteer Support Team

Pendle		Group Support
Supported	43	Unique Groups
Given	36	Hours of Group Support
SP Teams Also Attended	15.5	Hours of Meetings
SP Teams Also Attended	12	Hours of Training
Sp Teams Referred Into	32	VCFS Organisations
SP Teams Referred into	20	Statutory Organisations
Pendle		Volunteering
Enquiries Received	6	Individuals
Signed up For Training	1	Organisations
Currently Volunteering	5	Individual

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Pendle Paula: “I feel a lot more in control”

Reasons Indicated on Initial Referral

received from GP surgery for support with financial issues. Patient had to decrease working hours due to health and struggling financially. Also living with 3 children in a 2-bedroom private rented property and wanting advice about housing.

Background of Client

Patient suffering with multiple health issues. Has had to reduce hours considerably, as unable to manage and suffering increasing pain and fatigue. Does not want to stop working and could not manage financially if they did. Also living with 3 children in a 2-bedroom private rented property and wanting advice about housing.

Initial Assessment and Support Provided

Patient not currently receiving any benefits but had already applied for PIP. Reluctant to accept support, as wants to remain independent. Struggling to manage bills but has only small debts and these are managed.

- Sent link to Turn2us benefit calculator to check on entitlement.
- Sent link to Turn2us grants search for funding available to her.
- Discussed and sent details of ICANN benefit advocacy.
- Referral to Community Rehab for aids in the home and physio input.
- Discussed mental health. Sent link to NHS talking therapies.
- Referral to Newground for energy saving/switching advice/possible fuel vouchers.
- Signpost to Citizen's Advice website and drop-in sessions for future advice.
- Information on social housing, how to apply and information on banding criteria. Offered support to apply but declined as able to do this themselves.
- Information on long term conditions group with Community Roots.
- Information on food banks and Pendle food for all food club.

Client Outcomes

Patient has received input and equipment after Community Rehab assessment.
ICANN support in place.
Awaiting input from other agencies.

Client Comments

I am so grateful for all your input, I feel a lot more in control and know where to go if I need support with things. Thank you so much.

