

# Glasgow City HSCP Community Link Worker Programme



Annual Report  
1st April 2020 - 31st March 2021

Delivered by  
The Health and Social Care  
Alliance Scotland  
and  
We Are With You



## Introduction

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Welcome to the 20/21 annual report for the Community Link Programme in Glasgow. This report focuses on the work carried out by Community Link Workers\* (CLWs) who are funded as part of Glasgow City's Primary Care Improvement Plan. The report details the programme's response to the Covid-19 pandemic, and the progress and development of the programme over a 12 month period ending on 31st March 2021. Key highlights include:

- Continuous delivery throughout the pandemic, utilising telephone and online appointments; and, when restrictions allowed, walk-and-talk and face-to-face appointments
- Support for shielding patients and increasing referrals throughout the year
- Holistic, person-centered support offered to patients referred to the service, providing both simple signposting and complex support to patients depending on their needs
- Supporting high numbers of people affected by poverty, low income, and mental health & wellbeing issues. Social isolation remained a key issue and an increase was seen in relation to gender based violence
- Addressing digital exclusion through the Connecting Scotland Programme: continuing existing group support by moving groups online and creating new online groups to meet peoples' needs

The creativity, commitment and determination of our Community Link Workers / Practitioners across the City is the programme's biggest highlight, and we would like to take this opportunity to offer them our thanks. We also wish to thank the groups and services they connected people with throughout the past year - your work is invaluable.

\* Community Link Workers are also known as Community Link Practitioners in Glasgow City.

### Find out more from:

Links Worker Programme - In the Community  
([alliance-scotland.or.uk](http://alliance-scotland.or.uk))

Community Link Workers - With You  
([wearewithyou.org.uk](http://wearewithyou.org.uk))

### On Twitter

@we\_links  
@LWPMakeslinks  
#makeslinks

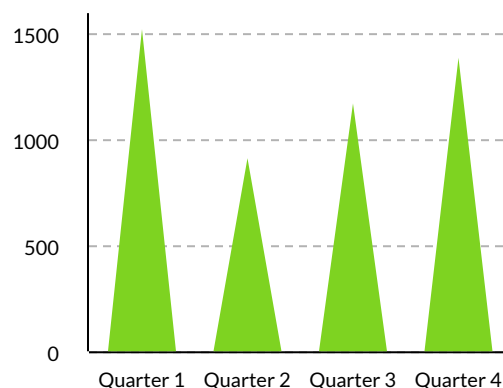
# Referrals and Engagement

## Referral levels

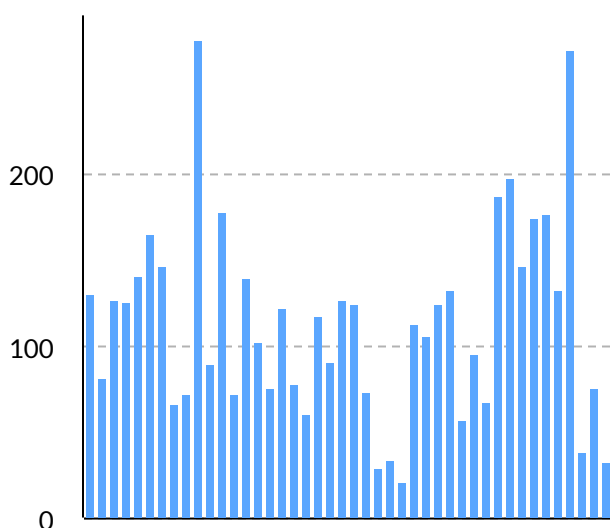
The graph in Figure 1 illustrates the number of referrals received in each quarter of 20/21. The spike seen in quarter one represents the surge in referrals for shielding patients from practices (although not all practices chose to use their CLW in this way).

And, like most services, CLWs saw a dip in referrals in quarter two. However, increases were seen across the rest of the year. Overall 4,996 referrals were made to the service over the year. We are unable to compare this to previous years due to the increase in numbers of CLWs across the City during the year.

**Figure 1:** Number of referrals to CLWs during 20/21



**Figure 2:** Number of referrals to CLWs from GP Practices



There is large variation in the level of referrals from GP practices over the past year, as can be seen in Figure 2.

It is important to note that six of our CLWs only joined their practices later in the year which will account for some variation. We are also aware of under-recording in some practices as a result of challenges with remote access - a direct impact of the pandemic. Other reasons for lower referral levels include CLW absence and pressures within GP practices.

