



Evidence Search results

Search topic:	Social prescribing for perioperative care
Date requested:	9/1/26
Date completed:	12/2/26
Search completed by:	Jess Pawley
Number of results selected:	20
Time taken:	6h 45m

Citing this evidence search

If you reference this search in any paper, publication or presentation, please let us know and use the following format:

Pawley, J, (2026). *Evidence summary: Social prescribing for perioperative care*. Taunton, UK: Somerset NHS Foundation Trust Knowledge & Library Service.

Summary of results

Summary generated in part using AI

Please note that I have mainly included results which are not specific to perioperative care, largely because this was too specific and did not yield many results, but also because the wider approach may also provide applicable/transferrable elements in the context of service evaluation. Not all of these will be relevant. Further papers were found on this broader topic and can be provided if needed.

Of particular interest may be the [Northern Ireland/Scotland SPRING Social Prescribing Evaluation Report](#). SPRING works by “connecting people to sources of support in their community”, and uses the following [delivery model](#). They work in partnership with everyone from the people using services, through to government and decision/policy-makers.

Qualitative and quantitative feedback indicates that those referred to SPRING can be difficult to engage, and come from a range of referral backgrounds, with social isolation and low level mental health being by far the main reasons.

Some key points:

- “all beneficiaries highlighted that the positive impact benefits would not have been achieved without 1-1 support from the SPRING social prescriber”
- “the service is person-centred, flexible and tailored to meet individual needs”
- “all beneficiaries reported some degree of improvement in their health and wellbeing”

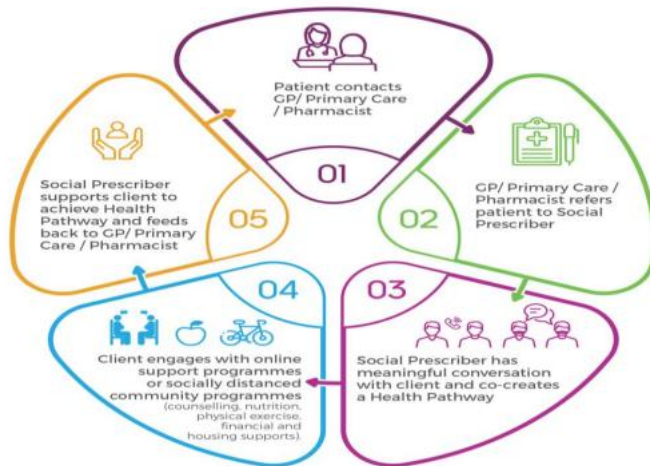


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- “Before SPRING, the only option was signposting people to community services... also highlighted as facilitating greater access to very vulnerable and hard-to-reach populations”
- “for those suffering with loneliness and social isolation, this programme has reduced the number of visits to medical services”

1.6. The diagram below summarises the SPRING delivery model:



[The National Academy for Social Prescribing \(NASP\)](#) has included a case study from [North East and North Cumbria](#) – the Waiting Well initiative looked at addressing “some of the starkest health inequalities in the country” and included Priority 4 surgical patients waiting for hip or knee replacement. Staff worked with patients to set goals around housing adaptations, any benefits they may be entitled to and support with weight loss. The team encountered challenges around the use of data for referrals as their digital dashboard did not at the time include information about use of pain drugs. The first year of delivery saw some positive changes, with plenty for the team to build on.

[The NASP](#) have also provided a [general overview on social prescribing](#).

[A case study on Nottingham University Hospitals NHS Trust](#) describes link workers based in A&E who work with patients to “provide a range of targeted support” and aim to prevent repeat attendances.

[Two resources from the King’s Fund](#) include another general overview on social prescribing (not specific to perioperative care) and a blog post looking at social prescribing for older people experiencing financial hardship. The latter may be of particular interest in the context of wider social determinants of health. The piece acknowledges that this group is hard to engage with services and so services must join up ensure their offer is far-reaching.

Some key points from the [published papers](#):

The 2018 systematic review and meta-analysis by [Szeverenyi et al.](#) synthesised 62 randomised controlled trials (n=4,908) of adjunct psychosocial interventions in orthopaedic surgery.

Overall effectiveness

Psychosocial interventions, delivered in addition to usual perioperative care, produced:

- Reduced postoperative pain



- Reduced preoperative anxiety
- Improved recovery

No statistically significant pooled effects were found for:

- Postoperative analgesic use
- Quality of life

The authors judged overall evidence quality as generally low, emphasising the need for more research.

[Morse and colleagues](#) use a health-systems lens to describe how social prescribing has spread from a UK innovation to a rapidly globalising model linking clinical care to community supports across 17 countries. Social Prescribing is framed as a way to tackle social determinants of health while promoting person-centred, integrated care beyond the biomedical model.

[The study from Fattorini et al](#) examines how different stakeholders in England understand social prescribing as it is delivered via link workers in primary care. It highlights that social prescribing is seen less as a single intervention and more as a complex, integrated ecosystem whose potential depends on shared understanding and system design.

I hope this is helpful. Please contact the Library if you would like any further information or would like to revise your search: library@somersetft.nhs.uk.

