



Alliance for Healthier Communities
Advancing Health Equity in Ontario

LINKS2WELLBEING REPORT

Overview of Links2Wellbeing

To thrive, people must have access to appropriate health care, meaningful social support, and a community where they feel they belong. The social determinants of health, such as income disparity, racism, food security, and access to housing and transportation, must also be addressed. Social prescribing aims to support people's needs holistically and recognizes that not all health and wellbeing needs are primarily medical. Connections to community services are vital for older adults who become socially isolated to help them regain their health and wellbeing.

Links2Wellbeing (L2W) is a project led in partnership between the Alliance for Healthier Communities and the Older Adult Centres' Association of Ontario (OACAO), funded by the Walton's Trust. L2W aims to transform health outcomes for older adults in Ontario. Launched in 2021, L2W supports community health centres (CHCs) to build clear referral pathways from healthcare to community programs. This project is designed to help connect socially isolated older adults with community programs and services offered by Seniors Active Living Centres (SALCs) across Ontario, as well as other community services. The project is currently in its 2nd phase of four-year funding. This phase aims to further integrate social prescribing into Ontario's healthcare system and the community-based seniors' sector and to increase the program's capacity, reach and external partnerships.

Evaluation Findings

Outcomes from the first three years of the L2W project demonstrated the impact of social prescribing on clients, SALCs, and healthcare providers. The Alliance-OACAO partnership worked with over 200 healthcare providers, who made 1500+ referrals to 93 SALCs across Ontario. Referrals were made to clients from diverse backgrounds and lived experiences, which included people living with physical disabilities, people living with cognitive impairment, newcomers and settled immigrants, caregivers, and more. Referrals were predominately made for social isolation (54%), loneliness (43%) and depression (25%). Before attending their social prescribing referral, less than 20% of clients (19%) rated their mental health as excellent or very good, with the remaining rating their mental health as good, fair, or poor.

Overall, older adults experienced many benefits from their social prescribing referrals. After participating in SALC programs, clients reported reduced feelings of loneliness (52% at six months and 62% at 12 months), and approximately 40% reported improved connections to the community as well as better physical and mental health.



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27 Alliance members (community health centres and family health teams) were onboarded to the project by the end of term, with nine of those sites receiving additional support to build their referral pathway through the Setting Up for Spread Learning Collaborative funded by PHAC's Social Prescribing for Better Mental Health project. Alliance member sites documented client referrals in the Electronic Medical Record (EMR), which enabled communication and follow-up between primary care and health promotion staff at their organizations. Clients referred from CHCs tended to be more medically and socially complex and received greater benefits from the referrals. Fifteen sites successfully documented 275 SALC referrals in the EMR in 2023-24, and the other 12 additional sites are currently building their EMR referral pathway with support from the Alliance.

Of the 275 Alliance member centre clients referred to SALCs in 2023-24, 64% had client sociodemographic data documented in their charts:

- 73% reported a household income of less than \$40,000
- 61% identified as female
- 13% identified as racialized or of mixed heritage
- 42% reported living alone
- 18% did not feel comfortable speaking English
- 37% were not born in Canada
- 34% reported having a secondary education or lower
- Of those reporting disabilities, the most common were physical disability, chronic illness/chronic pain/neurodegenerative disease and mental illness

The L2W project also positively impacted healthcare providers, with many reporting increased job satisfaction and gratitude for having another 'tool' available to offer patients. Many expressed that they were stymied about how best to help those patients struggling with social isolation and loneliness, and social prescriptions opened a whole new service in these cases. Providers shared that L2W opened conversations with clients about these experiences, and they felt more empowered to address this need with a warm hand-off.

Clients reported expanded knowledge, broadened perspectives, and a renewed sense of self-worth and approach to life. Many clients said that participating in activities at the SALC made them "love life again" and "feel more fulfilled." Additionally, clients recovering from serious health conditions, including cancer treatment and hospitalization for depression, credit their local SALC with playing a vital role in their recovery.

