



University of
Central Lancashire
UCLan

Sustainable funding models for Nature-Based Social Prescribing (NBSP): urban v. rural comparison in Lancashire and South Cumbria

Report (Oct 2023-March 2024)

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Project Partners



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Pennine Oaks – Saba Iftikhar, Eco Therapist & Forestry Practitioner

Whinney Hill Farm CIC – Gillian Carlisle (CEO British Thoroughbred Racing Charity) & Lauren Vickerson (Communications & Engagement officer)

Blackburn's Farm Nurseries & wildlife center CIC – Bernard Pendleton, Andy Bradshaw & Kirsty Cropper

Groundworks – Sam Marine

Natural England – Jenny Griggs, George Coombs

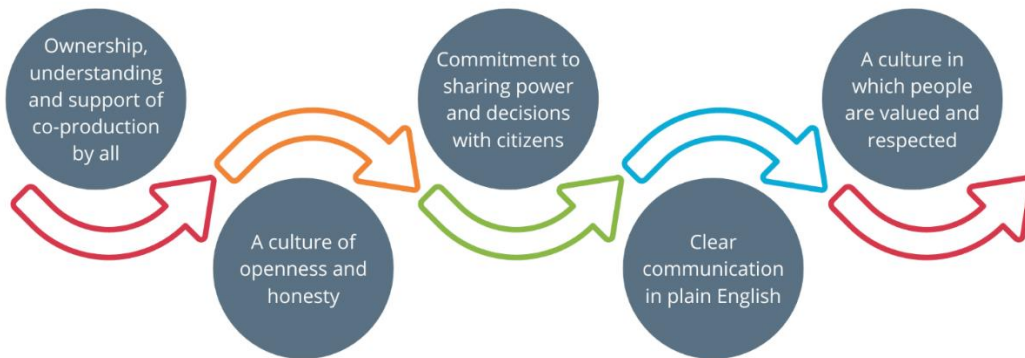
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We would also like to thank:

UCLan Doctoral Training Centre, Forestry England (Ellen Devine), John Muir Trust, Let's Grow Preston, VCFSE Assembly, National Academy of Social Prescribing, and the Social Prescribing Network.

Model of coproduction

Coproduction is one of the critical foundations of this project, and we consider it **“business as usual”** (CfPC, 2023). Each community partner (2 charities and 1 business) had approached the UCLan Social Prescribing Unit separately with intent to collaborate after our [news announcement](#). We worked with them to explore their goals and vision for the future. This model of coproduction was used throughout the project (CfPC, 2023).



In coproducing phase 1, it became clear all aims and goals returned to sustainability – each charity wanted to diversify into Nature Based Social Prescribing (NBSP) but needed to set up a sustainable funding & resource arm, as well as explore what they did and did not want to provide. Each organisation wanted to continue with previous recommendations specific to sustainable NBSP, work on solutions specific to Lancashire & South Cumbria (LSC) and address Sustainable Development Goals (SDG) (UN, 2020). With multiple partners/organisations involved, there was the potential for peer support within the project, including between the three organisations (Pennine Oaks, Whinney Hill Farm and Blackburns Farm nurseries & wildlife centre).

Pennine Oaks

[Pennine Oaks](#) is an organisation who uses their profits to provide charitable nature-based activities for people who face significant barriers to health creation. These include refugees, people who are homeless, children and young people who are on a pathway with the Police and families who need support. Pennine Oaks delivers corporate events to fund charitable work. During this project, they received 4 acres of land (and began to create the charity 4 Acres CIO), and a community center needing renovation with land. Pennine Oaks uses nature connection, nature adventure and ecotherapy to work with people to achieve health creation. Pennine Oaks works across rural and urban sites.

