



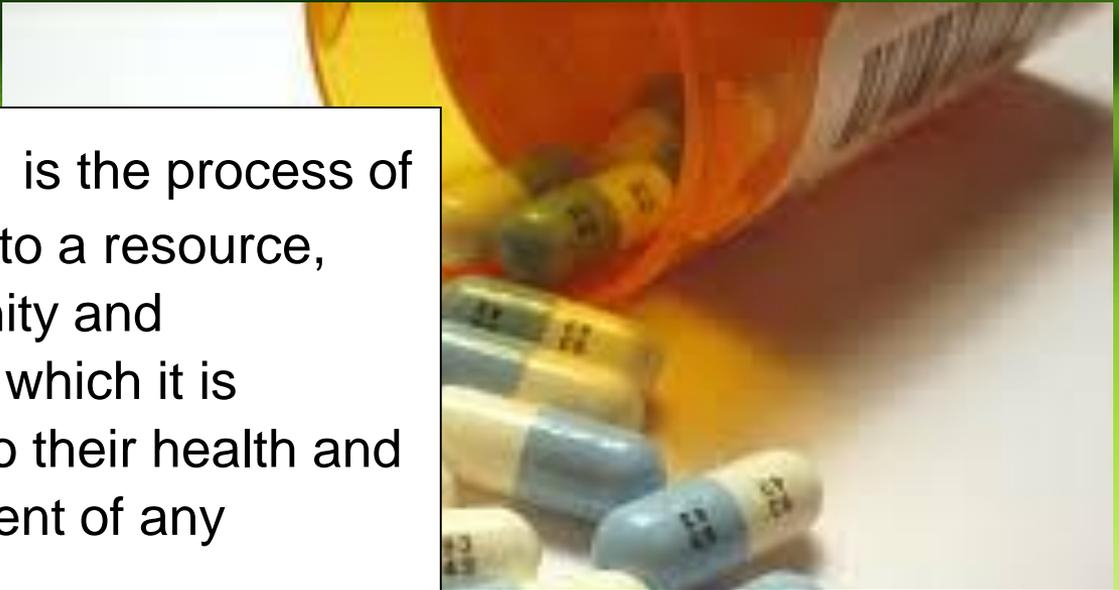
  
Garscadden Burn  
Medical Practice

# Community Links Working: Dr Peter Cawston

# "I didn't become a GP to spend my life prescribing pills"

**Social Prescribing** is the process of formally referring someone to a resource, usually in the local community and comprising a social aspect, which it is intended will be beneficial to their health and wellbeing and/or management of any existing conditions.

**Signposting** describes offering someone information on a local resource, this can be with regard to nature of the activities provided and benefits likely to be gained from these, as well as logistical information on accessing the resource, such as location and opening times. It is carried out with the intention that an individual may subsequently decide to engage with the resource.