Rossendale

89

**Referrals So Far
This Year**

25

**New Connector
Referrals**

42

**Current/Active
Connector Cases**

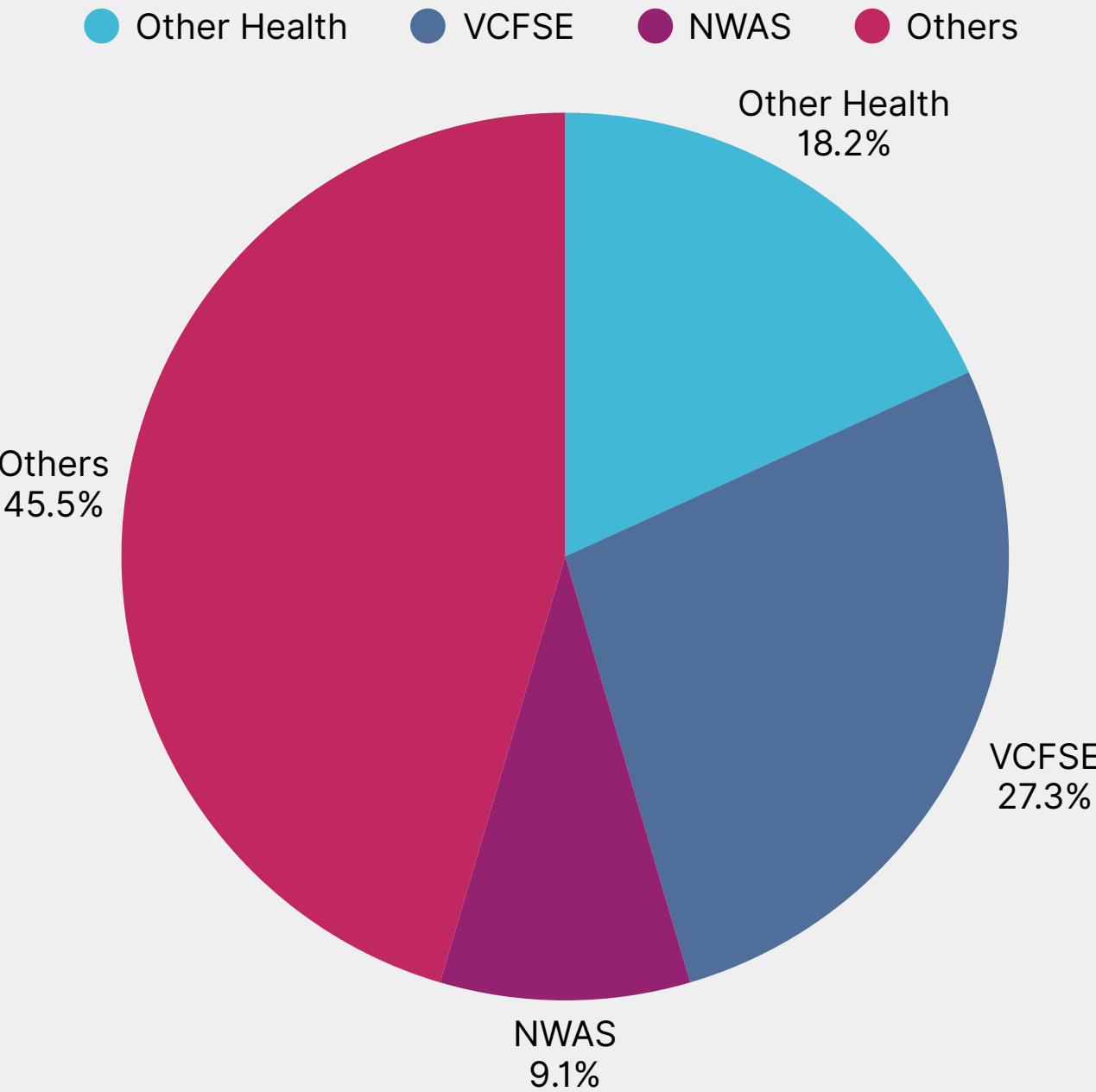


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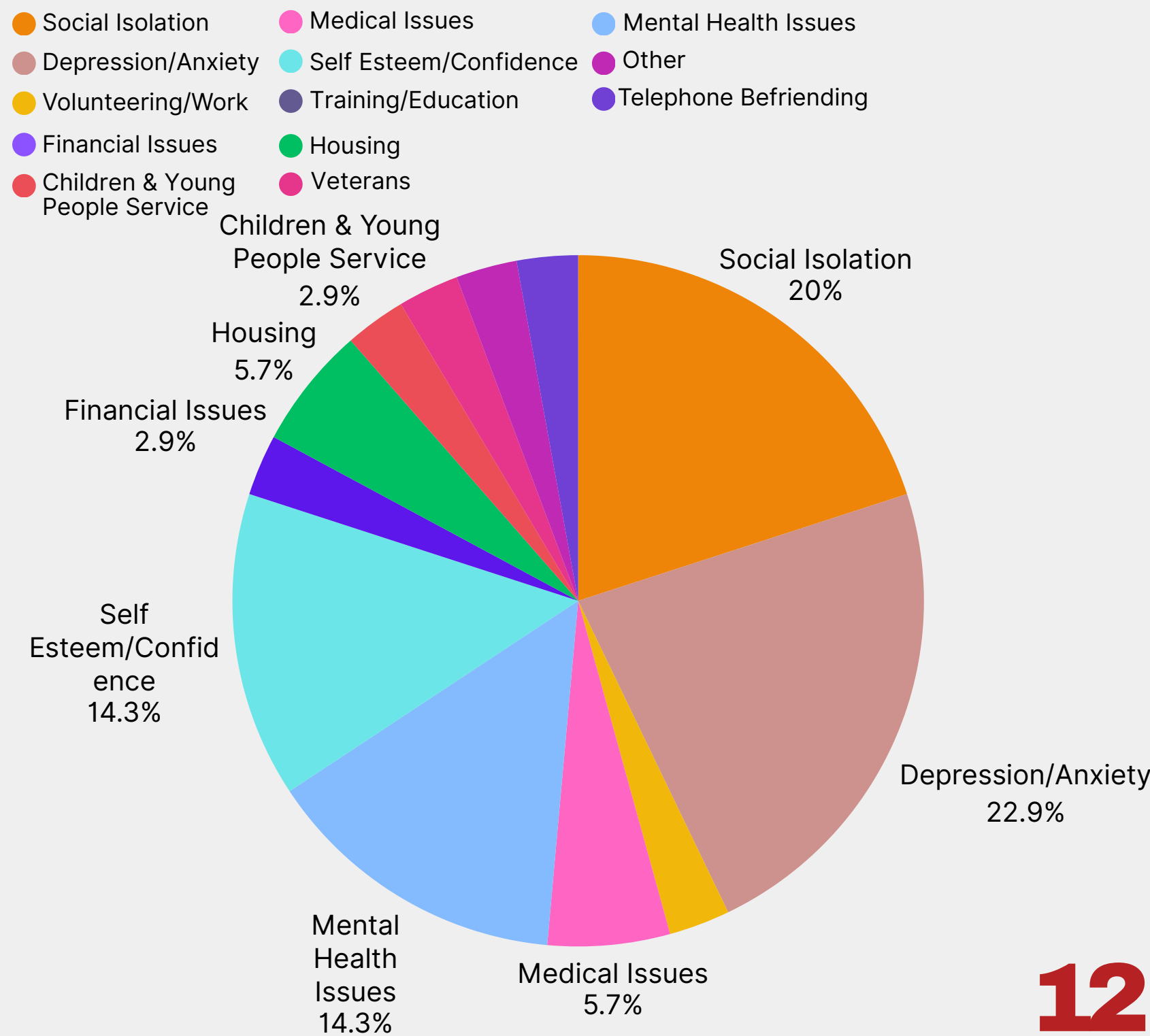
**Closed Connector
Referrals**