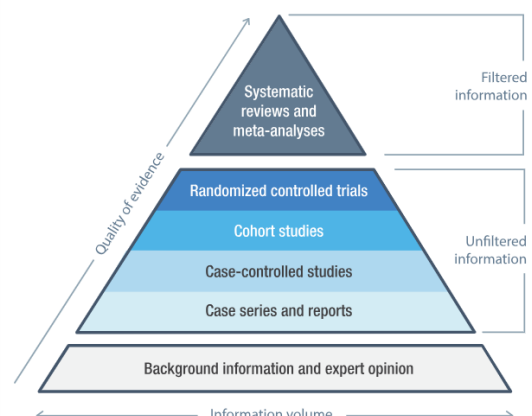
We would like to capture information about the impact this evidence search has had on your practice or decision—making. We can use this to promote this service to others within the Trust and it also ensures this service continues to develop and meet the needs of everyone who uses it. Please take a few moments to complete our short [impact survey](#).

Search results

Full-text access:

Abstracts are provided where available. To check if the full-text of an article is available, click on the links provided and log in with your NHS OpenAthens username and password, if prompted. You can register for an NHS OpenAthens username and password at: <https://openathens.nice.org.uk>. If there is no link, or the full-text is not available to you, please send the details of the article to library@somersetft.nhs.uk or and we will try and find it for you.

For your information, and to help you assess the quality of the research, here is a [hierarchy of the quality of evidence](#) that you may find useful:





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- [Examples from other organisations](#)
- [Reports/guidance](#)
- [Published papers](#) – ranked in order of relevance

Examples from other organisations

[Nottingham and Nottinghamshire Social Prescribing Partnership scoops national Partnership of the Year award - NHS Nottingham and Nottinghamshire ICS - NHS Nottingham and Nottinghamshire ICS](#)

[How social prescribing supports people on waiting lists for surgery - National Academy for Social Prescribing | NASP](#)

[Social Prescribing | UKMSA | Men's Sheds Association](#)

Reports/guidance

[SPRING Social Prescribing Project - Evaluation Report - Nov 2020 to Dec 2022](#) – Partnership between the Scottish Communities for Health and Wellbeing, the Healthy Living Centre Alliance Northern Ireland and Bogside & Brandywell Health Forum

[Physical Activity - National Academy for Social Prescribing | NASP](#)

[What Is Social Prescribing? | The King's Fund](#)

[How To Make Social Prescribing Effective For Older People Experiencing Financial Hardship | The King's Fund](#)

[FSEM - Integrating Physical Activity into Patient Care with Moving Medicine](#) – Faculty of Sport and Exercise Medicine UK. 2025

[Changing lives, changing places, changing systems – National Voices](#)

Published papers – ranked in order of relevance

[The Use of Adjunct Psychosocial Interventions Can Decrease Postoperative Pain and Improve the Quality of Clinical Care in Orthopedic Surgery: A Systematic Review and Meta-Analysis of](#)





[Randomized Controlled Trials](#)

Szeverenyi et al, Journal of Pain, 2018

[Global developments in social prescribing](#)

Morse et al, BMJ Global Health, 2022

[Stakeholder understanding of social prescribing in England: a qualitative study in primary care](#)

Fattorini et al, BMC Primary Care, 2025

[Equal, equitable or exacerbating inequalities: patterns and predictors of social prescribing referrals in 160 128 UK patients](#)

Bu et al, British Journal of Psychiatry, 2024

[Cross-sector perspectives on the role of a UK national cultural asset in social prescribing: a qualitative study](#)

Davis, BMC Primary Care, 2026

[Qualitative exploration of service users and social prescribing link workers of the Armed Forces Community social prescribing scheme in Cornwall](#)

Polley et al, BMJ Open Quality, 2026

[“Walking around the golf course is the exercise you need”: Exploring the acceptability of a golf on referral scheme amongst participants through post-programme focus groups](#)

Warne et al, BMC Primary Care, 2026

[Prescribing parkrun: a simple, cost-effective solution for sustainability, improving wellbeing, reducing loneliness, and disease prevention](#)

Khanji et al, European Heart Journal, 2022

[Association of Social Support with Rehabilitation Outcome among Older Adults with Hip Fracture Surgery: A Prospective Cohort Study at Post-Acute Care Facility in Asia](#)

Zhu et al, Journal of the American Medical Directors Association, 2023





[Prehabilitation Before Surgery: A \(Social\) Prescription for Change](#)

Mastracci, European Journal of Vascular and Endovascular Surgery, 2022

[Assessing the impact of social prescribing on wellbeing outcomes: A national analysis of UK data](#)

– not peer reviewed

Bu et al, medRxiv, 2025

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Keywords/search strategy	Limits used
Social determinants of health Social prescribing Perioperative social prescribing Could also consider: postoperative Surgical/surgery Social support Prehabilitation (as a related term with some overlap) Perioperative prescribing Psychosocial support /systems Psychological support	

Databases/sources used		
<input checked="" type="checkbox"/> Pubmed	<input type="checkbox"/> HMIC	<input type="checkbox"/> BMJ Best Practice
<input type="checkbox"/> MEDLINE	<input type="checkbox"/> Social Policy & Practice	<input type="checkbox"/> UpToDate
<input type="checkbox"/> Emcare	<input type="checkbox"/> CINAHL	<input checked="" type="checkbox"/> Trip Pro
<input type="checkbox"/> Embase	<input type="checkbox"/> PsycINFO	<input type="checkbox"/> Cochrane Library
<input type="checkbox"/> Knowledge & Library Hub	<input checked="" type="checkbox"/> Google Advanced/Scholar	
Other (please list): KnowledgeShare, NHS Fab, Centre for Perioperative Care, Healthcare Improvement Scotland, King's Fund, LinkedIn, CoPilot		

inSPIRE repository





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The (anonymised) results of this search will only be shared in the repository if you have given your permission to do so (we ask this in the evidence search request form).

Has permission to share these results been given?

Yes – share

No – do not share

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