

Local Area Coordination 'stories'

Dawn's Story

Introduction (New Earswick)

Dawn was introduced to me by the local school.

Situation

Dawn lives in New Earswick with two children and husband. Unfortunately last year Dawn lost her leg due to a rare cartilage cancer called Chondrosarcoma. Unfortunately there is no cure for this illness or any treatment available except removal of tumour as it doesn't react to chemo or radiotherapy, the survival rate is not the best, so everyday that Dawn is alive then it is a miracle. The only cure for Dawn was removal of her leg along with the tumour at a specialist unit in Birmingham. Dawn continues to be under close monitoring and have scans, tests etc every three months to make sure that the cancer doesn't return as secondary.

During the day Dawn was alone at home when the children were at school and spent her days cleaning the house over and over again; cooking in the kitchen (She loves making cakes). Dawn takes the children to school herself either by propelling in her wheelchair which is very hard work. The paths in New Earswick are not made for wheelchairs they are very narrow, Dawn had a 4mph scooter which is very slow and had broken down loads (it has been condemned by the scooter shop) it's on it's way out, plus it's not ideal as it's too small and with being an amputee makes balancing difficult. Dawn just wanted to have some independence again and be able to go to Monks Cross alone or get involved in the Open Shop and other community groups which she would have love to attend but couldn't, due to current scooter.

What happened?

Together the LAC and Dee started to look at funding options for Dee to get a scooter to be able to get out and about and to be an active citizen in the local community. The LAC and Dee wrote a funding bid to the local resident group. The group turned the bid down but out of that the citizens in the group decided to start a small community group called Community Mobility Scheme and they raised money so that Dee could get a scooter which was suitable. Dee was able to get out and about picking up her children from school, getting involved in community projects and being independent.

Outcomes / What difference for the person

- Dee's depression improved
- Dee became an active citizen and was no longer isolated
- It gave a purpose to other people in the community. It put 'fire in their bellies'
- People helping people
- Dee has much more confidence and can see a future.
- Dee has felt more confident to hold her previous GP practice to account.

Critical elements (what mattered in the practice or made the difference)

- Collaboration between the local school and LAC

Outcomes for individual:								
Assisted to access daily entitlements and/or benefits?	Y	Connected with others in the community ?	Y	Supported to groups/clubs in the community ?	Y	Provided with advocacy ?	Y	How? – through challenge to JRHT grants panel
Attending health appointments as appropriate?	N	Taking medication correctly?	N	Supported to formally volunteer?	Y	Require formal service from Adult Social Care?	N	
Supported with accommodation ?	N	Does the individual feel safer in the community ?	Y	Supported to share skills in their community ?	Y	Referred to Public Health service?	N	
Was the individual given fire safety advice?	N	Was the individual supported to access police advice?	N/A	Does the individual feel more confident?	Y	Were family / carers / friends supported ?	Y	How? Engagement of partner and children in the process
Any perceived/evidenced preventions or savings as a result of Local Area Coordination intervention:								
i.e. Reduction in health support, reduction in services, community providers/groups involvement, what may of happened without Local Area Coordination, etc.								

- Children now attending school regularly
- Dawn's wellbeing has significantly increased, resulting in less reliance on services
- Dawn passionately shared her story publicly at the Volunteering People Helping People conference in 2018
- Dawn is now feeling more confident and contributing to a number of community groups and considering becoming a Community Health Champion

Magda's Story

Introduction

Magda was introduced to the LAC at a church coffee morning

Situation

Magda is an elderly widow living alone in her own house which has a big garden. Her only son lives a 1 hour drive away. Previously very independent, she was feeling overwhelmed by the amount of work to be done on her garden, she could no longer manage this herself following a stroke. Magda felt frustrated as a result of her isolation and not knowing how she could find help (especially as she had previously been very active), also not wanting to be a burden on family, and having limited finances to spend on a gardener. She could not ask her son as he had his own family commitments.