11

Rossendale Referrals From



Supporting People With



Rossendale Group & Volunteer Support Team

Rossendale		Group Support
Support	22	Unique Groups
Given	17	Hours of Group Support
SP Teams Also Attended	1.5	Hours of Meetings
SP Teams Referred into	12	VCFS Organisations
SP Teams Referred into	4	Statutory Organisations
Rossendale		Volunteering
Attended Training	1	Organisations
Volunteer Enquiries	2	Individuals
Currently Volunteering	1	Individuals

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Rossendale

Rita: “I feel more optimistic about the future”

Reasons Indicated on Initial Referral

Social isolation following family breakdown. The client wanted support to become more involved in her local community and find activities that matched her interests, particularly animals, horses, and dogs.

Initial Assessment and Support Provided

TA home visit was arranged to explore B's situation in more detail and discuss what support might be most beneficial. During conversations it became clear that increasing social connection and engagement in meaningful activities were key priorities. Support focused on identifying local opportunities that aligned with B's interests. Information was provided about Stable Pals, an equine-based community activity, as well as local walking opportunities in the Waterfoot area. These options offered both social contact and the chance to spend time around animals, which were important to B. Additional practical support was provided around accessing her housing exchange account, including helping her obtain the correct contact details and information needed to regain access to the system. Regular follow-up contact allowed opportunities to review progress, address any barriers, and encourage continued engagement with activities.

ONS4	Satisfaction	Worthwhile	Happiness	Anxiety
Initial	2	2	2	2
Final	6	7	10	1

Rita’s satisfaction with life has increased significantly, as has her feeling of self-worth. Rita is feeling over the moon and she no longer feels anxious thanks to Social Connections

Background of Client

Client (B) is an older woman who had experienced a significant family breakdown, leaving her feeling isolated and uncertain about her future. She was considering moving away from the area and was exploring housing options through a mutual exchange scheme. R described missing regular social contact and wanted opportunities to meet new people and develop a routine that would improve her wellbeing. She had a particular interest in animals and felt that activities involving horses or dogs would be especially meaningful for her. Alongside feelings of loneliness, R was experiencing some practical difficulties relating to her planned move and accessing online housing systems.

Client Outcomes

B successfully attended Stable Pals and reported thoroughly enjoying the experience. The activity provided an opportunity to socialise with others while spending time around horses, helping to improve her confidence and sense of connection. During the period of support, B also re-established contact with her youngest granddaughter, an important and positive development that contributed significantly to her wellbeing. As a result of these improvements, B reported feeling more settled and began reconsidering her plans to leave the area. She had developed new local connections, found an activity she wished to continue attending, and felt more optimistic about her future. The client was informed how to reconnect with the Social Prescribing service should she require support in the future.

BPRCVS Trustees have had to make the difficult decision to pause referrals for all areas for this service apart from Pendle West. Trustees have funded this service for a number of years out of reserves – this could not continue. Pendle West PCN is at the vanguard of providing a social prescribing service for children & young people by funding 2 x 30 hours linkworkers. Please contact tracey.noon@bprcvs.co.uk should you have any questions

Social Prescribing for Children & Young People

Pendle West

43

Referrals So Far This Year

1

Closed

9

New Referrals

35

Current Active

58

Accessing Activities

7

**Accessing Activities
(SEND)**

STOP PRESS * STOP PRES

Burnley East PCN has recently provided funding for a Children's and Young People's SPLW who will be joining us in August - watch this space for introductions!



Although numbers of referrals are relatively low in comparison with the adult SPLWs, the complexity of issues being experienced by the young people (and their families) referred into our service is increasing. This means more time is being spent keeping young people safe and ensuring they have all they need to lead happy, healthy, empowered lives.

Safa's Family:

"I could not have done this without you"

Needs

Client has high anxiety and has built a relationship with C&YP staff – management permission was given for them to support client. Support into volunteering and engaging in the community.