Whinney Hill Farm goals (British Thoroughbred Racing Charity)

[Whinney Hill Farm | Lancaster | Facebook](#) was established in 2023 by the [The British Thoroughbred Retraining Centre \(BTRC\) – Ensuring a life for horses after racing \(thebtrc.co.uk\)](#) following support from UCLan to diversify into NBSP. Situated in the Lune Valley, Lancashire and located on the edge of the Forest of Bowland Area National Landscape, the site has over 180 acres of green space including 20 acres of natural woodlands. It is home to a sustainable, eco-friendly camp site and has space for a huge variety of outdoor activities. Their aim is to make nature accessible for all whilst supporting projects for the community, education and positive wellbeing of humans, equines, and the environment.

Blackburns Farm nurseries and wildlife center

[Blackburns Farm](#) (CIC) was established in 2023 by Andy Bradshaw & family. The “Remembrance Wood” was set up by the Bradshaw family in 2020 during the Covid19 lockdown. It began with an idea Andrew Bradshaw had over dinner, which was then executed by the entire family led by his daughter Ashley. There are over 1000 trees now planted at the remembrance woods, and it has become a sanctuary to many, a place to come to remember cherished memories of those who have trees in their memory. The farm is a rural site on the outskirts of more urban areas.

Bernard Pendleton (chair of NW in Bloom) & Kirsty Cropper support along with many volunteers to help create this open access land. *“Blackburn’s Farm, located at the heart of the Fylde, is possibly one of the community’s best kept secrets. With some careful interventions and the continued support of organisations such as The Wildlife Trust, Royal Horticultural Society and Natural England, it has become a vital and unique haven where local wildlife can thrive. Blackburn’s Farm enables a more biodiverse future, through bringing local people closer to nature. The education center, cafe, together with nature trails, bird hides and information boards around parts of the farm, allow the local community and visitors to The Fylde, and Lancashire as a whole, the ability to learn about, and see for themselves, wildlife on the farm and how land management can be changed to benefit wildlife, raise awareness of nature, and help people’s health and well-being.”*

All 3 sites work and volunteer on land they want to become accessible to all for health and wellbeing, whilst growing sustainable resources and finances.

Place based context: Lancashire and South Cumbria (LSC)

With devolution or “Lancashire 2050” on the horizon, we know this agenda includes “*sustainable, prosperous and inclusive Lancashire*”. This can only be achieved through activating, supporting and sustaining “[health as wealth](#)” (The Health Foundation, 2022). LSC Integrated Care System (ICS) was created in early 2023 containing over 50 PCNs and [5000+ VCSFE organisations](#). Providers of social prescribing, including VCSFE, SME & private organisations, can receive referrals from social prescribing link workers and other professions within the ICS. Yet at present, funding does not follow through from the point of referral into VCFSE for NBSP, despite many positive impacts on health and wellbeing being reported nationally. These destination providers of social prescribing often must apply for multiple, short-term grants and some use their own funds to support the people who have been referred through. There is currently a disconnect between the expectation of (nature based) social prescribing being delivered in the community for free, and the lack of sustainable funding (and resources) to make this a permanently funded initiative.

National recommendations to apply the “[Social Prescribing Maturity Framework](#)” (NHSE, 2023a) in ICSs support exploration of how fully embedded social prescribing is (or areas within social prescribing such as NBSP) with respect to commissioning, equity of access, provision, and resourcing. Green Social Prescribing has gained significant traction since the conception of government test and learn sites, and the current advice is embedded in this [NHS Green Social Prescribing toolkit](#) (NHSE, 2023b). Historically, GSP has existed in LSC (CMIH, 2012; Baybutt, 2013). Yet, across the ICS, there is no clarity on how the growth of NBSP (which includes green & blue social prescribing) could be supported and sustained with LSC ICS. At the start of this project there was no overarching place-based policy on NBSP, consensus or concordat on how NBSP can be sustained in LSC. Yet, the evidence base exists on the benefits of ‘[Nature on prescription](#)’ (Garside et al., 2021), [nature connection](#) (Natural England, 2022a) (and connections to action on climate crisis), [nature exposure](#) (Natural England, 2024), [nature for mental wellbeing](#) (Natural England, 2022b) exists, and continues to grow ([NASP, 2022a](#), Mughal et al., 2022).