# The Link Worker Programme (2014-2019)

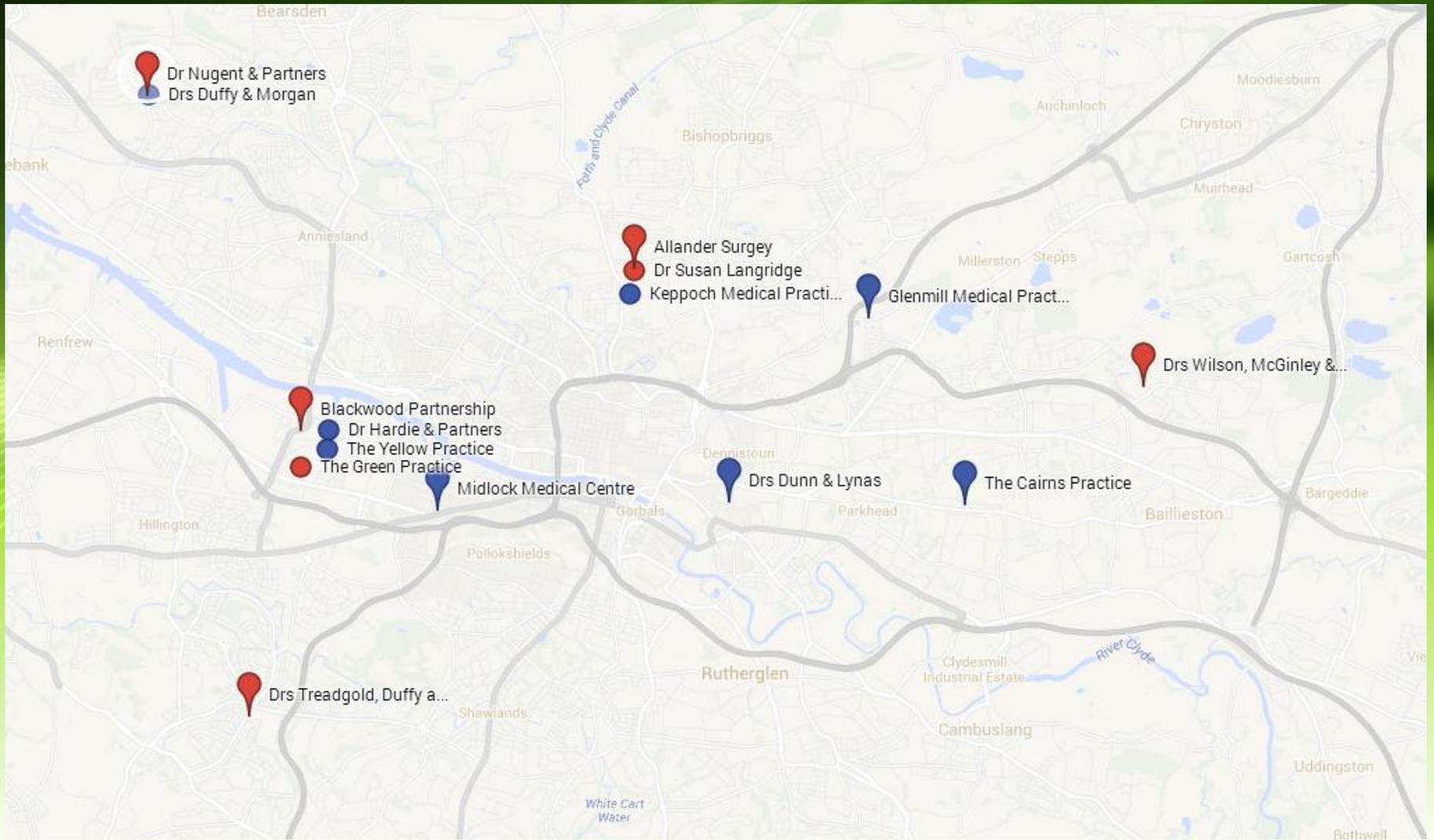
Scottish Government funded project involving 7 Glasgow GP practices and the Health and Social Care Alliance in partnership with the Deep End steering group

- Aim – to mitigate the impacts of the social determinants of health and ease pressure on GPs.
- Community Links Practitioner (CLP) worked with patients, the wider primary care team and the local community
- Practice Development fund to support GP learning

Building on learning from projects including:

- The Bridge Project
- The LINK Project
- Improving Links in Primary Care





**The Community Links Practitioner**



**The GP practice adopting the Links Approach**



Community Links Practitioner

Meets with patient

**The Patient Journey**

Discusses patient's situation

Provides specialist 1:1 support

Patient identifies goals

They identify appropriate community assets

Patient supported to access assets

Patients supported to address social situations

Patients signposted to community assets

Practices aware of community assets

They build on 7 practice capacities

Facilitates GP practice development

Joins GP practice team

**The Practice Journey**

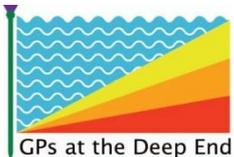
Community Links Practitioner



# The Links Worker Programme



**Patient are supported to live well in their community**



GPs at the Deep End

# The Community Links Approach

1. A Community Links Practitioner fully integrated into the practice team
2. Practice led development with clinical leadership supported by a grant
3. Peer review and learning in a cluster group of “Community Links Practices”
4. Partnership between general practice (the Deep End) and third sector (The Alliance for Health & Social Care)

