

Development of a primary care-based toolkit to improve engagement with green social prescribing of older patients living in deprived areas (“Deep Green”)

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BACKGROUND

- Health inequalities are widening in the UK.
- In Scotland there is a 25-year gap in healthy life expectancy between the most and least deprived deciles of the population.
- Green Social Prescribing (GSP) is a key policy response but its provision in Scotland is inconsistent. An information resource (“digital toolkit”) could facilitate engagement with GSP in primary care.
- Targeting people aged 50+ living in deprived areas for referral to GSP holds potential to mitigate health inequalities by improving the health and wellbeing of this group.

AIM

To develop a ‘digital toolkit’ to support referral to GSP in primary care for people aged 50+living in deprived areas.

METHODS

- We used a mixed methods approach, based on MRC guidelines for developing and evaluating complex interventions, and drew on the Six steps in quality intervention development (6SQUID) tool.
- A co-design workshop and stakeholder interviews were used to inform development of the digital toolkit.
- A state-of-the-art scoping review was used to identify key barriers, facilitators and pathways in recent GSP implementations.
- Thematic analysis of the review and interview data drew upon a socio-ecological framework model of processes at micro-, meso-, and macro-levels.



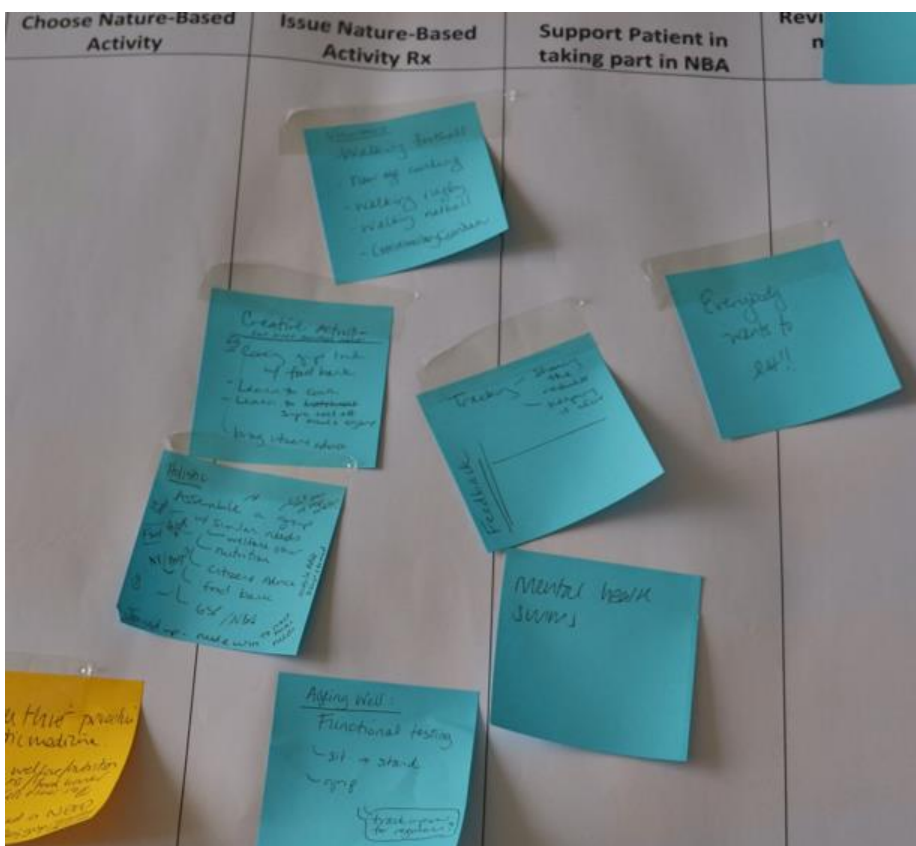
RESULTS

Workshops and Interviews

- Workshop (n=20)

  - GPs: 6 (5 GPs, 1 practice manager)
  - Link workers: 6
  - Providers: 4
  - Commissioners/managers: 4
- Interviews (n=20)

  - GPs: 6
  - Link workers: 5
  - Providers: 4
  - Commissioners/managers: 4
  - Patients: 1



Barriers

Facilitators

Lack of local, appropriate green spaces  
Lack of access to more distant spaces  
Costs to participate  
Worries over risk & safety  
Cultural stereotypes

Options for solo or group activities  
Positive attitude towards nature  
Reconnection with childhood memories  
Empowerment through receiving a prescription