Asset Based Community Development

We utilised [Asset Based Community Development](#) (ABCD) (Bartels, 2023) throughout this project, evidence by:

- Understanding what is strong, rather than wrong with community provision of NBSP
- Empowering community providers to be solution creators
- Listening to and acting on what all colleagues want to develop

Kenyon et al (2023) highlighted the criticality of positive leadership, partnerships/ collaborations (across health, social care, VCSFE & political environments) to support sustainable development of Green Social Prescribing, and taking an asset-based approach as highlighted by Bartel (2023).

Proportionate Universalism

At the launch of our Social Prescribing Unit in 2021, Prof. Sir Michael Marmot recorded an address to our audience urging future research to contain the concept of “Proportionate Universalism”. Marmots work with the Institute of Health Equity included an overview of LSC titled [“A hopeful future” \(IHE, 2020\)](#). Within this report, he highlights the significant health inequalities impacting our population, and the criticality of resource being allocated to need. We know in LSC ICS and the north rates of mental health challenges have significantly increased due to the pandemic as we live and work in areas of high inequalities and deprivation. With more people out of work than ever before (and benefits not rising in line with the cost of living), there is much less money available for people to afford leisure and wellbeing activities to improve their mental wellbeing. Having access to activities in nature on prescription help provide the space individuals need from being a carer, the mental breather from issues at home and a lifeline in terms of social connection and reducing isolation which can cause and exacerbates mental health problems. By not addressing the main barriers people face to nature-based activities (including digital access, transport, and cost of the activities) we are not addressing the needs of those who face the largest barriers in society. Social prescribing at its very heart is meant to address inequity. Yet there is an argument social prescribing cannot fix everything – it is not “the” solution for all problems. It may, however, work providing we understand “what works for whom, it what circumstances and why” ([Husk et al., 2020](#)). Understanding an individual's needs (and wishes) is critical therefore in making all aspects of NBSP work.

Extant recommendations for sustainable social prescribing (including NBSP)

Thriving communities report recommendations

Literature exists on the concept of sustainability of social prescribing in the UK, based on the **“Thriving Communities”** project (Wavehill, 2022). Recommendations relevant to this project included:

“Co-design and co-production guidance ...produced for organisations working within social prescribing systems. This will ensure that the local offer is shaped by the needs of local communities”

“Examples of effective practice in engaging and supporting communities using online activities should be collated. This should cover guidance and ideas for overcoming digital access issues”

“greater coordination of local social prescribing offers should be progressed to avoid duplication of effort and help communities navigate activities to support their health and wellbeing”

“The feasibility of establishing an accreditation or quality mark should be explored to enable link workers and communities to identify and refer into quality assured activities.”

“Social prescribing systems should consider broader infrastructure factors when developing their social prescribing approach such as transport links and community assets”

*“Feedback from partners suggests an **absence of wider coordination around local evaluation design. Guidance should be produced** to aid organisations in measuring outcomes and impacts for patients, participants, communities and the health and care system”*

*“Social prescribing systems and activities should be encouraged to **capture consistent profile data** to enable aggregation at an ICS and national level. This will aid assessment of which communities are supported through social prescribing and which are underrepresented”*

*“Use the **“Social Prescribing Maturity Framework and workforce plan”** & consider broader plan to ensure **sustainable community provision by activity providers**”*

*“Volunteers play an important role in social prescribing systems. Social prescribing infrastructure should **explore opportunities to improve the coordination and management of volunteers**. This could include sharing of volunteer resource and skills to support activity providers and the participants they are engaging”*

*“**value of facilitating networking between VCFSE organisations** coordinating and delivering activities as part of their local social prescribing offer. Continued networking opportunities should be hosted to enable learning and the sharing of practice”*

Yet, these are not specific to a place-based approach in Lancashire and South Cumbria (LSC).