# Action learning record- 12 modules

**Defining the Links Approach** – building the primary care links approach conceptual framework

**Implementing the Links Approach** – practice development activities in adopting a links approach

**Social Determinants in Primary Care** – common issues encountered in mitigating social determinants of health at the Deep End

**In our words** – stories from the National Links Worker Programme

**'Links Worker' Roles'** – exploring identity, evolution and expressions of the role within and across five programmes

**Team Wellbeing in General Practice** – Recording the experiences and impact of the programme on staff morale and wellbeing

**Developing Governance and Management** – A narrative account of the processes involved in the evolution of governance and management arrangements for the programme and summary of lessons learned.

**Recruiting for the Links Worker Programme** – A narrative account of the processes involved in recruiting programme staff and summary of lessons learned

**Working with General Practice** – A summary account of stories and lessons from the Links Worker Programme's experience in working with general practice to co-produce and implement the programme

**Induction, Training and Evolution of the links worker role**

**Context and Creation of the Programme** – A narrative account of the civic context and conditions in which the programme arose and description of the processes and actions that led to the creation and inception of the programme, summarising lessons learned.

**A Learning Programme** – A narrative account of the learning tools implemented by the programme and summary of lessons learned in adopting this approach

service health bridging scotland counselling network depression signposted walking other citizens aid project petal transport other citizens aid project womens cooking gamh children bureau practice library advice mental group art lifelink carers pcmht volunteering exercise contact space business activities non live work food team classes line centre workshops chss resources care direct stroke matters living family person spark scottish course statutory money cruse association breathing law integration healthy identified gha local gardening welfare resource activity helpline cancer services life moneymatters home scheme club befriending organisation class education assessment advocacy cab volunteer housing walks non-statutory community telephone bereavement active social macmillan financial support

# Liz

- In her 50s
- Former alcohol addiction
- Chronic severe anxiety disorder
- Overweight, sedentary smoker
- Son committed suicide last year
- Granddaughter's mother also committed suicide
- Kinship carer for granddaughter
- Very frequent attender in state of distress
- "You have to do something she's off her head"

