The Pathways, Connections and Technology work stream met on 3 occasions over the summer, and have developed the framework below that captures the considerations that are important on the journey of a person in distress, and their interaction with the Community Wellbeing Centre. For example:

· Before arriving at the CWC – how we promote the CWC, how the person makes contact, the range of support needs they may have, potential referral partners (Police, OOHs, GPS)

· The interventions and activities that take place at the CWC – the triage assessment, the resources required, the roles for staff, peer workers and volunteers, and the considerations around record keeping and information sharing protocols.

· After leaving the CWC – onward and supported referral to other organisations for social support, or to the NHS for medical assessment or admission, transfer to an accommodation base where required, and systems for follow up and aftercare. Keeping track of outcomes and following up on feedback and evaluation.

There are still areas that are still unclear at this stage, and some topics that overlap with other ongoing work, for example, technology and communications, referral protocols for NHS, Police and ambulance services, and identifying the organisations across the city that can support the work of the CWC, and what those partnerships might look like.

These areas will become clearer when we are able to include the chosen provider in the conversations with work stream and stakeholder group members.

**Before arriving at the CWC**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Who is the CWC for?** | **Referral Source** | **Support Considerations** | **Communication/Technology** | **Other Issues** |
| Anyone in distress | * Self - referral
* NHS 24
* GP
* GP OOHs
* Police Scotland
* First Contact
* SW Teams
* Third sector Orgs
* Community Health
* Housing
* Ambulance Service
* Navigators
 | * Children and young people
* Vulnerable adults
* Older people
* Mental health
* Substance issues
* Under the influence
* Neuro-divergence
* Sensory processing issues
* Communication needs
* Repeat Visitors
* Homeless
* Safeguarding
* Violence and Aggression
* Mobility Issues
* English not 1st language
* Family/children
* Safeguarding
 | * Text
* Phone
* Email
* Drop In
* BSL
* English not first Language
* Webpage
* Facebook
* Twitter
* ALISS
 | * Importance of getting this part of the pathway right
* Managing expectation
* Communication needs to be clear
* Clarity on appropriate and good use of CWC
 |

**Community Wellbeing Centre Activities and Interventions**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Who works in the CWC?** | **Staffing Considerations** | **Triage/Assessment** | **Resources** | **Other Issues** |
| * Staff
* Peer Supporters
* Volunteers
* Security
* Cleaners
 | * Skills/Experience
* Workforce Development
* Staff numbers
* Support & Supervision
* Safety
* Working from home
* Peer Support visible throughout
 | * Who does this?
* Process
* Record keeping
* Level of support required
* Action planning
* Risk Assessment
* Consent for information sharing
* Arrangements for those who are intoxicated
 | * Wellbeing Information to take away
* Recovery Map
* Directory of Services
* Technology
* Phones
* Mobiles
* Near Me
* ALISS
* FORT system
* Duty Workers
* Access to free refreshments
 | * OOHs – how do we manage responses?
* Peak times and

Capacity/staffingProtocols for safe transportation* The CWC should be a welcoming and supportive, and non-clinical environment.
 |

**Community Wellbeing Centre Outcomes**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Intervention** | **Social Support** | **Clinical Interventions** | **Protocols** | **Other Issues** |
| * First Aid
* Safety and stabilisation
* Information
* Coping strategies
* Reduce isolation
* Ongoing support
* Manage symptoms
* Further assessment
 | * Third Sector Orgs
* Sources of Support
* Accommodation
* DBI
* Addiction Services
* Social Services
* Housing/Finance
 | * Acute Med Admissions Unit
* Acute MH Ward
* CAMHS in-patient services
* CMH Services
* Specialist Services
 | * Governance
* Record Keeping
* Information sharing
* SLA/Agreements
* Follow Up
* Transport/meeting costs
* Feedback forms
 | * Peer Support from other orgs to in-reach to CWC
* Supported onward referral
 |

**Other considerations/questions:**

* What happens if the destination organisation has capacity issues?
* What is the capacity of the CWC, and what happens if it reaches capacity?
* Potential need for a wider discussion re IT considerations/Data sharing protocols. We also need to link with Communications and Engagement, and Building work streams to explore IT hardware and software issues.

**Tayside wide considerations**

* Protocols for referral to in-patient care
* Protocols for referrals from Police Scotland, Ambulance Service, Navigators, OOHs Primary Care of First Contact team.
* Learning and experience from other CWCs