

Green Health & Well-Being Programme – follow-up from June HWB meeting discussion

Minutes of June formal board: *Priority 2: The Principal Lead – Health and Wellbeing (SCC) will follow up with partners and will share information on the buy in regarding the Green Health and Wellbeing programme; the time scale of embedding the programme and whether there was an impact assessment of the initiatives and value for money will be shared.*

Summary / Ask of the HWB

Aligned to all the Surrey Heartlands ICS ambitions, Surrey's Green Health and Wellbeing programme provides person-centred, community-based and sustainable models of clinically effective health care. These models have the potential to reduce demand on health and care services, especially related to primary care and mental health.

Through the Green Health and Wellbeing Programme:

- 42% participants reported reduced anxiety
- 75% participants reported increased happiness
- 75% reported increased life satisfaction
- 66% reported their lives being more worthwhile.

This was achieved at an average cost of £225 per person (compared to the £493 average cost of low intensity iapt therapy).

As a result of the programme:

- 75 people from priority populations have volunteered on pro-environmental projects
- 8 young people at risk of exclusion have gained City and Guilds qualifications
- 2 young people who were previously disengaged from treatment are now accessing CAMHS support in the new therapy garden
- 120 health care professionals, including 20 staff from SABP, have engaged in nature-based wellbeing or training
- 320 partners have connected in Surrey's Green Health & Wellbeing Network

Residents have shared their experiences in their own words in the following short films:

- [Young people share their experiences of nature-based psychological therapy delivered by Dose of Nature volunteers](#)
- [Health care professionals share the impacts of nature access on staff wellbeing and retention](#)
- [Residents with mental health conditions share how their lives have been changed by nature exposure](#)
- [Residents explain how different opportunities in nature have encouraged them to access support](#)

The Green Health and Wellbeing programme is a comparably cost -and clinically effective programme, that requires on-going coordination funding in order to secure these benefits at scale:

- to embed the approaches within Surrey's mainstream health and care offer;
- to ensure priority populations access nature to reduce health inequalities; and
- to deliver cross-functional impact on our organisation priorities.

This further activity requires funding, ideally linked to a system commitment to roll out the approach at scale. This could include:

- Recognising lack of access to nature as a contributor to health inequality, especially for priority populations and key neighbourhoods.
- Support to write nature for health and wellbeing into all strategies and policies across the ICS.
- Funding for on-going salary costs for the coordinating roles (@£176k per year)
- A system-wide conversation about commissioning nature-based alternatives where they demonstrate comparable efficacy but greater inclusivity than other existing commissioned services.

Background and evidencing

As discussed, there is a broad and robust [evidence base](#) that exposure to green and blue spaces improves health and wellbeing outcomes for adults and children. For participants in Surrey's test and learn green social prescribing programme:

- 42% participants reported reduced anxiety
- 75% participants reported increased happiness
- 75% reported increased life satisfaction
- 66% reported their lives being more worthwhile.

This was achieved at an average cost of £225 per person (compared to the £493 [average cost](#) of low intensity iapt therapy). [Evidence](#) from national evaluations tell us that for every £1 spent supporting people through social prescribing approaches also produces more than £10 of benefits in terms of better health, and a statistically significant reduction in General Practitioner (GP) consultation rates.

To achieve these benefits at scale and bring about systemic transformation in how we use access to nature to address health inequalities, funding is required beyond that for individual, localised delivery.

The Green Health and Wellbeing programme encourages local providers to access a wide range of funding streams to continue on-going local delivery. This includes accessing the Mental Health Investment Fund (MHIF), as well as using the social value marketplace and applying for other grants.

However, in addition to this local delivery funding, system funding for coordination capacity is also required.

We know those experiencing health inequalities, are less likely to access community resources or other support, so further targeted interventions are required to encourage nature access from underrepresented groups. The Green Health and Wellbeing programme is implementing approaches such as:

- First Step Volunteering, which supports under-represented groups to take part in nature volunteering and skills development.
- Muslim Eco-warriors, supporting women from Asian backgrounds to take part in pro-environmental behaviours and nature connectedness
- Key neighbourhood focused approaches such as community growing projects and urban greening

Based on the impact of the Green Social Prescribing Test and Learn site, as detailed in the statistics above, it is a logical next step to secure these benefits at scale. To achieve this and transform our statutory services we need to embed access to nature in our mainstream

Annex 2

health and care offer. This necessitates a cultural shift for staff as well as changes to clinical strategy and practice.

As an example: the Green Social Prescribing programme has piloted Dose of Nature in one neighbourhood in Surrey. This programme offers a nature-based alternative to talking therapies, with equivalent clinical efficacy. The Dose of Nature reliably improved recovery rates for anxiety and depression between 77-96%. This is significantly better than the NHS CBT recovery rates of between 45-53%. In addition, it can be run by volunteers, so is deliverable at significantly less cost than traditional iapt services. Yet this effective, value for money approach has not yet been adopted across Surrey Heartlands. Continued green health and wellbeing programme capacity is required to ensure cost effective approaches such as this are adopted within Surrey Heartlands clinical and commissioning strategy.

As we explore new models like this we can also see the cross-functional benefits of connecting health and wellbeing and the environment sector. Joining up local nature recovery, land management and the 2030 climate strategy with health and care delivery could bring about significant system transformation and address our key priorities. Without continued funding for green health and wellbeing programme coordination, these cross-system connections are at risk of being missed, and not securing the benefits of working as a coordinated whole.

We also need on-going infrastructure capacity to be able to monitor the above benefits over time, which we aim to do as part of a new partnership with Exeter University to measure the use and impact of green and blue assets to tackle health inequalities.

In summary, whilst we have seen strong outcomes from the green health and wellbeing work to date, more activity is needed to embed at scale within our mainstream health and care offer; to ensure priority populations access nature to reduce health inequalities; and, to deliver cross-functional impact on our organisation priorities. This further activity requires funding, ideally linked to a system commitment to roll out the approach at scale.

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