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## West Yorkshire Flood Innovation Programme Accelerator Project

### Work Package 2 – Green social prescribing work package

Start date: 1<sup>st</sup> January 2024 | End Date: 1<sup>st</sup> March 2025 |

Location: The project will start with an overview of the status of NFM and GSP across West Yorkshire, then focus on one or two catchments or Local Authority areas, before identifying one or two specific NFM schemes with the potential for development as social prescribing initiatives.

#### 1. Background and rationale

There is increasing awareness of the potential benefits to health and wellbeing of being outdoors in nature. In 2020, the UK Government launched a £4m investment into green social prescribing (GSP) activities, which can be defined broadly as ‘health professionals connecting people to community-level, nature-based activities for practical, social and emotional support to benefit their health and wellbeing’. This initial Government investment supported seven new GSP initiatives, including two in Yorkshire – one run by Humber Coast and Vale Health and Care Partnership (now Humber and North Yorkshire) and South Yorkshire and Bassetlaw Integrated Care System. We (University of York) are the evaluation partners for the Humber and North Yorkshire GSP initiative.

Our work in the Humber and North Yorkshire area has highlighted the wide range of referral pathways into GSP schemes, and the various barriers that can exist between health professionals, NHS-linked social enterprises, link workers, patients and other users, and providers of GSP activities. These include issues of capacity, affordability, transport, communication and understanding. These barriers can reduce the take-up of GSP initiatives, especially among people from lower-income groups and those living with mental health conditions, as well as providing challenges to the evaluation of GSP initiatives.

There is frequently a wide range of willing potential providers of GSP, especially among nature-oriented organisations such as the Wildlife Trusts and other environmental NGOs. Natural Flood Management initiatives potentially provide a source of GSP, through opportunities for people to become involved in conservation-type activities as part of creating and maintaining Natural Flood Management (NFM) or Sustainable Urban Drainage (SuDS) measures in the landscape. However, our work has shown that the existence of a clear and functioning referral pathway is fundamental to achieving the desired health outcomes from GSP initiatives. If there is no effective referral pathway in place, and certain barriers exist at different points in this chain, there will be reduced take-up and reach, translating into fewer benefits at population level and a minimal effect in reducing health inequalities.



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## 2. Aim

The overall aim of this Work Package is to build on iCASP and other existing research on the benefits and implementation of green social prescribing schemes to explore the opportunities for GSP to be combined with NFM and SuDS activities being supported by the West Yorkshire FLIP within the area covered by the West Yorkshire Combined Authority.

## 3. Activities

We will undertake the following activities within this Work Package:

- A. We will review existing GSP initiatives and NFM activities across the region and carry out an analysis including location and accessibility to identify where there is potential provision that could link to existing referral pathways.
- B. In areas we have identified as having the necessary elements of an effective pathway in place, we will carry out interviews and/or focus groups to identify needs and connect health professionals with NFM practitioners to explore barriers, communication deficits and opportunities across green social prescribing and SuDS/NFM activities.
- C. We will identify specific SuDS/NFM-based GSP opportunities and potentially work closely with one or two NFM schemes, providing support to them in terms of what they would need to have in place to become part of a social prescribing initiative, including linking them up with other parts of the prescribing pathway.
- D. Depending on the capacity of organisations, and the potential to access funding from across other Work Packages, we could potentially undertake some evaluation of pilot schemes using a similar protocol as we have developed and implemented in our evaluation of the Humber and North Yorkshire GSP initiative.

## 4. Next steps

This work package began in January 2024. We have spoken with representatives of the Aire Rivers Trust, Yorkshire Dales Rivers Trust and WSP and will be attending the meeting of Calderdale practitioners on the 14<sup>th</sup> February 2024. We have also started to build relevant VCSE and NHS contacts.

### ***Work plan:***

#### ***A) January - June 2024***

Build a database of the contact details, locations and status of a) SuDS/NFM activities and practitioners b) GSP activities, pathways, providers and link workers. Initial overview for West Yorkshire, then focus on two Local Authorities or catchments for greater detail.

Have initial scoping and introductory meetings with SuDS, NFM and GSP contacts.

Review grey literature from West Yorkshire about GSP initiatives and identify key barriers and opportunities for integration with SuDS/NFM activities.

Review peer reviewed literature about community-based NFM and existing GSP initiatives from other regions and identify barriers, opportunities and good practice. Use this to inform area selection and the development of interviews and focus groups.

Analyse the location and accessibility details from the database to identify potential connections between existing SuDS/NFM activity and GSP.

Identify Local Authority areas or catchments that have the elements of an effective pathway in place to work with in stage B.

### ***B) May - September 2024***

Seek University of York ethical approval for interviews and focus groups.

Design individual interview questions and focus groups to explore barriers, communication deficits and opportunities across green social prescribing and SuDS/NFM activities.

Identify and invite interviewees and focus groups.

Carry out interviews

Carry out focus groups

Analyse interviews and focus groups and summarise key findings.

### ***C) September 2024 - March 2025***

Use results from stages A and B to inform work with one or two NFM schemes to identify next steps for linking with social prescribing pathways and potentially the development of a pilot scheme.

### ***D) January - March 2025***

Carry out evaluation and reporting of a pilot scheme if it runs, or codesign an evaluation process or other resources for a future pilot scheme.

### **Contact information and useful links:**

If you have questions about this project, iCASP or the WYFLIP, please contact us.



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