“The Missing Link” report recommendations

The recent report **“The Missing Link”** (Capacity, 2023) for Cheshire & Merseyside (our most local Integrated Care System (ICS)) which Groundworks and Natural England were coauthors recommended actioning a **“Green Health consortium”**

*“A **“Green Health Consortium”** would allow the consortium to directly engage with the ICS and associated voluntary infrastructure organisations. Benefits to this are: • Required resource to liaise with health services is significant, working in this way would provide an economy of scale. • Individual voluntary organisations struggle to find the time and resource to attend these meetings. Membership of a consortium would provide equity of opportunity for new and smaller green organisations. • It would allow information to be cascaded to more green-provider organisations”*

Building a sustainable funding case

*“Economic outcomes- **cost benefit / cost savings on services**”*

“Environmental and sustainability- how partnering with green social prescribing activity providers can help the NHS achieve its environmental sustainability targets”

“jointly identify and bid for impact and evaluation funding”

“increase understanding of the outcomes of green social prescribing for individuals”

“increase the impact green social prescribing activities are having on the health system”

*“Measuring in terms of cost savings will help to build the evidence base and reinforce the **“invest to save”** argument.*

“Enable interventions to be designed to show how they can achieve commissioners’ priority outcomes. These will be different for different funders, enabling a diverse income strategy”

Develop an LSC “green health model”

“develop a green health model”

Repurposing of Additional Roles budgets

This raises the question whether ARRS funding could be used for “green” social prescribing roles perhaps in conjunction with green community hubs?

Funding

“A blend of grant and commissions is required to fund delivery”

Establishing the “blend” of funding needed in LSC ICS to sustain NBSP demands further research at PhD level. This may involve understanding “what data does the ICS/ICB and ICP need to commission NBSP”.

Questions for LSC ICB/ICS/ICP

“If it is decided to continue to deliver green social prescribing for primary care, it will need to be subsidised via other activities/commissioned work. Demonstrating a need for provision (and expansion). • Building a reputation and track record within health care, and the ICS. • Building a case for ongoing funding from health”

Personal Health Budgets

“Market your offer to the Personal Health Budget audience. From a green social prescribing activity provider’s perspective, if you do wish to attract people who hold Personal Health Budgets, you will need to market your offer to individuals, as they are their own budget holders. A simple line on your leaflets or website saying, “PHB’s accepted,” could suffice. “market or promote your offer to care-coordinators and the ICB”

VCSFE sector investment

“Commitment to supporting VCFSE sector investment, both financially and organisationally and with shared plans, enabling VCFSE to have the capacity to engage as equal partners”.

Exploration of alternative funding models e.g. [Shared Investment Fund \(NASP, 2024\)](#) could be explored as part of PhD research.

National green social prescribing delivery capacity assessment report

National recommendations following government research from (DHSC, 2023) stated:

*“Finding ways of supporting the emergence and growth of networks that operate across multiple scales and sectors **should be a strategic priority area** and part of a more consistent yet contextual approach to GSP in England. This approach would look to provide an overarching framework that joins up coordination and support organisations at national and regional levels with local VCSE and healthcare networks. This has the potential to create a multi-sector system rooted in core values that reflect the ambitions of GSP in England, while still enabling variation at local levels and in ways that meet the needs of communities.”*

The main recommendations highlighted in this report (DHSC, 2023) highlighted the need to focus on sustainable green social prescribing with:

1. *“localised understandings (of GSP sic.) are critical”*
2. *“there is scope to promote referrals across a greater diversity of nature-based activities, better realising the benefits associated with nature connection (while recognising that sports and exercise activities set in nature also offer opportunity for nature connection)”*
3. *Ask “why this apparent capacity is not being realised” re: delivery of NBSP/GSP*
4. *“affordability and availability of transport is a major factor limiting service user engagement with green and nature-based activities” and “people with mental health needs may also find transport a daunting prospect in its own right, inducing stress and anxiety”*