What happened?

The LAC sat with a group of ladies at the coffee morning and got chatting. In early Summer, several were concerned about how they would manage their gardens. The LAC told Magda about Goodgym (for the garden) and also gave a leaflet about York Neighbours and described the benefits of registering with York Neighbours, ie no job too small, Magda could always ask, and would not have to feel she was "saving up" jobs for her son.

Outcomes / What difference for the person

1. Magda phoned York Neighbours, who arranged for their volunteer to visit her to do the registration. Magda was delighted that the volunteer was actually an old friend of the family who she had not seen for 30 years. York Neighbours arranged for a volunteer to call and tackle some of the weeding which Magda was very pleased with. In a later conversation Magda mentioned a bathroom cupboard which needed repainting or throwing out (she wasn't sure which) and the LAC told her that again she could ask York Neighbours to send a

volunteer who would be able to advise, and if necessary help her to find a new one.

- The LAC made a referral to Goodgym, who arranged for 2 cyclists (young couple) to visit Magda one evening. Magda thoroughly enjoyed using her own gardening expertise to tell the helpers what was a weed and what was a flower, she also showed them how to put a cutting in water to grow roots. The “icing on the cake” was when the volunteers offered to take Magda for a walk round her garden to look at the results – she was unable to do this on her own, for risk of falling. The couple told Magda they were about to move to Vancouver and Magda was delighted to be able to share local knowledge as she had previously lived there.

The outcome as a result of both these referrals was that Magda felt much happier, more confident, better connected, knowing that the help she needed was out there in her community. Magda also told the LAC that she had tried inviting neighbours in for coffee, and would be interested in providing hospitality to other isolated older people in her community (which the LAC can support with).

Critical elements (what mattered in the practice or made the difference)

The presence of the LAC at the coffee morning meant that someone with knowledge of local help, was on hand to listen and give advice and information. The connection with York Neighbours and Goodgym seemed to have been a massive encouragement to Magda, boosting her sense of wellbeing, also knowing that she could ask the LAC again if she needed help. Magda’s comments about wanting to be able to go for a walk (but needing support) were fed back by the LAC, to Goodgym who had been asking referrers for ideas about what else they could offer in their communities.

When asked if she would mind about the LAC sharing her story, Magda replied: Of course I don’t mind, it really happened!

Outcomes for individual:								
Assisted to access daily entitlements and/or benefits?	Y	Connected with others in the community?	Y	Supported to groups/clubs in the community?	Y	Provided with advocacy?	N	
Attending health appointments as appropriate?	N	Taking medication correctly?	N	Supported to formally volunteer?	Y	Require formal service from Adult	N	

						Social Care?		
Supported with accommodation?	N	Does the individual feel safer in the community?	Y	Supported to share skills in their community?	Y	Referred to Public Health service?	N	
Was the individual given fire safety advice?	N	Was the individual supported to access police advice?	N/A	Does the individual feel more confident?	Y	Were family / carers / friends supported?	Y	
Any perceived/evidenced preventions or savings as a result of Local Area Coordination intervention:								
i.e. Reduction in health support, reduction in services, community providers/groups involvement, what may of happened without Local Area Coordination, etc.								
<ul style="list-style-type: none"> - Magda is now feeling more confident and able to contribute to her community through volunteering, building her social networks and connecting with neighbours. - Possible avoidance of mental health support services through engagement with LAC worker and building emotional resilience through means other than accessing formal mental health services. - Reduced GP appointments - Connecting with civil society organisations and helping them to develop e.g. Walking and community health champions 								

Naomi's Story

Introduction

Naomi was introduced to her LAC by her Counsellor at the Young Person's Counselling service. Naomi was 17 and experiencing severe depression and anxiety which was so unmanageable she was finding it hard to engage with the short term counselling sessions. Naomi's counsellor said she spent most of their sessions crying and found it difficult to talk, she had expressed suicidal ideation and described feeling stuck in her flat most days with very little to fill her time.