Background

Self-referral, accessed activity with child with our Children and Young People's service and felt that they wanted to volunteer and wanted support in doing this
Client not currently in employment and wanting to support CV through volunteering and also learning new skills.

Outcomes

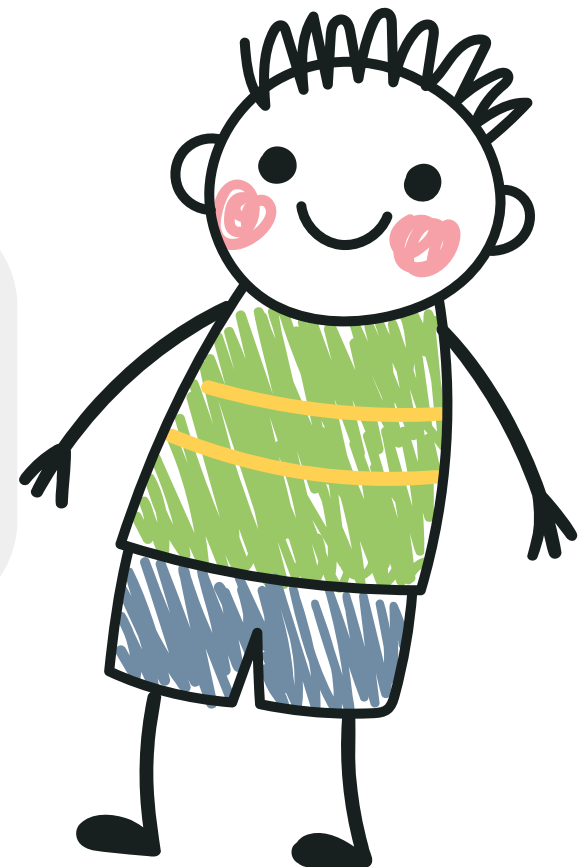
Client has started volunteering with one group and has an induction with another. Client is awaiting a response on a third volunteer opportunity and has signed up to Communicars.

Actions Taken

Supported client in booking onto a volunteering session, shared two other volunteer opportunities and shared details of Communicars.

Comments

It's been helpful it's a helping hand. It has made it easier having your support to access these opportunities. Thank you.