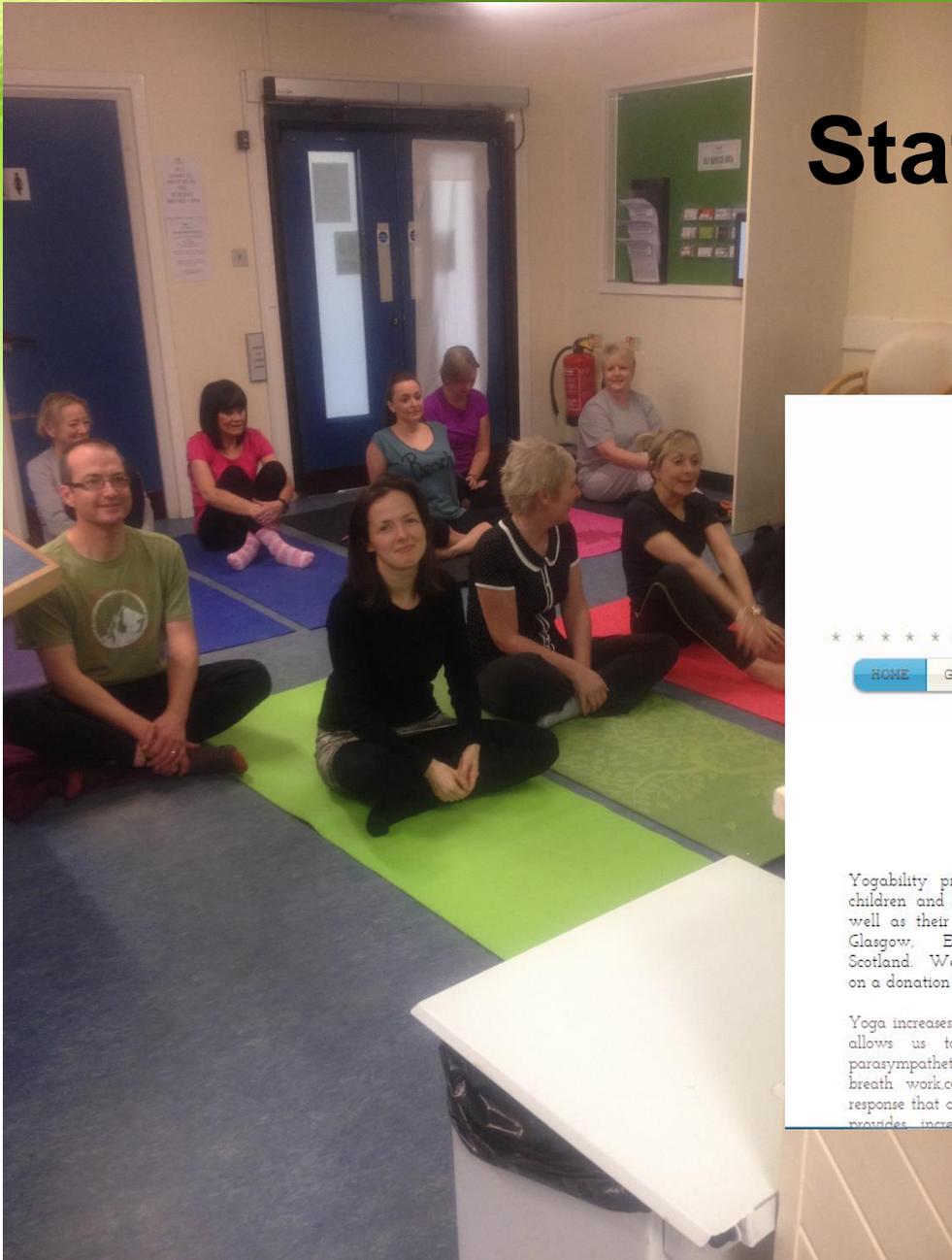
“Then I told the new CLP who started in the practice about some things that happened a long time ago and I wanted to address. He told me about an organisation that could help and came me along to a weekly drop-in there with me the first time. Then I arranged to get counselling with this organisation. I thought it would be better for me to have a female come along with me for that, so he then arranged for another of his CLP colleagues to help me get going with this service. I now attend it on my own getting on a train for the first time ever! With this support, and things like the walking group that runs from the practice, I now feel much better and there are less times when I’m feeling seriously depressed. **I’m no longer a victim, I’m a survivor and I’ve met other people who similar things have happened to. I don’t feel ashamed any longer and I’m much stronger. I don’t have to see the doctor as much”.**

**(In Our Words- Record of learning)**

# Patient groups



# Staff wellbeing



The screenshot shows the homepage of the Yogability website. At the top is a logo featuring a stylized green and blue figure with a red heart, above the word "Yogability" in a blue serif font. Below the logo is the tagline "yoga for everyone" in a smaller, red, lowercase font. A navigation menu includes links for HOME, GOFUNDME, CHILDREN, ADULTS, CARERS, ABOUT US, CONTACT, EVENTS, and DONATE. A Facebook Like button is visible on the right side. The main content area contains text about the charity's mission and a link to a GoFundMe campaign. The text reads: "Yogability provides free yoga classes to children and adults with special needs as well as their carers and their families in Glasgow, East Dunbartonshire and Scotland. We also run mainstream classes on a donation basis." Below this, it states: "Yoga increases flexibility and reduces stress; it allows us to instantly switch on the parasympathetic nervous system through breath work, controlling the 'fight or flight' response that anxiety and worry can bring; it provides increased health benefits, sleep..." The GoFundMe campaign is titled "Yogability's Free Yoga Campaign" and includes a photo of a woman and a child on a mat. The text below the photo says: "Show your support by going to this link: GoFundMe.com/yogability". At the bottom of the screenshot, it says: "Yogability has launched a [gofundme](#) campaign; please click on

## Feel Good Get Active



### Garscadden Burn Medical Practice's Health Walk

One Tuesday afternoon at the end of June we participated in a walk around Drumchapel to familiarise ourselves with the various places that provide physical activities. Before the walk we also played an hour of (free) tennis to get us fit and active. During the walk we were given the opportunity to see many areas of Drumchapel that we have only ever heard of. The practice has discovered many places where patients (and the doctors!) can get physically active.