Work continues with our providers and GP practices to better understand ways of working and to highlight opportunities for improvement in practices with low referral levels, as well as learning from the experience of CLWs in practices with high levels of referrals.

*"I'm so glad I've got you to refer patients onto when I don't know the answers to what can help them. It makes me feel relieved knowing I'm not leaving them without the support they need and means I can focus on other (medical) issues that they might be having. Thank you*

*GP from a links practice*

## Who refers to CLWs?

GPs are the main source of referral to CLWs: their referrals account for 71% of all referrals received through the ALLIANCE CLW programme and 85% of all referrals seen through We Are With You CLW Programme. We believe some of the difference in referral rates across our services relate to practice knowledge of the service and CLW embeddedness in the practice multi-disciplinary team (MDT) which takes time.

Other members of the practice MDT, including non-clinical team members, can refer patients to the CLW. Self-referrals can also be made, currently these account for between 4% and 6 % of all referrals across our service providers.

A total of 4,631 first appointments were carried out by CLWs. This gives a FANTASTIC overall engagement rate of 93%!!

The use of telephone appointments allowed additional flexibility for patients wishing to engage with CLWs. Messaging people using WhatsApp and text allowed appointments to be arranged at a time to suit the patient (e.g. at a time when an individual could get out for a walk to enable them privacy from other household members).

# 93%

## Engagement

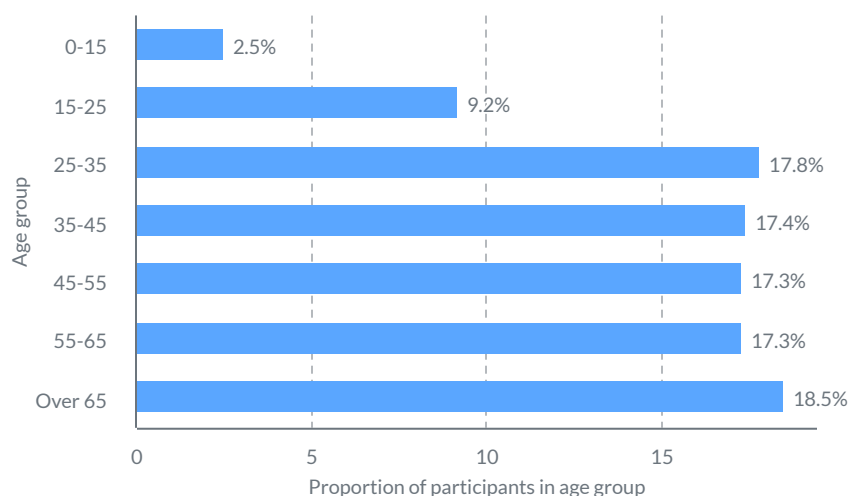
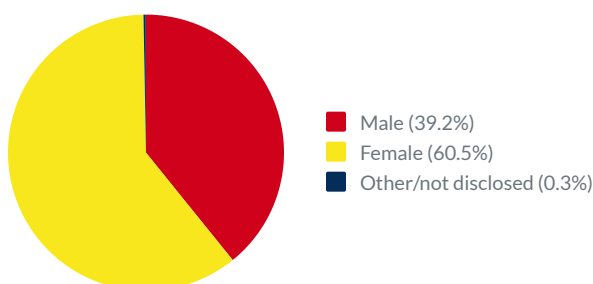
based on number of 1st appointments after referral across the programme



*"It's been brilliant to have a CLW in practice - what a difference! I now don't feel uncomfortable hanging up the phone on someone because I know we can hand over to our CLW who can help them"*  
**Reception staff, GP practice**

## Demographics

Illustrated below is a summary of the demographic information we have gathered from the people who engaged with the CLW programme. As a programme, we are committed to capturing anonymised data to enable us to undertake equalities monitoring. The core principle is that the information shared by people is completely anonymous but the use of telephone consultations made this impossible. To try and address this, early in the pandemic We Are With You tested sending a link to complete an online demographic questionnaire. However, uptake was poor at below 20%.



As illustrated in the pie chart, 60.5% of those who engaged with CLWs were female. This is slightly higher than seen in previous years. We know that women have been more adversely affected by the pandemic so this is perhaps unsurprising. There is a fairly even spread of people accessing CLWs across age groups. The number of over 65s is notably higher than in previous years, which could be attributed to the support many CLWs offered to shielding patients in their practices (many of whom fell into this age group).