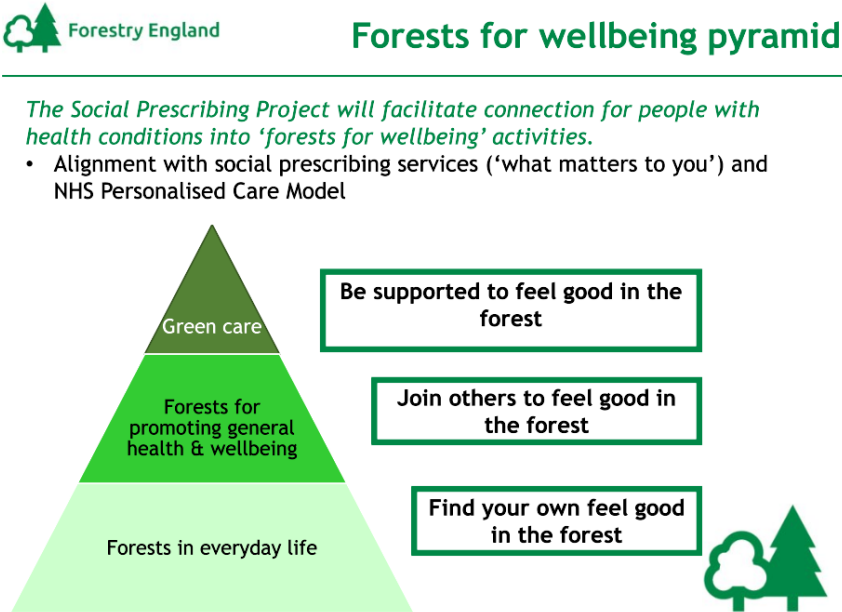
Nationally, in the UK, we know there are numerous examples of successful NBSP projects which evidence SROI, [cost benefit cases \(Trust, 2023\)](#) and include qualitative stories from participants evidencing the difference NBSP makes to people's lives. In LSC, previous NBSP include: MyPlace (including Brockholes, The Bay and several sites), Phoenix Rising (& the Phoenix takes flight), Lets Grow Preston, and nature on recovery. What we don't know is: why NBSP isn't fully adopted across LSC ICS, why sustainable funding does not exist, why award winning NBSP leads are anecdotally reporting struggling to access longer term/ sustainable funding, and whether sustainable funding is possible within LSC.

Self-assessment: applying the “6p Sustainability Framework” to this project

The [Six-P Sustainability Framework \(published in 2023\)](#) highlights a method for exploring sustainability within nature-based interventions for mental health. Although critical on the reach of social prescribing, the framework allowed each charity in December 2023 to reflect on their definition of what sustainability means to them in this context, what their assets are and what their needs are. This supported the creation of an “options appraisal”.

Applying context: Forests for wellbeing pyramid, Forestry England.

Ellen Devine, Forestry England, donated this slide from their December 2023 UCLan Social Prescribing Unit presentation on the social prescribing work they had completed as an organisation. This model illustrates how nature based social prescribing interventions delivered in/ on forests (as with our three partners) can mirror the personalised care framework. This diagram separates how people can be supported into those who need no assistance, some assistance and full assistance. Sustainability of delivery will therefore be relative to this context as it is reasonable to assume an individual needing no assistance will cost less than an individual needing maximum assistance. This model will be used to connect the level of need to the proposed NBSP intervention in the options appraisal.



From this information, and meeting with partners, Phase 1 of the project was created.

Phase 1

Phase 1 involved coproducing phases 2 and 3 with all partners to meet the objectives outlined below and scoping for the future potential of this collaboration (October 2023 – March 2024).