Here is a list of places the walk took us as well as some links to their websites and where to find them.

- The **Phoenix Centre** runs many clubs and activities and is managed by Drumchapel L.I.F.E. For more information click [here](#)
- **Drumchapel Swimming Pool** has both pools and a fitness studio and is free if you are a Glasgow Young Scot/Kidz Card holder or are over 60 years old and pay your council tax. Click [here](#) to find out more.
- **Drumchapel Tennis Club** gave us an hour of great fun and helped us to get fitter. We would very much recommend checking their [website](#) to find out how you can get involved with the club.
- **Donald Dewar** is a fantastic place to get fit and healthy. If you want to learn more click [here](#)

### Healthy walks every week!

Every Thursday at 1pm you too can join in a **FREE**, short, gentle and friendly led walks up to 2 ½ miles long for all ages and abilities led by trained volunteers. These are a great way for you to take the first steps towards a healthier lifestyle and meet new people. The walks are all led by trained volunteer. Click [here](#) for more details.

### Fun with Tennis



On an earlier Saturday in June Judy Murray, mother of Andy Murray, came to Drumchapel High School for a day of tennis fun. She is shown here (third from left) with some of the Doctors, from Garscadden Burn Medical Practice, and their children.

**IF YOU WOULD LIKE THE OPPORTUNITY FOR FREE TENNIS LESSONS WITH DRUMCHAPEL TENNIS CLUB PLEASE PICK UP A LEAFLET AT OUR FRONT DESK OR ASK A RECEPTIONIST.**

## Quick Links



## Have your say



## Further Information

[NHS Inform](#)

[Sickness Certificates](#)

[Pregnancy Care in Scotland](#)

[Care Information Scotland](#)

[In Times of Bereavement](#)

[Self Help](#)

[Who should I see?](#)

[Letter from Dr Nugent](#)

[Text Message Reminders](#)

[Practice Policies](#)

[Feel Good Get Active](#)

[Stressed and Depressed?](#)

[Yoga and my wellbeing](#)

# Links Worker Programme Evaluation Final Report: Patient Outcomes Evaluation

- The study used a quasi-experimental study design using Comparison and Intervention groups
- The quantitative outcomes for patients were evaluated using standardised measures (health-related quality of life, capacity, anxiety, depression, number of GP consultations)
- These measures were compared with patients in 8 comparison practices
- The measures were also compared at two time points. Both of these were after the beginning of the Links Worker Programme in the intervention practices
- 81% of people referred for a Links Worker intervention received this, 80% of whom were in the most deprived decile
- “There were no significant effects of being referred to a CLP observed for any of the primary or secondary health outcomes”

# Comparison group vs Intervention group

- Less deprived (58% vs 79%,  $p < 0.001$ )
- Less sick (average 2.3 long term conditions vs 3.1,  $p < 0.001$ )
- Less anxious (29% vs 71.7%,  $p < 0.001$ )
- Less depressed (19% vs 57.5%,  $p < 0.001$ )
- Less socially isolated (45.9% vs 67.5%,  $p < 0.001$ )
- Less likely to smoke (28.2% vs 45.2%,  $p < 0.001$ )
- More likely to be employed (48.7% vs 24.1%,  $p < 0.001$ )
- Seeing GP less often (average 3 visits in 6 months vs 5,  $p < 0.001$ )
- Less 'social morbidity' (1.8 vs 3.0,  $p < 0.001$ )

# Links Worker Programme Evaluation Final Report: Process Evaluation

- The study used a qualitative Theories of Change model to evaluate the process
- The complex intervention was found to be intended to bring about change at three different levels:
  - (1) At a patient level, primarily through enhanced one to one support for patients, such as referral to a Links Worker
  - (2) At a practice level, primarily through changes in management practices, such as enhanced training, wellbeing activities, etc.
  - (3) At a community level, primarily through enhanced networking activities with community organisations