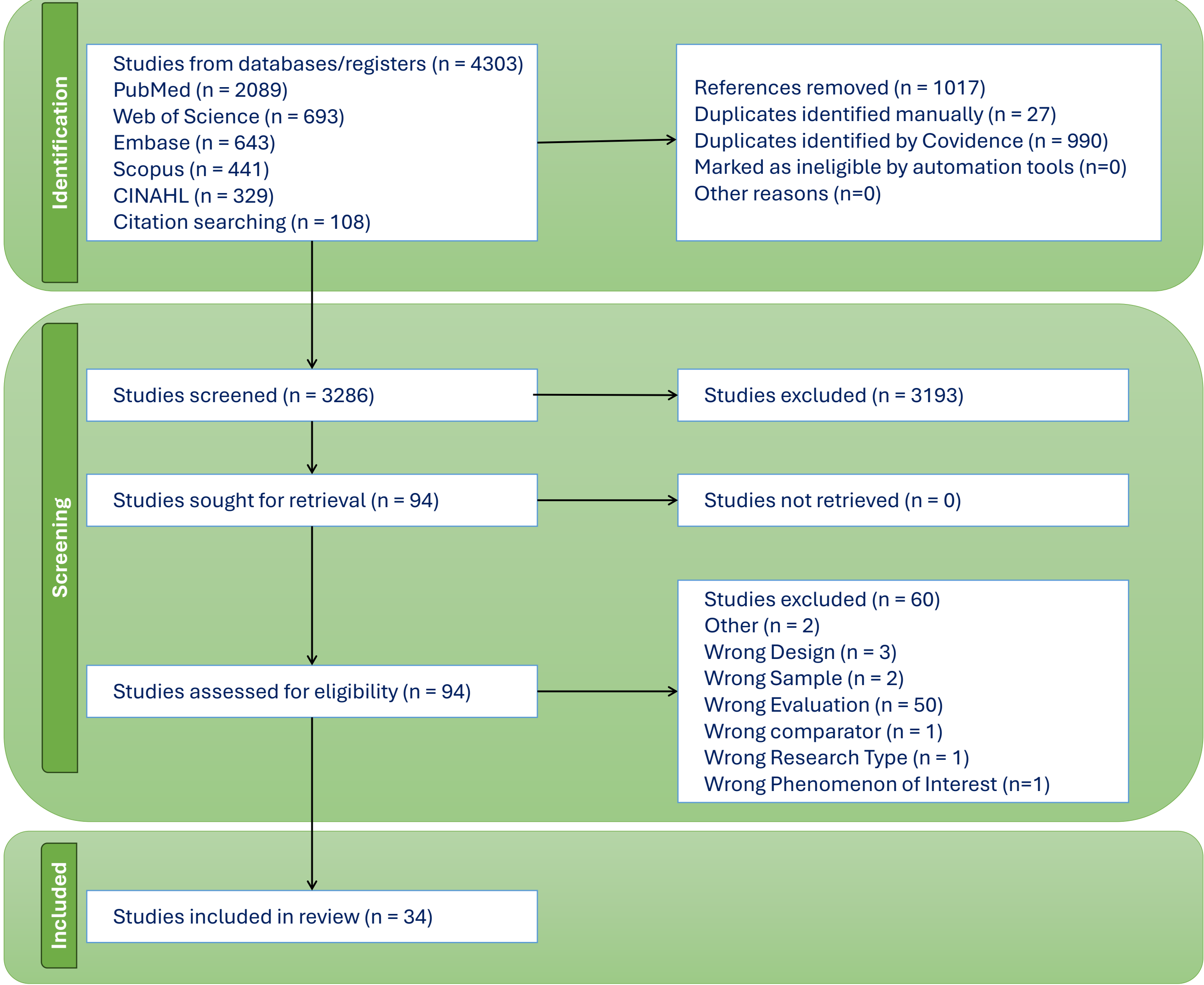
Limited time in consultations  
GSP doesn’t fit easily into a medicalised model of healthcare  
Lack of awareness about GSP options  
Negative perceptions about GSP

Link worker to handle complex cases  
Patient-oriented material to share  
Evidence of positive outcomes and policy support  
“Green ethos” at a practice

Inconsistent funding  
Lack of relationships with local prescribers  
Perception that GSP is not taken seriously by prescribers

Positive relationships with local prescribers  
Community integration  
Local information resources

State of the Art Scoping review results



The first one is, that bigger picture access to quality green space. So, if you're in a deprived area and you then need to go get a bus to travel to go on to some activity, that's a barrier in the first place.

Manager, male, 5-10 years experience

If you talk to people and ask them about their interest in the outdoors, they all, well, many of them seem to, sort of, go back to their childhood, and they seem to go to a nicer place. And it's quite a nice thing to talk about with people, even if they don't take you up on your suggestions about connecting with nature.

GP, female, 25+ years experience

I think not having the right clothing to wear is a big barrier, especially in the colder weather and when we're looking at this cost-of-living crisis that's going on

Link worker, 1-5 years experience

I think for it to work well, it has to be...there has to be a proper interface between the prescribers and people who can deliver high quality work in the outdoors, folk like us who do that kind of stuff.

Provider, male, 10-15 years experience

I think some people also feel there's a certain aspect of this that's a bit, that's hippy, maybe not their kind of thing or it's too alternative

GP, female, 20-25 years experience

I hear a lot of people telling me that when they go out and spend time in the hills, they feel a lot calmer

Link worker, female, 5-10 years experience

It's great to get out, because I also suffer from...obviously the COVID situation, peoples' mental health went through the floor, and I certainly suffered with that as well. But I do find that getting out into the garden, you forget everything and the time flies by,

patient, male, age 60-65

DISCUSSION

Findings show enthusiasm for GSP as a holistic approach but there are concerns about its implementation within a medical model and highly-pressurised primary care environment.

We have developed an online toolkit (deepgreen.scot) to address these concerns through provision of:

- Evidence about GSP’s effectiveness & policy support
- Guidelines for how to prescribe and document GSP
- Information about GSP that can be shared with patients
- Self-directed patient activities – online and paper copies
- Microsites for each participating GP surgery
- Accessible formatting and low-data requirements.

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TOOLKIT ASSETS



Green Social Prescribing

Welcome to Deep Green - a toolkit for Green Social Prescribing. It is designed to help GPs and other health and social-care practitioners working in primary care to prescribe outdoor, nature-based activities.

This toolkit provides support, information and evidence about Green Social Prescribing. It can be used by practitioners looking for help to add or expand Green Social Prescribing in their practice. It can also be used for people interested in the subject more generally.