Hyndburn

331

**Referrals So Far
This Year**

134

**Current/Active
Linkworker
Referrals**

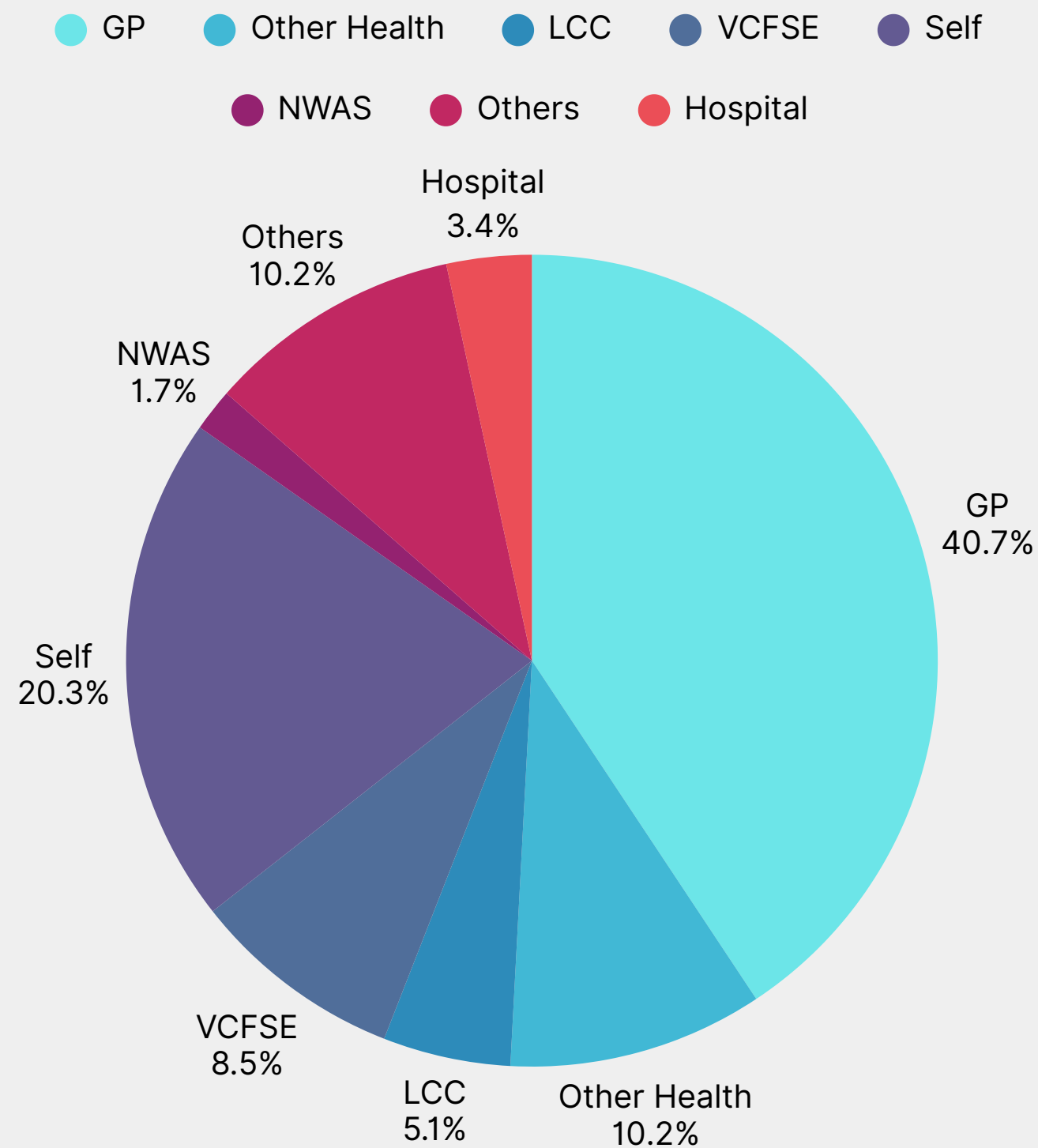
59

**New Linkworker
Referrals**

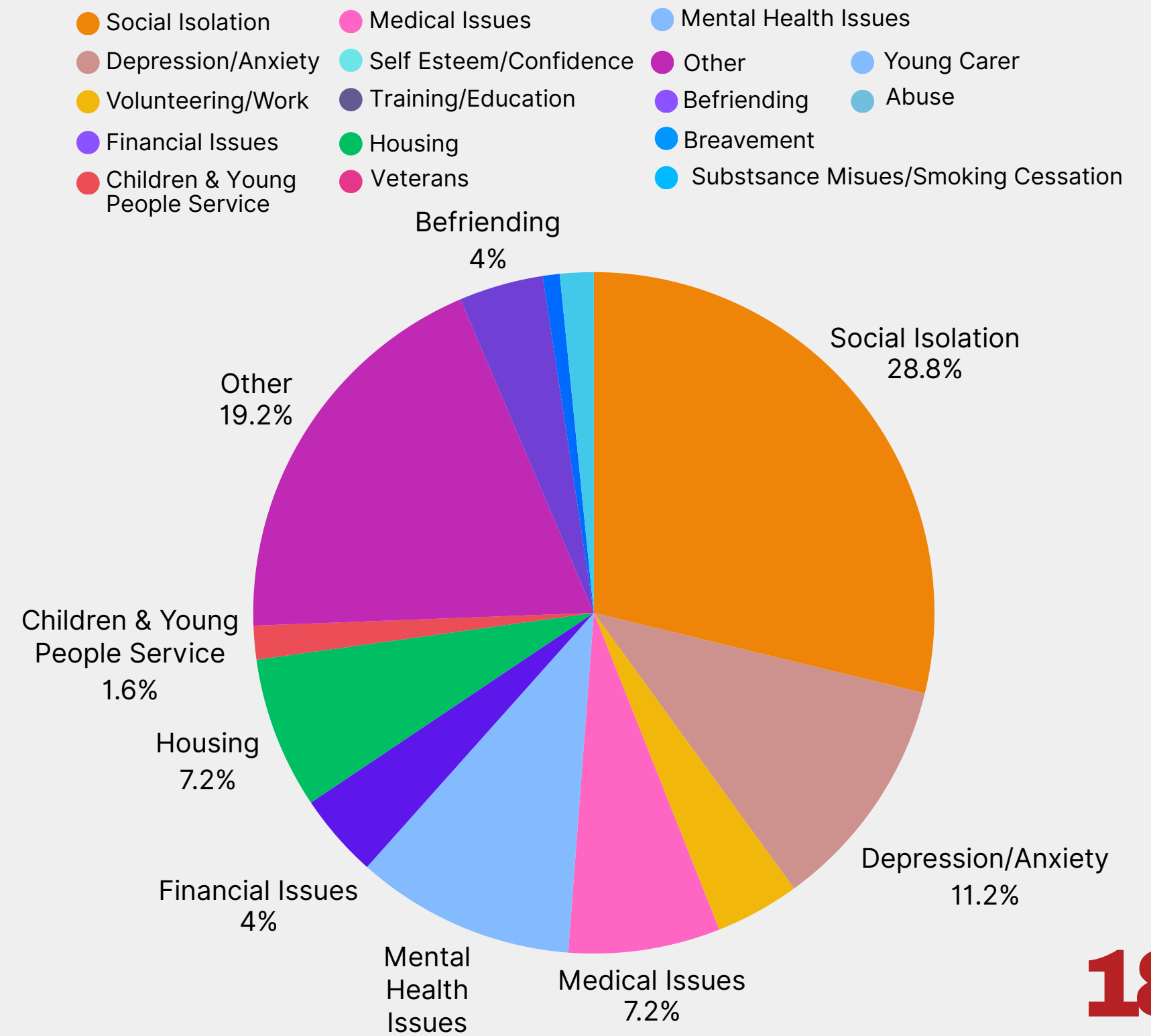
39

**Closed
Linkworker Cases**

Hyndburn Referrals From



Supporting People With



Hyndburn Group & Volunteer Support Team



Hyndburn		Group Support
Supported	12	Unique Groups
Given	20	Hours of Support
SP Teams also Attended	25.5	Hours of Meetings
SP Teams Also Attended	28..5	Hour of Training
SP Teams Referred into	25	VCFS Organisations
SP Teams Referred into	5	Statutory Organisations
Hyndburn		Volunteering
Volunteers	24	Seen or Supported
Volunteer Hours	17	Completed

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Hyndburn

Hanna: “I have everything I need to move forward now”

Reason For referral

A 37-year-old woman referred in by the health and wellbeing coach at her GP practice in Hyndburn. Referral reasons – depression and anxiety, mental health issues and family support.

Initial Assessment Support Provided

Shereen met the client and her mum face to face and they had a long discussion. Shereen gave the client the space to talk about the issues that she felt she was struggling with. She has had lots of stressful situations with family and parenting and has found things very difficult. She was able to talk about lots of different aspects of her life that contributed to the stress. Her mum was very supportive and it was a very constructive appointment, Shereen shared lots of information about different organisations and services who could help and support her and also information about services who could support her son. These organisations ranged from NHS Talking therapies, Lancashire Women, Maundy Relief, Ynot Aspire, Children & Family Wellbeing Service, Strength in Struggles and Kooth. She followed this up to her by email so she could process the information and offered to do any referrals on her behalf. She consented to a referral in Maundy Relief. She was quite upset during the appointment and felt overwhelmed at everything she was dealing with.

Client Outcomes

The follow up from the initial appointment has been positive. Maundy Relief have arranged an appointment to discuss the therapies and counselling that may be available for her and her son. They are also helping her complete her work capability form for DWP. The children and family wellbeing service have also been supporting with her 15-year-old and he is due to move to a different school which will really help her stress as the school he was in was inappropriate for him and causing a lot of worry. She says she feels like someone has listened to her and she is now getting the support that will help her and her boys. She said she feels much happier and more positive after our support and appreciated the check ins offered to make sure she had everything she needs to move forwards. Our knowledge and experience of the services and our connections with the organisations have helped impact the outcomes for this client. Due to the positive working relationships we have with organisations in the community, the client has received good support much quicker than if she had been trying to navigate this on her own. Having somebody to listen as an overview of her whole situation and not just one element of it has helped empower her to improve her situation.