Staff at Seniors Active Living Centres across Ontario note the importance of this program in creating a sense of purpose for clients, reflecting that: "It's the little things like getting out of



bed, not having anything going on that day, nothing to look forward to, no one to talk to, no plans. That can be difficult. [L2W] gave them a purpose, a place to play, a place to socialize, a routine, and friends.”

The initiative facilitated extensive knowledge sharing at provincial and national levels. The Alliance and the OACAO fostered thriving Social Prescribing Communities of Practice in Ontario (currently at 245 members) and across Canada (198 members and growing). Alliance and OACAO staff offered over 175 presentations over three years in various settings, including at the 2022 Family Medicine Forum, where Social Prescribing tied for first place as one of the big ideas that could change health care. Further presentations by the Alliance were hosted in clinical settings, such as medical schools.

Lessons Learned

Throughout the three-year L2W project, numerous focus groups, interviews, and surveys were conducted with program implementers (like link workers) to learn more about enablers and barriers to implementing social prescribing initiatives for older adults. Social prescribing link workers play a key role in delivering social prescribing by spending time with clients to hear their needs and understand their interests. They take a holistic, community-focused, and evidence-based approach to people’s health and wellbeing to connect them to appropriate community groups, services and supports.

The summary below presents an overview of these lessons learned across three years and pulls together the perspectives of diverse stakeholders with various roles in the social prescribing process.

- A warm transfer of the client from their provider to a SALC is important. Older adults are often medically and socially complex and require more support to follow through on a referral. They may also be dealing with anxiety or other mental health issues that are preventing them from accessing social programming. This warm transfer is facilitated by either a dedicated staff person (who can be a link worker or a community health promoter) or a volunteer
- Both planning and organizational buy-in are key. Link workers recognized several critical factors for gaining buy-in and planning for the successful implementation of social prescribing within CHCs. One lesson learned from CHCs that is relevant for all clinical settings is that leadership must understand the value of social prescribing at the outset. Providers must be included in planning to ensure clinical buy-in from staff who will make referrals. For all partners involved in L2W, it was important to determine early on whether their social prescribing pathway would be sustainable in the long term so as to avoid unintended harm for clients if a service they depend on suddenly comes to an end.



- Formalising the social prescribing pathway. Implementing a social prescribing pathway means formalizing the process at a centre, defining what is in and out of scope, setting boundaries as a link worker/volunteer, and building client trust. Healthcare providers noted that other factors facilitating social prescribing were using multimedia communications to showcase the work (e.g. newsletters or TVs in the waiting area), providing feedback to providers about successful referrals so that they understand the value of the work (i.e., closing the loop), and having a dedicated link worker on staff.
- Scaling up the model. An important strategy to scale this social prescribing model was to help SALCs build relationships with diverse types of healthcare providers, such as mental health practitioners, community pharmacists, and community paramedics. Building relationships with these types of providers helps increase the reach of social prescribing initiatives, especially among older adults who may not be attached to a primary care provider. This greatly contributed to the project's overall success, as 50% of referrals have come from these sources.

Provider Feedback

"I had one lady in her late 80s, and she would come in to see me, and she would have a spiral notebook with multiple pages of complaints written – my hearing, my balance, and so on. So, I sent her to one of these groups, and she was delighted to be able to share her experiences with other people. As we age, some problems become chronic, and we can try to improve symptoms, but having an outlet like that is significant. I saw her afterwards and her spiral notebook a lot less because she was hearing what she needed to hear and being able to have the exchanges she wanted to have."

"I love getting other people into their circle of trust. Sometimes, the Meals on Wheels person calls me and tells me that this guy who opens the door simultaneously every day didn't come to the door. So I know to call the emergency services. These people who were providing social prescriptions are part of the care team because they know the client's schedules so well, and if something isn't happening that normally does, that something's off."