

Promotion of social prescribing from within a general practice (a pilot study)

ACTRN12622000179730

Status	RECRUITING
Sponsor	The Huon Valley Health Centre (now Huon Medical Group)
Enrollment	50 participants

Plain Language Summary

Social isolation and loneliness are increasingly recognised as significant risks to health — comparable in impact to smoking or obesity. For older adults living alone in rural or regional areas, limited access to community activities and social connection can contribute to poor physical and mental health. Social prescribing is an approach where GPs refer patients not to medical treatments, but to community activities, social groups, and local support services that address their non-medical needs.

This pilot study in the Huon Valley area of Tasmania aims to increase the rate and effectiveness of social prescribing from within a general practice. GPs will receive a practice improvement module — a structured guide to identifying patients who might benefit from social referrals and a streamlined pathway to refer them to local community hubs. The study will measure GP attitudes, the number of referrals made, and whether patients feel more socially connected and health-literate after 6 months.

Participants include GPs at the Huon Medical Group and adult patients referred to a community hub. All adult patients identified as potentially benefiting from social connection (such as those living alone, recently hospitalised, or with chronic conditions) are eligible. This is a practical, low-cost study that could demonstrate how GPs can serve as important connectors between isolated patients and the community resources that genuinely improve their lives.

Key Eligibility Criteria

Inclusion (2)

- Description and number
- The HMG employs 16 GPs of differing experience levels across three locations. In the course of their usual practice, it is likely that most GPs already refer patients for social activities. The project is intended to assess GP's perceptions of the resultant practice improvement model. Approximately 30% of elderly patients in the HMG database have a status indicating they live alone. The proportion in the wider community may be lower due to younger people more commonly living with family, continual changing relationship statuses and living arrangements of individuals. The definition of living alone includes free-text entries of separated, widowed and single in patient medical records. There are approximately 5000 people aged over 18 years who regularly receive care from the HMG. Not all patients at risk of isolation who are offered a social prescription referral will accept the referral or wish to engage with the community hub. It is estimated that 100 people in 6 months will be successfully identified by GPs, accept a referral to a community hub and complete a baseline and follow-up assessment for inclusion in the SP pilot project. All community hub coordinators will be invited to participate. It is anticipated the number of participants will be no more than four, corresponding to the four hubs (Huon Valley Council (specifically the Huon Hub), Cygnet Community Hub, oura oura House and Geeveston Community House). Given the small number of hub staff participants the data will be very location-specific and generalisation to other settings will not be pursued.

Exclusion (4)

- All GPs employed at HMG will be encouraged to engage with the practice improvement concepts referred to in this project. All qualification levels will be permitted (i.e. interns, registrars, Fellows of the Royal Australian College of General Practitioners). GPs will prospectively identify patients who may benefit from a social activity. Current factors that may trigger a referral could include: living alone, socially or geographically isolated, low health literacy, recent admission to hospital, chronic medical conditions. All adult patients who have been referred to a community hub will be eligible to participate in the study and provided a study pack <http://information-sheet-consent-formative-referral-to-hub-patients-12622000179730> referred to a community hub if the GP deems them

unsuitable. Patients who cannot complete the self-assessment requirements alone will be offered support (e.g. survey questions being read aloud for those with low literacy; interpreter service where English is not the preferred language).

- unwillingness to participate (GP, patient, community hub)
- patients deemed unsuitable by GP
- patients unable to complete survey even with assistance from research team

Locations (1 total)

TAS, Australia