# Highlights from CLWs work

The three elements of CLWs work:



Patient



Practice



Community

## Patient facing work

Throughout the past year CLWs across the city have continued to offer person-centered support to patients. CLWs spend time with patients, finding out what matters to them and supporting them to set achievable goals. CLWs are non-judgmental and are skilled at routinely enquiring about sensitive issues which people sometimes struggle to talk about, including: money worries; gender-based violence; and alcohol intake.

*"My CLW was very helpful, very encouraging and positive about everything. With his encouragement and help I was able to bounce back and I'm grateful for that"*

**Programme participant**

Over the past year CLWs have supported patients with a really broad range of issues. The most common were related to poverty/income; mental health & wellbeing; and loneliness & isolation. But as you can see from the boxes on the right, they connected people to a diverse range of supports and services across Glasgow.

*"I'm so pleased to see what you've been doing for Patient B. I saw him today. What you've done so far is amazing. I always felt this man was awfully lost with no support. Thank you!"*

**GP from a links practice**

# 73%

had improved wellbeing scores on exit

People working with CLWs employed by We Are With You complete the 'Short Warwick Edinburgh Wellbeing Scale' at entry and exit from the programme. In quarter 4, 73% had statistically significant improved wellbeing scores.

## Patient satisfaction

Patient satisfaction was measured by one of our providers during the past year and feedback was incredibly positive across all questions. Throughout the year, 100% of responders agreed that the support from their Links Worker met their needs. We will expand the monitoring of patient satisfaction across the whole programme in 21/22.

## Where CLWs have connected people to:

### Poverty and income

- Welfare and income support
- Food poverty alleviation
- Housing support
- Debt advice
- Fuel poverty advice
- Support for those experiencing destitution

### Mental health and wellbeing

- Lifelink
- Local mental health organisations
- PCMHTs
- Community organisations
- Physical activity opportunities
- Online resources and groups
- Emotional support

### Loneliness and isolation

- Community groups
- Befriending services
- Volunteer service

### Other areas

- Carers support
- Advocacy services
- Learning and development

- Relationships (inc. parenting)
- Bereavement services
- Gender based violence
- Childhood sexual abuse
- Alcohol and drug services
- Getting active
- Youth organisations
- Support for marginalised groups
- and many more...

## Case study

Callum (name changed) was referred by his GP as he was experiencing low mood and anxiety. During his first appointment he was very quiet and it was difficult to find out much about him. However, he completed the wellbeing scale and had very low scoring responses and he talked about his loneliness and isolation.

The CLW asked Callum if he had been having suicidal thoughts and Callum disclosed that he was, and that he had made a suicide attempt 4 years previously before he moved to this area. The CLW was concerned about the level of risk for Callum so contacted the GP, who then offered Callum an in person appointment to carry out a more in depth consultation.

In tandem with this, the CLW agreed to phone Callum twice weekly for a wellbeing check in. This worked well for Callum as he found longer appointments raised his anxiety levels and he worried about talking for long periods of time. These frequent contacts meant that Callum began to build a rapport with the CLW, and started to talk more freely about his routine, how he was spending his time and what interests he had.

Callum started medication to help with his mood and the CLW encouraged him to think about joining the 'Man Friday' men's group offered by the provider. Callum had a smart phone but with only a limited data allowance, so the CLW provided him with a desktop computer and data allowance from the GCVS/ Remade digital inclusion scheme. Callum was provided with initial digital support to get set up and then connected with Glasgow Life Digi Pals for follow up support

Callum joined the online group and over the different sessions became more involved and his confidence grew. He showed particular enthusiasm for the session about increasing physical activity and decided to start a daily local walk by himself. This led on to him making contact with the Tollcross Park Health Walk - something he said he could never have done 6 weeks ago! In some of the 'Man Friday' sessions, Callum also talked about his love of playing guitar, which resulted in Callum and another member of the group arranging their own WhatsApp video calls to swap songs and play together on Saturdays.

At the end of the 'Man Friday' group Callum's wellbeing scale showed an improvement and Callum said that he felt he had made a good start on the road to feeling better.

## Case study

I received an urgent referral from a receptionist who explained that a vulnerable, young mum-of-two (who was also 18 weeks pregnant) had just revealed that she had no money, food or phone credit. Anna (name changed) had mental health issues and had stopped taking her medication when she found out she was pregnant.

