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Exploring whether social prescribing can help people living with dementia: A feasibility study

Submission date
19/11/2025

Recruitment status
Recruiting

Registration date
11/12/2025

Overall study status
Ongoing

Last Edited
20/04/2026

Condition category
Mental and Behavioural Disorders

[X] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[_] Results
[_] Individual participant data
[X] Record updated in last year

Plain English summary of protocol
Background and study aims
The study is looking at how we can improve access to social prescribing and how it can support people living with dementia (PLWD). Social prescribing is a free service that connects people to local activities, groups, and support. Evidence suggests that social prescribing may be important post-diagnosis support for PLWD and promote social engagement, reduce loneliness, and enhance overall well-being. As part of the study, we have designed training to help 'social prescribers' or 'link workers' better support PLWD. The aim is to test the SPLENDID social prescribing to usual care. This initial (feasibility) study will help us decide whether to run a larger study in future. The main objectives are to test the procedures to identify and recruit PLWD, test the procedures for collecting outcome data and to see how well the SPLENDID intervention is accepted and delivered.

Who can participate?
People living with dementia (18 years old or more, living at home, diagnosed with dementia in the last 2 years), their carer if nominated and practice staff including social prescribing link worker.

What does the study involve?
We aim to recruit 10 GP practices, each with a social prescribing link worker (SPLW). To see if our training supports PLWD access social prescribing, we need to compare it with usual care. To do this, we will provide training to half of the GP practices in the study. Which GP practice receives the training is chosen at random by a computer. Eligible PLWD at GP practices in the 'intervention' group, where the SPLWs are offered the dementia specific training, will be invited to receive SPLENDID social prescribing for 12- weeks. PLWD at GP practices in the control group will continue to receive usual care. In addition, 70 PLWD (and their carer/family member/friend) will be recruited across all the practices to answer a questionnaire at the beginning of the study and 14-weeks later. Patient records will be used to find people who are eligible and may be invited by healthcare professionals at appointments.

What are the possible benefits and risks of participating?
Participant feedback and experience is important to help us understand how to improve services for people living with dementia. Taking part could help others in the future if we find that we

can run a larger trial to see if the training helps people living with dementia access social prescribing services. In our other studies, people have said that they found it interesting to take part and enjoyed having their views listened to. We do not think there are any risks in taking part in this study, but some participants might find it upsetting talking about their health and/or feel fatigued completing the study questionnaires.

Where is the study run from?
The study is organised and run by the Norwich Clinical Trials Unit at the University of East Anglia. The University of East Anglia is the Sponsor for the study and has overall responsibility. Other researchers (collaborators) are helping with the study. They are from Newcastle University, King's College London, University of Hull, University of Exeter, University of Southampton, University of West London and the University of Nottingham.

When is the study starting and how long is it expected to run for?
The study is expected to start in February 2026 and will run for 10 months.

Who is funding the study?
The study is funded as part of the programme grant from the National Institute for Health and Care Research, UK. (PGfAR NIHR203280)

Who is the main contact?
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Additional identifiers

Integrated Research Application System (IRAS)
344393

Central Portfolio Management System (CPMS)
65118

National Institute for Health and Care Research (NIHR)
203280

Study information

Scientific Title
SPLENDID Feasibility Study: A cluster randomised implementation feasibility study of social prescribing for people living with dementia in the community

Acronym
SPLENDID Feasibility Study

Study objectives
This study is designed to see whether it’s practical to carry out a larger research project in the future. We want to find out if the study design and the SPLENDID social prescribing approach are acceptable to both patients and healthcare staff. To do this, we’ll look at how many people take part, how many stay in the study, and how complete the data is (such as health records and questionnaires). We’ll also collect information about how people use healthcare services, their quality of life, and how closely the social prescribing support is delivered as planned. This will help us understand what works well, what could be improved, and whether a larger study would be worthwhile.