Ribble Valley

198

**Referrals So Far
This Year**

74

**Current/Active
Linkworker
Referrals**

30

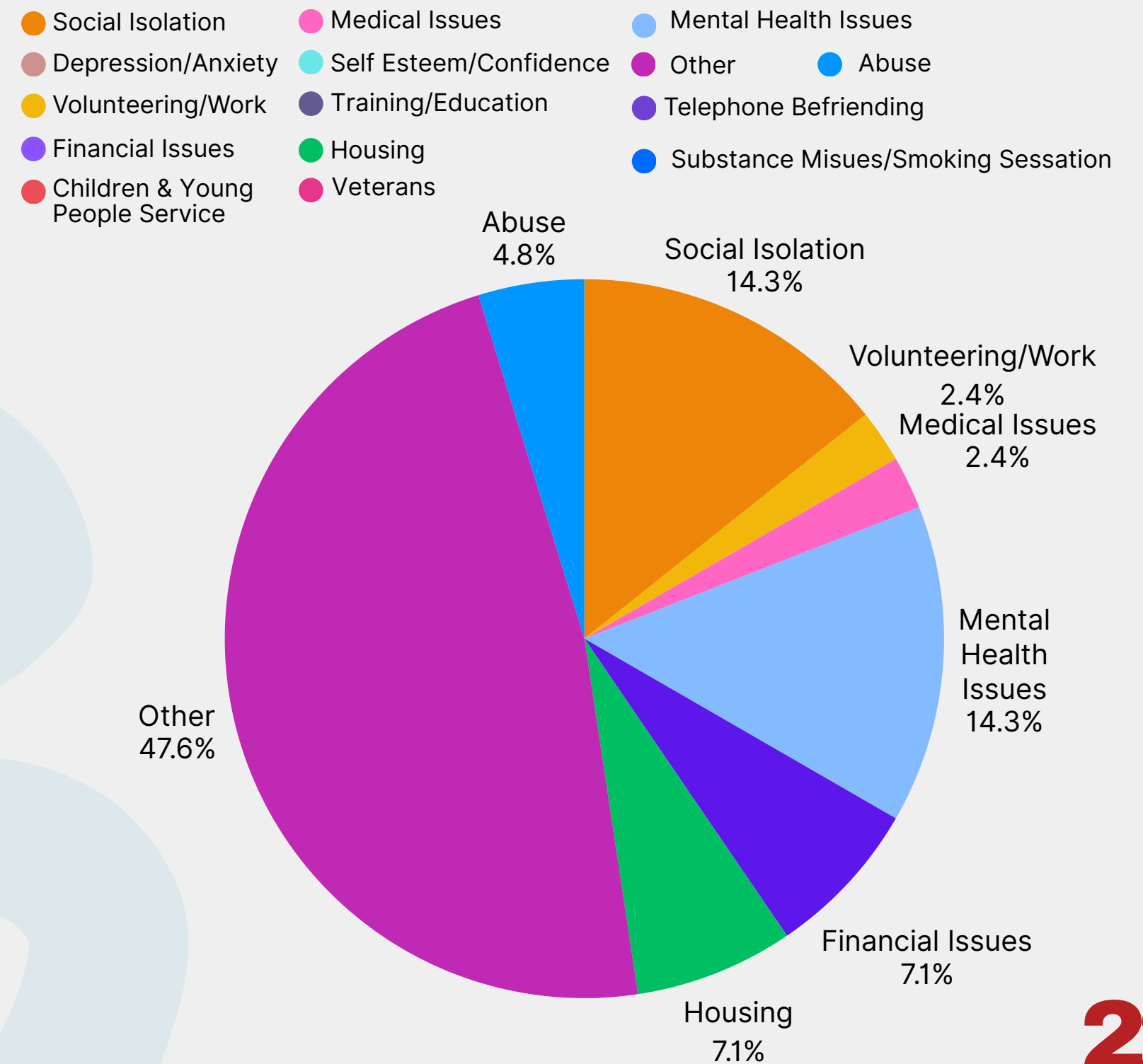
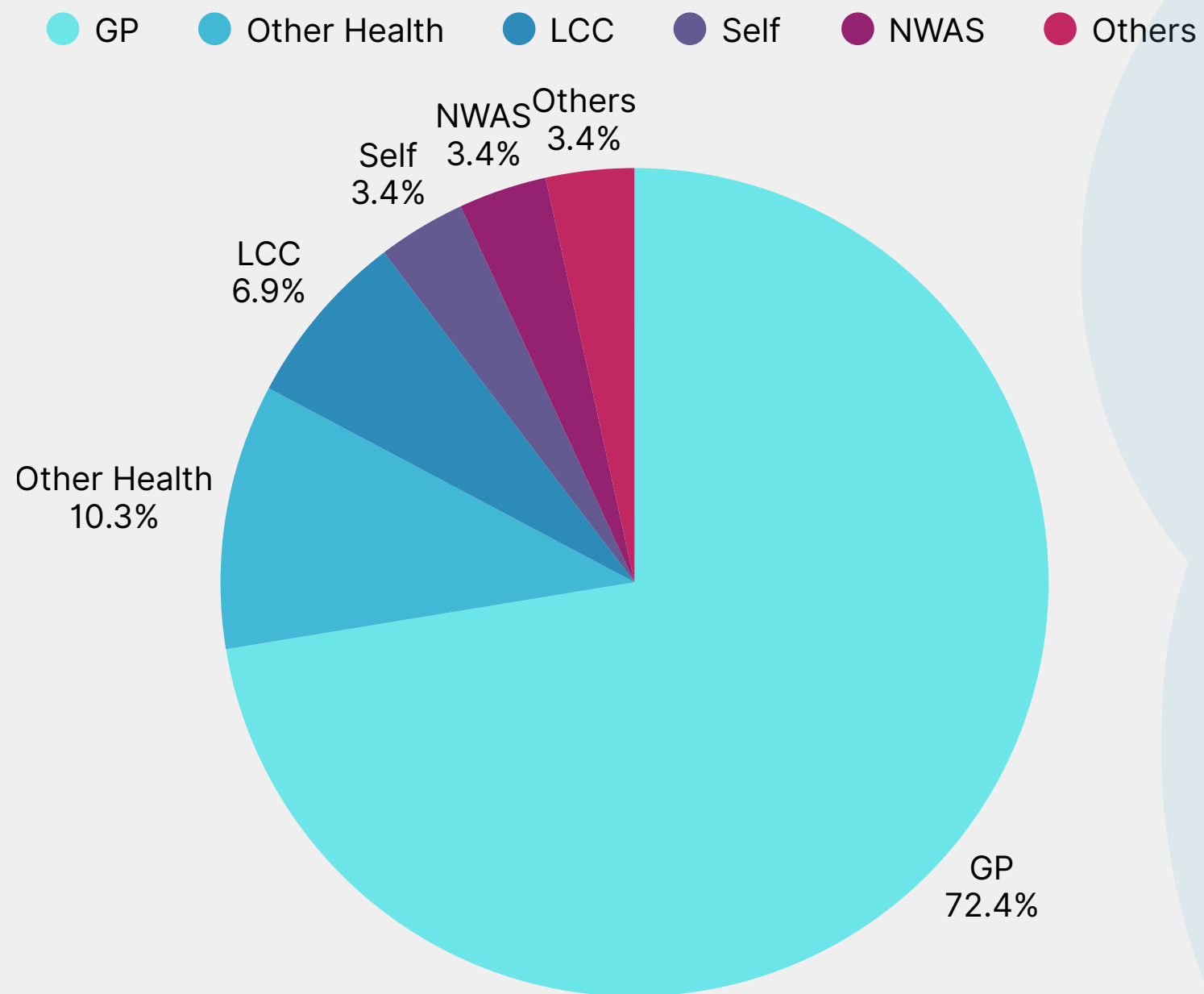
**New Linkworker
Referrals**