I called Anna immediately and we had a brief chat about what she needed urgently. She explained that her fridge/freezer had broken and that she'd had to dispose of some food so had nothing at home. I reassured her that I would contact some local organisations to see what food they could provide right away. Fortunately, a local pantry was open later on that evening. I explained the situation and they were able to provide appropriate food immediately. Anna was very relieved when I let her know she could collect food straight away.

We had a chat about how she was feeling and Anna said she was struggling with her mental health - having stopped her medication. I encouraged her to speak to her GP and she was happy for me to book her in for a phone consultation the following morning. We also agreed that I would call her the following day to look at some funding applications for grants that she might be eligible for.

I phoned Anna the following day and suggested I could apply for an Aberlour grant for essential items like food, heating costs and clothing and also to the Scottish Welfare Fund (SWF) for a replacement fridge/freezer. Anna agreed and both applications were submitted. Anna said she felt a bit better after chatting with her GP.

Anna was awarded a grant from Aberlour a few days later which relieved some pressure for her. She was extremely grateful for the support and said she was 'so looking forward to buying some clothes that fit me after living in pyjamas' and to 'topping up my phone'. Anna was later awarded a fridge freezer from SWF which has been a great help to her family and she's now linked in with her local food pantry to buy food at lower prices.

Anna is currently managing okay and feels reassured that support is only a phone call away.

## Practice development

One element of the CLWs' role is to support practice development. This takes many forms and over the past year a key focus has been keeping practices up-to-date and aware of the supports and services which are available to their patients. This enables GP practice teams to signpost patients to community sources of support at the earliest opportunity. Another area of this work is staff health and wellbeing.

A small amount of funding is made available to support practices to develop the links approach. This has been used in a variety of ways over the past year, including: creation of spaces for staff away from work stations; improvements to outdoor areas; and creating capacity to allow team members to join team sessions on the links approach. Other innovative approaches included: buying activity trackers to encourage team members to become more active; an online yoga group for patients; memberships to local food pantries; and health & wellbeing books.

*"You are a tremendous value to our patients' health and holistic management. You allow doctors time to manage clinical issues. You enable patients to access vital services necessary to improve their overall mental and physical health. You are a wealth of knowledge of local resources and are efficient in updating the practice team. You are also an established practice team member, and it's difficult to imagine the practice without our CLP"*

**GP from a links practice**



## Community networking and development

*"The CLP has played a positive part in our culture, with many of the people she has spoken with saying for the first time in their lives, their voices have been heard"*

**Community resource staff member**

*"The CLP has aided in identifying what people's needs are and has provided programs and resources to improve people's health and wellbeing in our city"*

**Community resource staff member**

It is essential that CLWs know the range of support available in local communities - as well as at a city and national level - this enables them to make the best connections for the people they work with. In addition to knowledge, CLWs having strong relationships with groups and organisations is essential and helps facilitate positive outcomes for programme participants. CLWs have dedicated time to develop relationships and to work within local areas, taking a community development approach to develop activities to meet the needs of those they support. This is often done in collaboration with other groups and organisations. Some examples of the work CLWs have been involved with are:

- Local walking groups and gardening projects
- Social groups: Cuppa and Chat and craft groups
- Creating volunteer opportunities
- Working with food banks and pantries



# Digital Developments

## Connecting Scotland Programme

Over  
100  
people

The CLW programme was successful in securing some of the HSCP allocation of iPads, Chromebooks and connectivity. CLWs were able to provide 100 eligible patients/households with devices and/or connectivity packages. They allocated resources through Phase 1 and Phase 2 of the programme and the impact for patients receiving the devices was positive. CLWs acted as digital champions, and also connected people with other local sources of support such as Glasgow Life's Digi Pals.



## Moving groups online and connecting people to online support

Prior to the Covid-19 pandemic CLWs supported a range of in-person groups and activities in local communities. CLWs moved these online including the Young Adults Project (YAP) in Drumchapel enabling the group to stay socially connected despite the restrictions. CLWs also motivated people to join online alternatives of groups they had begun participating in prior to restrictions including yoga, thai-chi and arts groups. As restrictions initially eased CLWs started some new groups that they were able to move online when restrictions tightened again - for example, the Gorbals Saunter as demonstrated in Anne's story below.

