



# LEGISLATIVE ASSEMBLY

## FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON EDUCATION AND COMMUNITY INCLUSION  
Mr Michael Pettersson MLA (Chair), Miss Laura Nuttall MLA (Deputy Chair),  
Ms Nicole Lawder MLA

### ANSWER TO QUESTION TAKEN ON NOTICE (QTON)

#### Public Hearing - Inquiry into Loneliness and Social Isolation in the ACT

#### Tuesday, 28 May 2024

Asked by Mr Michael Pettersson MLA on 28 May 2024: Ms Emma Davidson MLA, Minister for Mental Health and Minister for Population Health took on notice the following question:

Ref: Hansard - Uncorrected Proof Transcript (UPT), 28 May 2024 pages 25–26.

In relation to: Social prescribing – action by ACT Government

**THE CHAIR:** Thank you. Minister, it has been raised from many times with the committee throughout the inquiry a need for a social prescription model here in ACT. Is this something that the ACT government has considered for the ACT?

**Ms Davidson:** Yeah, so that is something that we have been talking about for a while in terms of how would we make that that kind of program work. We have also been looking at nature prescribing as well, and EPSTD has done some really good, important work in what impact that has on people's sense of social connection and connection to the environment around them and their mental wellbeing that flows from that. So it is something that is—it is an area where we are building knowledge. I do not know if Sarah would want to speak to the impact of social prescribing and whether that is something that you can provide more detail on. But it is certainly—it is a piece of work where it actually requires some good interaction and engagement as well with Commonwealth Government, because some of that social prescribing work goes to how our GPs are talking with people about what they are doing and how that impacts on their wellbeing.

GPs being a mostly Commonwealth subsidised and regulated area. It is not going to be possible for us to do it on our own. We are going to need to be able to work collaboratively with the Commonwealth Government to make something like that work.

**Dr Miller:** Yes, thank you, Minister. I can complement that by saying I agree with your comments. It is such a constructive role in really trying to prescribe non-medical or community support through social event. So there is a population health or a public health requirement for us to increase awareness about this. So how can our medical sector understand that prescribing non-medical concepts can have a mental health and wellbeing outcome, and how can our community accept and acknowledge receiving that type of referral and the wellbeing benefits that might have been from that non-medical type of concept?

**THE CHAIR:** Okay. So where in government is this work being done? Health directorate?

**Ms Davidson:** So at the moment, yeah, I would expect that that would be an ACT health directorate piece of work rather than a CHS piece of work.

**THE CHAIR:** We know this work is underway, or we suspect it is underway?

**Ms Davidson:** I could take on notice, you know, where things are up to at the moment in detail, but it is something that has been talked about.

Ms Emma Davidson MLA: The answer to the Member's question is as follows:

Social prescribing is a means of connecting people to a range of non-clinical services in the community to improve their health and well-being. It builds on the evidence that addressing social determinants of health such as socioeconomic status, social inclusion, housing, and education is key to improving health outcomes<sup>1</sup>.

The ACT Government is testing an innovative model to optimise wellbeing in the community and reduce pressure on ACT emergency departments and public hospitals through the ACT Primary Care Pilot (the Pilot).

The Pilot is a collaboration between the ACT Health Directorate, Canberra Health Services and Capital Health Network, and is funded by the Australian Government.

The Pilot model aims to strengthen partnerships between primary care, community-based care, and the public health system to support access and care for patients who frequently visit the Emergency Department (ED) or who are at risk of presentation to the ED or admission to hospital.

The focus of the Pilot is on diversion and prevention by making the connections to community, social and other services required to support wellbeing. This is done through the use of social workers and other clinicians being skilled to support participating patients to access services to manage their health and wellbeing.

Approved for circulation to the Standing Committee on Education and Community Inclusion

Signature: *Emma Davidson*

Date: 6 June 2024

By Emma Davidson, Minister for Mental Health

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<sup>1</sup> <https://www.who.int/publications/i/item/9789290619765>