Objectives

Phase 1 objectives included:

- a. *Co-Produce a new Nature Based Social Prescribing collaborative forum to maximise benefits to the environment and local community, which will include attendance at online/in-person monthly project meetings by the charities involved in the project.*
- b. *Undertake Options Appraisal for 3 Sites (Urban, Rural, Semi-Rural) to identify possible environmental intervention opportunities, which could be delivered through Social Prescription, which will be shaped through collaboration and contribution via workshops by the charities involved in the project.*

Environment Agency targets

The Environment Agency can meet their national and regional targets (LOP Outcomes) re: social value, social prescribing, wellbeing, work in area of high inequities and inequalities, address potential flood zone through this project. The EA may as a result of phase 1 (2, and 3) increase EDI connections and increased diversity within recruitment. By demonstrating this coproducing project with the local community, education and health provider(s) to improve individuals and community wellbeing, this may provide foundations for future environmentally beneficial intervention delivery.

Target audience

From an EA point of view, the target audience of this work will be:

- Local Environment Programme project delivery teams
- Local Flood Coastal Risk Management teams
- EA National Health & Wellbeing Leads
- National Internal Guidance
- Benefit to local communities
- Benefit to socially deprived communities
- Benefit to EDI reach

From a UCLan Social Prescribing Unit perspective:

- Increase profile of benefits of NBSP to key partners (ICB/ICS/ICP etc)
- Benefit to local communities
- Contribute to the evidence base through outputs
- Establish potential for future research in this area
- National Academy of Social Prescribing
- Social Prescribing Unit

UCLan Social Prescribing Unit targets

The UCLan Social Prescribing Unit intention is to demonstrate the potential for a knowledge exchange/transfer partnership. This project meets the 2023 – 2024 annual objectives of the Social Prescribing Unit (including: coproduction in research, knowledge exchange, building research supporting outcomes of social prescribing and increasing place-based understandings of social prescribing).

Additional targets

Additionally, we hope this project will lead to:

- Explore previously unresearched models of sustainable funding for NBSP
- Contribute to better understandings on what works for people in LSC re: “health is wealth”
- Commence dialogue with the ICB & ICS partners on how to create sustainable funding for NBSP
- Evaluate NBSP interventions (which meet EA aims) as part of NBSP

Meetings (monthly)

Monthly meetings occurred between September 2023 – March 2024 chaired by Sam Pywell (UCLan) offered to the whole team to coproduce phases 2 and 3. Meetings included:

- Updates (project, funding, progress of charities in creating new community spaces & establishing their NBSP offer)
- Onsite visits
- Peer support visits
- Knowledge exchange (e.g. Outcome measures (ONS4), 5 ways to wellbeing, theory & evidence, criticality of connecting with the local CVS & social prescribing link workers etc.)
- Discussions on how to coproduce phases 2 and 3

Funding & support

All sites were encouraged to approach their local CVS/ social prescribing link workers to connect the work they are doing to their local social prescribing support infrastructures.

Environment Agency Phase 1: Coproduction project funding

Natural England: time in kind

UCLan – time in kind

Groundwork

- Free membership of [Welcome To The Northern Network | Northern Network](#)
- Option to apply to the [Green Skills Fund | Northern Network](#)
- Workshop - Sam Marine (Groundwork lead)

“Groundwork Cheshire, Lancashire & Merseyside staff team from the Green Community Hub/Northern Network project provided a workshop to the three projects about developing their Green Community Hub. We met in Morecambe, at the site of one of our Green Community Hubs. Angela, Project Facilitator from Groundwork, went through a background to Groundwork’s work in the area, our experience developing our flagship Grow Blackpool site and other Green Community Hubs in the area. We also explained the background to our current hubs project, our work in Morecambe, and some of the challenges and successes we have had so far. The second half of the workshop consisted of working through a planning sheet we had prepared for the group to help them set out their next steps for their hubs and how they can build on partnerships in their area and between each other. The group shared a lot with each other, and each went away with a list of contacts and people they could work with.”

Options appraisal

An options appraisal was coproduced with all members of this team. Each member of the team was asked to bring this information to the January 2023 site visit, and to keep this question in mind when developing the project. Each site conducted their own options appraisal and colleagues within this project offered their reflections on the potential of each site. The options appraisal was suggested by the Environment Agency to a. understand assets & strengths, b. establish needs, c. plan phase 2 potential of what could be delivered on the land.