*"Going to the YAP has helped her come out her shell. She has people her own age she can talk to and she's definitely talking much more in the house. I also believe because of YAP she has gained confidence; this has helped her relationship with her Dad"*

**Parent of participant in YAP**

During 2020/21 many third sector providers created online support. CLWs also tapped into this provision which ranged from online counselling to skills development courses - for example, cooking, physical and social activities and many more. Online activities did not suit everyone's needs and preferences, but for many, the ability to join a group or engage with a service from the safety and security of their own home was empowering.

## Creating new online support

We Are With You developed a range of online group work throughout the past year, as a direct result of the key issues presenting for those engaging with CLWs.

*"The best thing was being part of something and knowing I am not alone"*

**Group participant**

*"The lessons and skills I have learned will help me for the rest of my life and I am so grateful for that"*

**Group participant**

Some one off sessions were offered including 'Dealing with Worries' and 'Seasons for Growth', as well as rolling group work which included: women's/men's groups; 'It's your sleep' group; and health anxiety group. Over 200 people attended group sessions. CLWs had to spend time with each individual prior to online group activity to ensure they had the skills and confidence to participate. On average this took 1 hour per participant which was an essential investment in people to build their capacity to participate in online activities to improve and maintain their health and wellbeing.

Feedback from the online groups has been very positive, and a number of participants are undergoing volunteer induction to support future groups. Following attendance at the first 'It's your sleep' group, sleep scores (from the NHS Sleep Self-Assessment) showed an improvement for 50% of people between the start and end of the group. Impressively, at the 6 week check in (after the group ended) the sleep scores had improved for 90% of participants by an average of 200%. Participants of the first Women's wellbeing group completed the 'Short Warwick Edinburgh Wellbeing Scale' at the start and end of the group. Every participant showed a statistically significant improvement in their wellbeing scores.

## Anne's Story

### **"Link workers are a vital service... my trust has been restored in humanity."**

"I wanted to let you know that the introduction of a Link Worker to my GP practice has made all the difference to me sinking or swimming during the last 18 months. The Link Worker is an amazing asset and has so many resources to tap into.

She has helped me to find respite for my disabled son during a pandemic; has supported me emotionally; helped me cope with the aftermath of a huge breach of confidentiality - among many other diverse things. Often in the last year she was the only person I saw for weeks on end apart from my son who is in his mid-20s and has Down's Syndrome and autism. She has also listened to me moaning, being upset and extremely frustrated by, in particular, the lack of co-ordination and she has also been a support when my dad died in December.

The Links Worker is a breath of fresh air. She is very easy to talk to and listens with no judgement: she is compassionate and encouraging. She is clearly an incredibly fit and healthy person, I am overweight (very) and she has gently coaxed me back to getting off the sofa and walking with others. Without this input, particularly in a pandemic, I don't think I would have been able to cope with my son because of my anxiety and depression. I haven't needed to see a Dr as often as my needs are being supported so well.

She makes herself available for walks, one on one, phone calls, texts and e-mails. If she's not available, she will arrange to be in touch when she is. If she says she'll do something, she does it and lets me know if she has hit any problems. She has followed through with everything I have asked her to help me with and has come up with some great and sometimes creative ideas.

Through this service I have met two other link workers who are both very friendly - my son has taken a particular liking to one of them because she sings with him while on our group walk. My son is not a very willing participant but will go a wee bit further when singing! This gives me a chance to speak to other folk and not be just an unpaid carer for a wee while. I have met some interesting folk on the walk -it's nice to be with folk just to chat.

Some members of this group have expanded into a gardening group (something I would have thrown my hands up in horror if I had been asked to join a few months ago) but with the Links Worker's ability to motivate me and others, by having sessions on Zoom when walking wasn't allowed, has made it such fun and educational. I am growing rocket, lettuce, carrots, peas and loads of bedding plants now and will be joining a group in May to continue to learn. We compare our efforts with those who are happy to share e-mails. We were all sent two twigs through the post with the instruction to put it in water. I now have two small willow trees in pots. These things may seem small but they are so important. One person in the group has even got himself an allotment.

Link workers are a vital service and through this, my trust has been restored in humanity. Communication, confidentiality and compassion are key. Saying then doing are also so important. So many times I have been let down by the system which is supposed to pick people up and help them. By taking away the part of me that is always fighting to get things resolved and sharing the load, I am feeling more positive for the future and although I'm still vulnerable, I have more of a sense of my own identity."