Situation

Naomi and her father shared a flat together. Naomi had moved in with him a few years ago when she could no longer live with her mother, who had a drink problem. Naomi had been struggling with her mental health for some time and found school hard, she had therefore left without any qualifications. The situation at home was difficult, finances were very limited and Naomi felt under a lot of pressure to get a job, although she did not feel well enough to work. This caused a lot of tension between Naomi and her father – she felt he didn't understand how depressed she was or how her mental health impacted on her. She described feeling 'lost and alone' and 'stuck' and was often tearful. Naomi was seeing her GP regularly and had previously been referred to CAMHS, but due to a negative experience she did not want to be referred back for treatment.

Naomi met her LAC following one of her counselling sessions at 30 Clarence Street. Naomi found it hard to imagine what a good or better life might look like other than working towards a time when she would feel different and happy.

What happened?

The LAC spent time visiting Naomi at home, listening and building a relationship with her so she felt able to open up and talk about what was important. This involved getting to know Naomi, her interests, passions and good qualities and to explore these. They also explored her practical options. This led to completing a PIP application together to alleviate some of the financial pressure to get a job she wasn't ready to. Together they explored volunteering opportunities working with animals, though these were very limited. Naomi expressed an interest in the environment and sustainable communities so the LAC introduced her to a local nature reserve and Ecocentre, St Nick's, where she showed interest in an Ecotherapy programme and conservation volunteering opportunities. When she visited Naomi quickly found this was a place she felt comfortable around like minded people.

Naomi shared this was a difficult time when some close friends started using substances heavily and she was very frightened about their wellbeing. A close friend had died suddenly three years previously and she was worried her other friends would die. This affected her deeply as she is a very caring and conscientious person.

The LAC offered emotional support and advice regarding Naomi rebuilding her relationship with her father and her friends, who she felt distanced from. The LAC gave Naomi information about self care and websites which provided useful tools for managing symptoms and learning CBT skills to change negative thinking patterns.

Naomi's confidence grew a little over the next 6 months – impacted by changing relationships with her father and friends. She was awarded PIP which helped her to

rebuild her social life. She also got a part time job with one of her sisters which is flexible as she can choose her own hours. This responsibility and reason to get up on a morning has made a big difference to her wellbeing and recovery. She is now applying to volunteer at St Nick’s twice a week.

Critical elements

- The LAC was able to build a relationship with Naomi slowly at her pace, which was less pressure so she found it easier to talk. They talked about all sorts of things so the conversation wasn’t just focussed on her mental health problems but also her interests, beliefs and things which were important.
- Naomi said “it helped when *the LAC* got involved as we looked at practical things and different options – before I felt like I had no options, finding out there were made a big difference. It helped me gain confidence to show my friends that they had options too.”
- The LAC was physically able to support Naomi to go to St Nick’s for the first time, which she found hard to do alone due to her anxiety. The flexibility of the service allowed this – even though it took a few attempts before Naomi was ready.

Outcomes for individual:								
Assisted to access daily entitlements and/or benefits?	Y	Connected with others in the community ?	Y	Supported to groups/club s in the community ?	Y	Provided with advocacy ?	Y	How? - with PIP claim – spoke with assessor over the phone so she didn’t have to attend a face to face assessme nt
Attending health appointments as appropriate?	N	Taking medication correctly?	N	Supported to formally volunteer?	Y	Require formal service from Adult Social Care?	N	What service?
Supported with accommodation	Y	Does the individual	Y	Supported to share	Y	Referred to Public	N	What service?

?		feel safer in the community ?		skills in their community ?		Health service?		
Was the individual given fire safety advice?	N	Was the individual supported to access police advice?	N/A	Does the individual feel more confident?	Y	Were family / carers / friends supported ?	Y	How? Support and advice offered to Naomi's father regarding benefits and MH

Any perceived/evidenced preventions or savings as a result of Local Area Coordination intervention:

i.e. Reduction in health support, reduction in services, community providers/groups involvement, what may of happened without Local Area Coordination, etc.