30

**Closed
Linkworker Cases**

Ribble Valley Referrals From

Supporting People With



Ribble Valley Group & Volunteer Support Team



Ribble Valley		Group Support
Supported	18	Unique Groups
Given	19.5	Hours of Group Support
SP Teams also Attended	9.5	Hours of Meetings
SP Teams also Attended	21	Hours of Training
SP Teams Referred into	10	VCFS Organisations
SP Teams Referred into	4	Statutory Organisations
Ribble Valley		Volunteering
Volunteers supported	22	Individuals
Volunteers Opportunities	4	Individuals

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Ribble Valley Robert: “I can be me”

Reasons Indicated on Initial Referral

Low self-esteem/confidence, Volunteering, Anxiety, Social Interaction, Groups and Activities

Initial Assessment and Support Provided

Our client had just completed 8 sessions of counselling to help with the adjustment of his son moving out, being more independent and not needing his support as much. Initial meeting held with Client, counsellor and SPLW team at the Warm Hub an informal setting helping make the client feel less anxious. Our client was unsure if he was in receipt of the correct benefits and had recently been struggling towards the end of the month, signposted to The Olive Branch. Further meetings attend by client, a lot of the client's time is taken up with his role as a carer he wanted something for himself, to be part of something, Client spoke of how he enjoyed gardening and DIY, we took time and looked round the Community Garden, which client then signed up to volunteer.

ONS4	Life Satisfaction	Worthwhile	Happiness	Anxiety
Initial	5	5	6	5
Final	7	6	7	4

Overall, Robert’s wellbeing has improved with his life satisfaction increasing significantly thanks to Social Connections

Background of Client

Male aged 62. Was a full-time carer for his adult son, son has become more independent, so client has more time on his hands, he likes to be busy. Also, an informal carer for his partner. Although very sociable client can feel anxious Referral made by Talking Therapies Client is on waiting list for ASD spectrum diagnosis.

Client Outcomes

The client continued to attend the Warm Hub connecting with others in the community until it finished for the summer, he said he will be back in autumn when it starts up again. Client was signposted to the Olive Branch Café for advice in regard to benefits, he also received assistance from the foodbank, client remarked on how supportive the services were and he didn’t feel judged for asking for the help, without the signposting from the service he said he would never have known about the support available. Client met with organisers of the Community Garden, he gave consent and now receives WhatsApp updates and invites keeping him connected to the group.

Client Comments

I feel comfortable and relaxed about attending the Hub, the people are friendly and welcoming, being able to get support and advice in one place made it less daunting. Having somewhere to go and time away from my role as an informal carer is a break, “I can be me”.

Working in partnership using the whole system approach. ✨

