

## **How to get your activities on prescription**

Fill in the slip and put it in the repeat prescription box in your **GP Surgery** (no appointment is needed) or take it to your **Social Worker**. If they agree you should be entitled to free workshops, they will sign and return the slip to you. Please return the signed form to Taking Part Workshops by either dropping it in, or posting it to Taking Part Workshops, Town Hall, High Street East, Wallsend, NE28 7RR and we will contact you to book you into your choice of available sessions.

Activities on offer change regularly, previous activities have included: Drumming, singing, drama, craft, woodwork, photography...

See a full list of what's on offer near you at [www.takingpartworkshops.org.uk](http://www.takingpartworkshops.org.uk)

These workshops are for people who want to get out more, make a practical change in their life to help to get more confident, and meet new people in an understanding environment. This helps to improve your health and wellbeing, which is what Taking Part Workshops is all about.



# **Taking Part Workshops**

**...Creating Better Health**

*Stressed?*

*Depressed?*

*Want to get out more?*

## **Activities on Prescription in North Tyneside**

# Taking Part Workshops

## For the participant:

Name .....

Address .....

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.....

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Tel/Mob. ....

Signature .....

## For the referrer:

You have received this slip because the person named above wants to enrol in workshops that aim to help improve their wellbeing and mental health. If you agree that the person should attend the activities at no cost to them, then please complete and sign the section opposite.

• What alternative services would you have referred to if this was not available?

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• What are the expected outcomes?

Improved confidence and self esteem

Development of new coping strategies

Decreased reliance on mental health services

Support accessing groups, volunteering or facilities

Strengthen social relationships

Engagement with local community

Achievement of personal goals

Other (please state) .....

.....

Practice Stamp or  
ASC Team Name

Name .....

Signature .....

If you have any queries, please call 0191 262 1808  
or email [takingpartworkshops@nhs.net](mailto:takingpartworkshops@nhs.net)