Options appraisal for NBSP interventions	WHF CIC	Pennine Oaks/ 4 Acres CIO	BFNWC
Flood beneficial techniques (e.g. NFM techniques, habitat improvements/creation and water quality beneficial actions, planting trees)	x	x	x
Forest school	x	x	X
Vegetable growing & contribute to food bank	x	x	x
Nature connection & wellbeing walks	x	x	x
Seasonal workshops	x	x	x
Kids parties (see Wildwood Days (2023) funding model)	x	x	x
Adventure Based Social Prescribing (e.g. green camping/hill walking)	x	x	
Nature Based Yoga	x	x	x
John Muir activities	x	x	x
All ages	x	x	x

Each site established maps of where they could complete these activities on their land and discussed their preferences.

Phase 2

Our proposed, coproduced phase 2 project will use the following mixed methods and methodology to evaluate a 12-month funded delivery pilot of NBSP in these 3 sites:

Ethics

Formal ethical approval will be sought by UCLan Social Prescribing Unit at the point of successful funding for phase 2.

Qualitative data

Quotes from participants

Quotes from the project team

Case studies on what sustainable model of social prescribing each partner would like to see in the future to support their NBSP

Quantitative data

SROI

Cost Benefit of NBSP

ONS 4 – a standardized Social Prescribing outcome measure to be used with both participants and delivery partners

Coproduction, Participatory inquiry, ABCD, Proportionate Universalism

Coproduced creation of sustainable model(s) of NBSP in LSC from phase 2 partner perspectives

Phase 3

PhD proposal

In September 2023, UCLan (Prof StJohn Crean) proposed a PhD be created from this project based on the team project presentation. Sam Pywell and Prof. David Grecic worked to create the PhD proposal, applied for & obtained funding via UCLan Doctoral Training Centre. In spring 2024 [UCLan advertised a fully funded PhD place](#). This will result in place-based research into sustainable funding and resource models for NBSP in LSC. Phase 3 is PhD research (see appendices).

PhD (via MPhil) Studentship in Health, Social Work and Sport

Reference Number: DTC01-24-01

Project Title: Sustainable models of Nature Based Social Prescribing in Lancashire and South Cumbria

Applications are invited for a PhD (via MPhil) studentship in the Social Prescribing Unit, within the School of Health, Social Work and Sport. The studentship is funded through the school and be part of the UCLan Doctoral Training Centre for Industry Collaboration and is tenable for up to 3.5 years full time [subject to satisfactory progress]. Both Home and EU/International applicants may apply but EU/International applicants will be required to pay the difference in tuition fees between the UK and EU/International fee rates. The studentship will provide successful applicants with an annual stipend in line with UKRI rates (2024/25 rate £19237 per year) subject to satisfactory progress.

It is expected the successful applicant will commence September 2024.

[The PhD advert](#) was released at the same time as the [National Academy of Social Prescribing advertising the Shared Investment Fund \(SIF\) proposal](#). Our PhD aligns with the latest developments in social prescribing in the UK.

Future research on sustainable models of NBSP needs to explore all funding options, including the SIF to solve place-based challenges. We know in areas of devolution (Manchester, York, Leeds) there are examples of well-funded social prescribing (including NBSP), and London's [Community chests model](#). Therefore, sustainable models of NBSP need to include pre and post devolution 2050 scenarios.

NASP stated "The future of social prescribing" requires significant focus on "*supporting frontline community organisations through SIF*" (NASP, 2023) through "*SIF – open to public, private and philanthropic investment, strategically shaped and locally deployed, would help charities and grassroots organisations deliver more sustainable support, in line with local health needs.*"

Although the SIF is not just for NBSP, it is for all types of social prescribing, we hope by researching NBSP we can contribute to evidence based solutions including the future models of funding to ensure the longevity of NBSP in LSC. This will require exploration of the SIF in comparison with other previous, current and future models.

Conclusion

Further research into Sustainable Models of Nature Based Social Prescribing in Lancashire and South Cumbria (rural and urban) is required to address the funding gaps and potential for future investment in this important contributor to health creation.