- Possible avoidance of mental health crisis through engagement with LAC worker and building emotional resilience through means other than accessing formal mental health services.
- Reduced GP appointments
- Naomi is now feeling more confident and able to contribute to her community through volunteering, paid work and supporting her friends.
- Support with benefits/maximising income helped to improve quality of life and wellbeing for Naomi and her father, helping alleviate tensions at home which long term could have resulted in Naomi feeling forced to move out.

Ron's Story

Introduction

The LAC met Ron at a Pay as you Feel Café at the local Community Centre. The LAC was there accompanying someone else she had been working with who had wanted support to attend the café for the first time. They ended up sitting at the same table and chatted over lunch.

Situation

Ron explained he was a single dad with two school age children. He had lots of experience working in the care sector with young people and was interested in looking in to some volunteer opportunities to utilise his skills and extra time he had during the day when his children were at school. Ron missed working and was keen to find a way to help others and feel useful whilst at the same time tackling his

own loneliness and isolation. The LAC told Ron about conservation volunteering opportunities at a local nature reserve and park – Ron was aware of these and had some involvement but was looking for something a bit different. The LAC signposted Ron to speak to the local library and other places he could access information and they also exchanged contact details, including details of her Facebook page and Twitter account where she often shared details of local opportunities as they arose.

What happened?

A few months later the LAC saw a colleague give a presentation at a meeting about a new Community Health Champions programme in York. The programme was looking for people to train up as Champions with an interest in supporting others in the community to increase wellbeing by setting up groups/activities or offering one to one mentoring. The LAC thought of Ron straight away. She got in touch with him, passed on information of the programme and how to book on the initial training. Ron was really grateful for the opportunity and keen to stay in touch to update the LAC on how he developed as a Community Health Champion who she would be able to link other people up to in future.

Critical elements

- The LAC met Ron whilst out in her local community and through her knowledge of the area she was able to discuss volunteering opportunities with him and direct him to where further information was available.
- The LAC’s good network of links and awareness of new initiatives in the city reflects the advantage in being embedded in the system, particularly the Adults Contracts and Commissioning Team.
- This is a good example of Level 1 work within the LAC role and how naturally connections are made through the place based model.

Outcomes for individual:								
Assisted to access daily entitlements and/or benefits?	N	Connected with others in the community?	Y	Supported to groups/clubs in the community?	Y	Provided with advocacy?	N	How?
Attending health appointments as appropriate?	N	Taking medication correctly?	N	Supported to formally volunteer?	Y	Require formal service from Adult Social	N	What service?

						Care?		
Supported with accommodation ?	N	Does the individual feel safer in the community ?	N/A	Supported to share skills in their community?	Y	Referred to Public Health service?	N	What service ?
Was the individual given fire safety advice?	N	Was the individual supported to access police advice?	N/A	Does the individual feel more confident?	Y	Were family / carers / friends supported ?	N	How?

Any perceived/evidenced preventions or savings as a result of Local Area Coordination intervention:

i.e. Reduction in health support, reduction in services, community providers/groups involvement, what may of happened without Local Area Coordination, etc.

- Being a single parent is a challenging and often lonely role. In this example a young single father was given advice and guidance to enable him to build a wider network of support and resilience through an opportunity to build on his own skills. He has taken an opportunity to upskill through free training and to help increase the wellbeing of others in the community.
- This is a good example of empowering someone to make a wider contribution whilst also improving their own wellbeing and sense of loneliness/isolation. This no doubt has had a wider positive impact on Ron's children and helped Ron to be a positive role model not just for his children, but also for other single parents in the area.
- The LAC's presence at a local community event and their links to knowledge and information facilitated an important connection in this instance.

Abbreviations

LAC – Local Area Coordination