Ethics approval required
Ethics approval required

Ethics approval(s)
approved 05/12/2025, South Central - Berkshire Research Ethics Committee (2 Redman Place, Stratford, London, E20 1JQ, United Kingdom; +44 2071048143; berkshire.rec@hra.nhs.uk), ref: 25/SC/0371

Primary study design
Interventional

Allocation
Randomized controlled trial

Masking
Blinded (masking used)

Control
Placebo

Assignment
Parallel

Purpose
Treatment

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Dementia and Neurodegeneration

Interventions
Five of the practices will deliver SPLENDID social prescribing and five will continue to provide usual care (i.e. social prescribing at usual rate). Social prescribing link workers at intervention practices will receive SPLENDID social prescribing training. Other practice staff at intervention practices will receive shorter training on referring people living with dementia to SPLENDID social prescribing. Social prescribing link workers and practice staff (e.g. GP, other healthcare professionals, practice staff) will be invited to take part in optional interviews and/or complete the health economic 'preference survey'. At intervention practices, eligible people living with dementia will be identified from patient records by site staff at recruiting sites or approached by GP or other staff at routine appointments, and invited to receive SPLENDID social prescribing. If they agree, the person living with dementia will be allocated a social prescribing link worker who will offer up to 6 appointments over 12-weeks. The first and final session are key and the social prescribing link worker can offer an additional four if the person living with dementia would like them. The social prescribing may continue beyond 12-weeks if the person living with dementia wishes (e.g. they may continue to attend groups referred to them). At the control practices, eligible patients will receive usual care including social prescribing routinely offered.

Intervention Type
Other

Primary outcome(s)
1. Number of sites (GP practice) recruited over the course of the study measured using study records at end of study

2. Feasibility and acceptability of SPLENDID training and delivery amongst social prescribing link workers (SPLW) measured using the number of Social Prescribing Link Workers (SPLW) who consent to take part in study and the number of SPLW who complete SPLENDID training at over the course of the study

3. Feasibility and acceptability of SPLENDID social prescribing amongst people living with dementia (PLWD) measured using the number of People Living With Dementia (PLWD) invited to SPLENDID, number (and percentage) who agree to receive SPLENDID, number (and percentage) who complete SPLENDID at over the course of the study

4. Percentage of PLWD who discontinue SPLENDID social prescribing measured using patient records at end of study

5. PLWD and carer recruitment and attrition rates of the Patient Reported Outcome Measures (PROMS) study measured using records at over the course of the study

6. Ability to collect data (including PROMS, routine data from medical records and process evaluation) to address outcomes for the definitive study measured using percentage of PLWD participants who consent to PROMs study, who remain in the study and provide valid outcome measure data and health-economic measures at 14-week follow-up, completeness of PROMs data, completeness of routine data collected from medical records for PLWD, proportion of practice staff (e.g. SPLWs who take part in process evaluation activities (interviews, observations), number of SPLENDID sessions observed, number of PLWD who agree to talk about their sessions with a researcher and number of interviews with practice staff conducted at over the course of the study

7. Inform iterative refinement of the SPLENDID social prescribing pathway and intervention for the definitive study measured using an estimation of the mean, standard deviation and intra-class correlation coefficient (ICC) for the proposed primary outcome of the definitive study for a formal sample size calculation at one time point

8. Ability to collect data to assess the cost effectiveness and resource use for the definitive study measured using study date at one time point

Key secondary outcome(s))

1. Demographics measured using data collected at baseline

2. Cognition measured using the Montreal Cognitive Assessment 5 minute/Telephone (T-MoCA) at baseline and 14-week follow-up

3. The levels of engagement and independence in individuals with dementia measured using the Engagement and Independence in Dementia Questionnaire (EID-Q) at baseline and 14-week follow-up

4. Quality of life for individuals with mild to moderate dementia measured using the Bath Assessment of Subjective Quality of Life in Dementia (BASQID) at baseline and 14-week follow-up

5. Hope and resilience experienced by individuals with dementia measured using the Positive Psychology Outcome Measure (PPOM) at baseline and 14-week follow-up

6. Mental well-being measured using the World Health Organization-Five Well-Being Index (WHO-5) at baseline and 14-week follow-up