**Provided by a Links Worker Programme Participant**

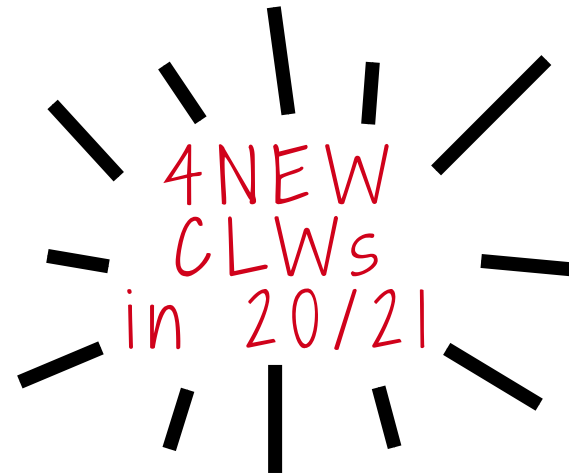




# Programme Expansion

The Glasgow City Community Link Worker Programme continued to expand during 2020/21. The ALLIANCE recruited an additional three CLWs to join three GP practices and We Are With You recruited a Specialist CLW who works with Asylum Seekers.

During late 2020, we began planning for a significant expansion of the programme which will take place during 2021/22. Six information sessions were held for the 40 new practices joining the programme as part of this expansion, and preparation began for the procurement process to award contracts for delivery in six GP Clusters and for a Specialist CLW to support homelessness/housing insecurity.



Our Specialist CLW - Asylum Seekers receives referrals from a number of GP practices who don't have a CLW allocated to their practice.

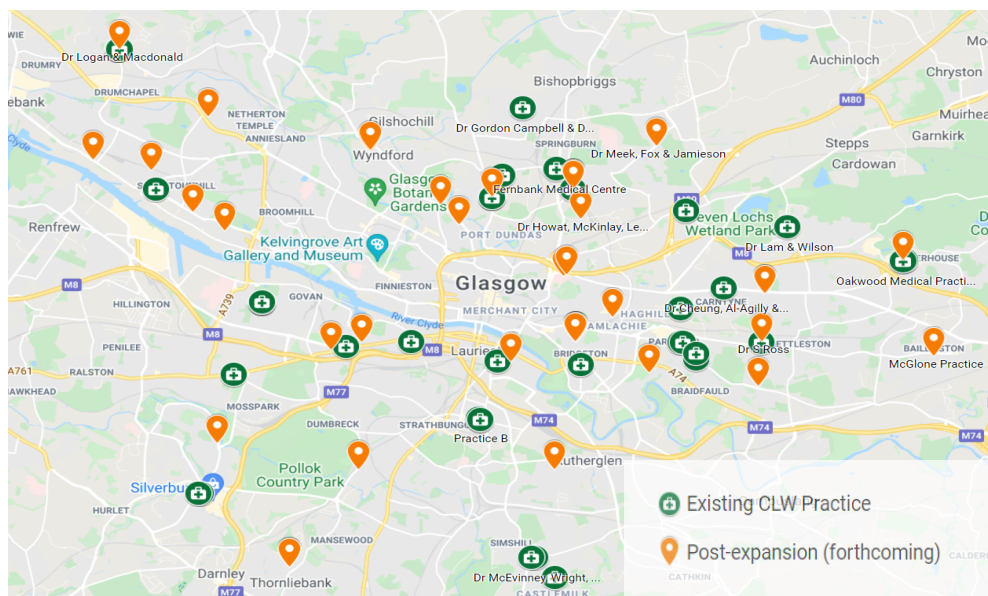
We also have new referral pathways in place from the Compassionate Distress Response Service and the Asylum Health Bridging Team

Expected scale of the programme by October 2021

**63.3 whole time equivalent CLWs**  
supporting 81 GP practices

Plus three Specialist CLW posts

- Asylum Seekers
- Youth Health Service (digital post)
- Homelessness/ Housing insecurity



If you want to get in touch about the Glasgow Community Link Worker Programme contact:

**Kathy Owens, Health Improvement Lead - Community Link Workers**

Kathy.Owens@ggc.scot.nhs.uk

**The Health and Social Care Alliance Scotland Links Worker Programme**

clw@alliance-scotland.org.uk

**We Are With You Community Link Worker Service**

glasgowlinks@wearewithyou.org.uk