- CLPs were well regarded by patients, community organisations and GPs
- The programme was reaching the intended patients (vulnerable patients with complex needs in most deprived areas)
- All intervention practices were found to have engaged with the Links Worker programme and to have implemented changes and activities at all three levels of intervention
- There was little or no 'links-like' activity in the comparison practices.
- More 'fully integrated' practices included – more collective leadership, enabling team relationships, continuity of CLW support, more engagement in practice development (enabled via practice development fund), more proactive community networking- compared to “partially integrated” practices

## *A PLAN FOR SCOTLAND 2016 -17*

*“During the lifetime of this Parliament (until 2020) we will recruit up to 250 community link workers to work in GP surgeries with at least 40 being recruited in 2017”*

<http://www.gov.scot/Resource/0050/00505210.pdf>

# Scottish Government Statement: 19/6/17

The Scottish Government has agreed in principle that the IJBs should lead on the CLW programme as part of their wider primary care workforce responsibilities from 2018 - 19... Going forward the CLWs will be seen as part of the IJB workforce and funding will go directly to the IJBs. Whilst there will be local variations, the Scottish Government expects the CLW service to be focussed on tackling health inequalities and developed in partnership with general practice and the third sector. The additional 250 CLWs will be generalist social practitioners based in a GP practice who will offer non clinical support to patients. Their focus will be on the issues and problems that a patient brings to a consultation rather than a focus on a specific condition or illness

# Aims of Community Link Working

- To support people to live well through strengthening connections between community resources and primary care
- To support GP practice teams working with individuals and communities who experience socio-economic deprivation
- To mitigate the impact of social and economic inequalities on health

# **A Community Link Worker is....**

A generalist social practitioner, located in a GP practice, serving a socio-economically deprived community, addressing the problems and issues that the individual brings to the consultation,

rather than a worker whose domain is limited to a specified range of conditions or illnesses, or one who is based elsewhere within health, social care or other services.

# **Essential elements of a high quality Community Links Worker programme**

- Dual aim of mitigating health inequalities and alleviating pressures in GP practice teams
- Delivered in areas of socio-economic deprivation

# Essential elements of a high quality Community Links Worker programme

- Developed in close collaboration with GP practices and fully integrated into GP practice teams.
- Delivered in partnership with GP clusters, recognising that GP practices vary greatly in their readiness to adopt this model

# **Essential elements of a high quality Community Links Worker programme**

- Offering generalist access to individuals without demographic or condition-specific criteria
- Offering strictly non-clinical support and services to people

# Essential elements of a high quality Community Links Worker programme

- Focused on building a close working relationship with the 3<sup>rd</sup> sector
- Developed with systems in place to create clear referral pathways into third sector organisations

AND Needs to be developed in conjunction with national evaluation and sharing of learning

[p.cawston@nhs.net](mailto:p.cawston@nhs.net)

[www.drumchapeldocs.org](http://www.drumchapeldocs.org)

[www.gla.ac.uk/researchinstitutes/healthwellbeing/  
research/generalpractice/deepend/](http://www.gla.ac.uk/researchinstitutes/healthwellbeing/research/generalpractice/deepend/)

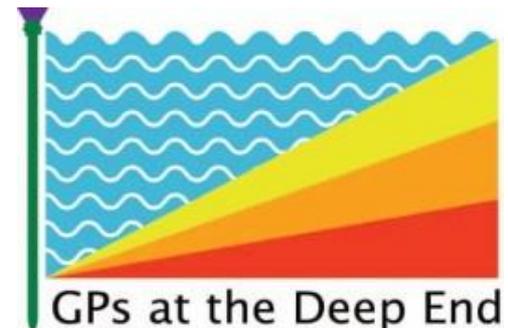
[links.alliance-scotland.org.uk/](http://links.alliance-scotland.org.uk/)

#makeslinks

The Links Worker Programme is funded by the Scottish Government



**ALLIANCE**  
HEALTH AND SOCIAL CARE  
ALLIANCE SCOTLAND  
people at the centre





The background is a gradient of green, transitioning from a dark green at the top to a light green at the bottom. There are several curved, glowing lines of light green and yellow that sweep across the upper half of the image, creating a sense of motion and depth.

THANK YOU