7. For intervention group only: understand and prioritise what the PLWD would like support with measured using the Measuring My Concerns and Wellbeing (MYCaW) is used by the SPLW at at the initial SPLW session

8. Health-related quality of life measured using the EuroQoL 5-Dimension 5-Level (EQ-5D-5L) at baseline and 14-week follow-up

9. Quality of life measured using the ICEpop Capability measure for older people aged ≥65 (ICECAP-O) at baseline and 14-week follow-up

10. Health and social care service use by the PLWD measured using the Client Service Receipt Inventory (CSRI) at baseline and 14-week follow-up

Completion date
30/11/2026

Eligibility

Key inclusion criteria
GP practices:
To participate in the study, site Principal Investigators (PI) and sites must fulfil a set of criteria that have been agreed by the SPLENDID Programme Management Group (PMG) and that are defined below:
1. GP practice is willing and able to adopt the intervention into routine care.
2. At least one SPLW that provides social prescribing for patients registered at the surgery, willing to take part in the study.
3. A named clinician who is willing and appropriate to take Principal Investigator (PI) responsibility.
4. Practice staff who are willing and have sufficient workload capacity to recruit patients and enter data into the study database.

Social Prescribing Link Worker:
1. Involved in the social prescribing pathway for patients registered at the practice.
2. Willing to be trained to deliver SPLENDID.

People living with dementia (PLWD) invited to SPLENDID social prescribing (intervention practices):
1. Aged >= 18 years at time of invitation to SPLENDID.
2. Clinical diagnosis of dementia of any subtype within the last 2 years.
3. Living at home (not in a care home).

PLWD inclusion criteria to take part in the Patient Reported Outcome Measures (PROMs) study. In addition to the inclusion criteria above, PLWD must meet the following criteria to be invited to provide PROMs:
1. Able to communicate in English sufficiently well to answer questionnaires, as assessed by the research nurse or equivalent during the consent process
2. Has mental capacity to provide informed consent to the PROMS study OR has a consultee
3. Has mental capacity to answer questionnaires

Carers:
1. Aged >= 18 years at time of consent.
2. Able to communicate in English sufficiently well to complete the questionnaires, as assessed by the research nurse or equivalent during the consent process.
3. Cares/supports the PLWD providing PROMs.

4. Has mental capacity to provide informed consent and answer questionnaires.
5. Cares/supports the PLWD providing PROMs.

Participant type(s)
Carer, Health professional, Patient

Healthy volunteers allowed
No

Age group
Mixed

Lower age limit
18 years

Upper age limit
100 years

Sex
All

Total final enrolment
0

Key exclusion criteria
GP Practices:
GP practices without SPLWs for the duration of the study.

Social Prescribing Link Worker:
Working at another GP practice taking part in the study which is randomised to a different arm.

PLWD for Patient Reported Outcome Measures (PROMs) study:
1. Unable to communicate even with augmentative and alternative communication support.
2. Awaiting a move to residential care.
3. Undergoing end of life care, life expectancy < 6 months.
4. Taking part in another interventional dementia study.
5. Has already taken part in another work package in the SPLENDID research programme.

Carers:
1. Reports feeling overburdened or has severe, unstable (mental or physical) health problems.
2. Diagnosis or health condition that may impair their ability to complete questionnaires, as assessed by the research nurse or equivalent during the consent process.
3. Taking part in another interventional dementia study.
4. Paid, professional carer.

Date of first enrolment
11/05/2026

Date of final enrolment
30/06/2026

Locations

Countries of recruitment
United Kingdom

Study participating centre
Sites have not been identified yet
-
-
England
-

Sponsor information

Organisation
University of East Anglia

ROR
https://ror.org/026k5mg93

Funder(s)

Funder type
Government

Funder Name
National Institute for Health and Care Research

Alternative Name(s)
National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

Funding Body Type
Government organisation

Funding Body Subtype
National government

Location
United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

Requests for access to study data will be considered, and approved in writing where appropriate, after formal application to the PMG/PSC.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Study website			04/12/2025	No	No