

Case Study

Being seen and heard in later years: Medical and social models working together for wellbeing

Taking the time to listen

Sarah*, a 72 year old woman, was referred to Social Prescribing for support with loneliness. She had had three strokes previously and was a widow with no family living locally. Sarah was unable to walk to the local town and had lost her confidence to go on her scooter following her last stroke. She had become very isolated and was not leaving the home.

Sarah was concerned that family were having to travel a long way to see her and take her to hospital appointments in Birmingham and she was concerned they would start to resent helping her.

Sarah wanted to get out and see people again but was very anxious about where to start.

What matters to you

Sarah wanted to re-connect with people, other than her family and wanted to travel to hospital appointments without her son having to continuously take time off work (Sarah was concerned this may jeopardise his employment).

Making Connections

The Social Prescriber provided information about the local transport scheme, their cost, criteria and local weekly trips they were running. She also talked and listened to Sarah to find out what mattered to her and what she was interested in.

Sarah had a love for knitting and using her hands, and she wanted to try to continue this as she thought it would help her recovery from her more recent stroke.

Herefordshire Primary Care Networks SOCIAL PRESCRIBERS

Working alongside GP Surgeries to offer patients access to non-medical support within their local community

Case Study (2)

Enabling and reducing barriers

The Social Prescriber, with Sarah's consent, spoke to a local café owner who runs a knit and natter group. Sarah did not feel confident doing this herself at this stage. The Social Prescriber found out what the group was like, the people who attended, times and if transport was available.

In the small rural community where Sarah lives, it was perhaps no surprise that the café owner already knew Sarah. She shared information about others attending who Sarah would know and who might be able to offer her a lift.

This information was relayed to Sarah so she could think about what she would like to do before her next appointment with her Social Prescriber.

Empowering you to improve your health and wellbeing

“

I have been lost, but now I feel I have my place back in the community. I missed that.

By the time of her next appointment with her Social Prescriber, Sarah had booked community transport for her hospital appointment. She found that she knew the driver and was excited to talk to them again.

Sarah had spoken to a neighbour about the knit and natter group. The neighbour was also interested and offered to drive her there. Both attended and had a very enjoyable time knitting and catching up on local gossip.

Sarah now uses community transport for hospital appointments and shopping trips weekly. The neighbour she attended the knit and natter group with also now takes her for a coffee at the local garden centre once a week. From someone who did not go out at all, Sarah is socialising more than three times every week.

Loneliness can have a huge impact on physical and mental health. Sarah believes her health has improved from socialising and reducing her loneliness. She says: “I have been lost, but now I feel I have my place back in the community. I missed that.”

Herefordshire Primary Care Networks
SOCIAL PRESCRIBERS

Working alongside GP Surgeries to offer patients access to non-medical support within their local community

* Not client's real name