Recommendations

- A Phase 2 ethically approved 12-month pilot hosted at UCLan Social Prescribing Unit (SPU) continue to build on phase 1 and explore the realities, challenges, and potential solutions to sustainable NBSP by coproducing what phase 1 partners think should be the model in LSC for NBSP, alongside evaluating their NBSP in line with national reporting of NBSP. Phase 1 providers advertise “we take Personal Health Budgets.”
- A fully funded PhD candidate (hosted by UCLan) continues to research this project (with connection and support from UCLan Doctoral Training Centre, UCLan Social Prescribing Unit, Centre for Community Connectedness and Cooperation).
- Contribute to strategic changes within LSC ICS specific to resource and funding model solutions for sustainable Nature Based Social Prescribing.
- Creation of a Green Concordat signed by all key stakeholders in LSC ICS on the importance of creating sustainable funding and resource models of NBSP.
- Exploration of UCLan student volunteer role to be included in phase 2.
- Explore the potential for ARC NWC resource e.g., NBSP internship.
- Explore if Phase 4 (KTP) is possible (including coastal communities).

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Appendices

PhD description

University of Central Lancashire

Research Project/Studentship Description



Studentship Ref Number: DTC01-24-01	Closing Date: 12th April 2024
School	Health, Social Work & Sport
Centre	Social Prescribing Unit, CCCC
Proposed Director of Studies	Prof David Grecic
Contact Details	dgregic1@uclan.ac.uk & socialprescribing@uclan.ac.uk
Programme (e.g MPhil/PhD)	PhD (via MPhil)
Duration of Studentship	3.5 years
Hours (Full or Part Time)	Full Time
Tuition Fees	UK Fees covered (International Students to pay the difference between UK and EU/International Fees)
Maintenance Grant	UKRI Level Stipend (Currently £19,237 per annum)
Any Entry Requirements (e.g. 2:1 classification/restricted to UK residences only)	UK Bachelor of Science or Bachelor of Arts degree (or equivalent qualification) at 2:1 or above in a Health, social care, social work, medicine, community, or allied health topic area, or a UK Masters level qualification
Any Special Requirements (e.g. driving licence)	None
Project Title	
Sustainable models of Nature Based Social Prescribing in Lancashire and South Cumbria	
Project Description	
<p>This project aims to explore and inform sustainable Nature Based Social Prescribing (NBSP) in Lancashire and South Cumbria.</p> <p>An initial literature review will explore evidence, academic research, and grey literature to identify how NBSP can be created in a sustainable way and used within salutogenic approaches to improve individuals' health and wellbeing. Specific examples connecting to Integrated Care Systems (ICS) in the UK will be illustrated, and research gaps explored in order to develop solutions based on the community enhanced social prescribing model (Morris et al., 2020) and existing models of social prescribing in the LSC ICS commissioning footprint.</p> <p>Utilising an asset-based approach (ABCD) and asset-based leadership, a mixed methods/ Participant Action Research (PAR)/coproduced methodology will be adopted prioritising the input of people who face significant barriers to NBSP and those who would benefit most from the findings such as the future users and leaders of NBSP across LSC.</p> <p>The studentship will demonstrate change(s) supporting the NBSP agenda within Lancashire and South Cumbria Integrated Care System (ICS) level and will draw from ongoing research in the field. For example, outputs from the UCLan NBSP collaboration (March 2024 & subsequent outputs), Local Nature Recovery strategy (LNRs) (due 2024), and National strategies and reports (including the National Academy of Social Prescribing Shared Investment Fund project).</p> <p>The outcomes of the research have potential for job creation across the ICS and beyond. Through learning, evidencing and supporting place-based solutions, this will support future research bids, create additional research projects and interventions.</p> <p>Students holding DTC Studentships are encouraged to take up opportunities to gain teaching experience within the remit of the DTC Stipend up to a maximum of 6 hours class contact per week.</p>	