

To: Renfrewshire Integration Joint Board

On: 31 January 2020

Report by: Chief Officer

Heading: Loneliness and Social Isolation

1. Summary

- 1.1. Loneliness and social isolation were identified as a key theme in Renfrewshire's Health and Wellbeing Survey of 2017/18. In response, the Strategic Planning Group (SPG) recognised this as a priority area for 2018/19 and established a Short Life Working Group to explore how we can best address this locally.
- 1.2. This paper updates members on the report produced by the Short Life Working Group and outlines how its findings / recommendations will be taken forward.

2. Recommendation

It is recommended that the IJB:

- Note the content of the attached report (Appendix 1); and
- Agree the approach outlined.

3. Background and Context

- 3.1. Renfrewshire's Health and Wellbeing Survey 2017/18 showed that 1 in 14 (7%) residents felt isolated from family and friends, and that this rose to 15% in the most deprived areas. Loneliness and social isolation have also been a recognised theme across service reviews of Older People, Addictions and Learning Disabilities.
- 3.2. In response, the Strategic Planning Group identified loneliness and social isolation as a priority issue and, in April 2019, set up a Short Life Working Group (SLWG) to explore how best to address this. The Group subsequently developed a report which identifies key contributory factors; recommended actions to take forward locally; and a plan to develop this further in the coming months

- 3.3. The Group, led by Stephen McLellan from Recovery Across Mental Health (RAMH), met four times between May and September 2019 and involved representatives from the HSCP, Council, third sector and community groups.
- 3.4. The report, attached in Appendix 1, makes a range of proposals and recommendations to address loneliness and social isolation based on the input from the representatives on the Group and the Scottish Government's Social Isolation and Loneliness Strategy.

4. Key Findings

- 4.1. The report outlines the background and issues around loneliness and social isolation, and puts them into the context of the Renfrewshire population.
- 4.2. The report identifies actions around a number of recognised contributory factors:
 - To promote and improve **Access to Information** and **Activities** utilising all methods of communication including social media;
 - To carry-out an audit of **Physical Spaces** available for use by groups/clubs, etc;
 - To examine what could be done to improve **Transport**;
 - To support and promote action to improve **Safety**; and
 - To target those who are most at risk of loneliness, including those affected by homelessness, people requiring housing support, and those with mental health issues, all of whom are the **least connected**.
- 4.3. In addition, the report goes on to make a number of specific recommendations to be taken forward in the coming months:
 - Identify a 'champion' to highlight and promote work around loneliness and social isolation – this will help us to embed it into all strands of work and the public consciousness;
 - Promote information sources such as ALISS and online selfmanagement apps – the group felt that it helps if people know what is available to them in their local area and that we should be making best use of digital opportunities;
 - Identify potential transport models to enhance connectivity transport has been highlighted as a key barrier for some people to get involved in activities that would enhance their connectedness;
 - Support and endorse the work of the Community Falls Prevention Group this was felt to be an important area, particularly for older

people, to enhance feelings of safety and confidence in getting out and about;

• Provide training to staff, public and retailers on promoting connectedness – it was felt that the more people involved in the conversations and aware of the issues the better so that everyone can play their part.

5. Next Steps

'Understanding who are the socially isolated and lonely within the wider population is an essential pre-requisite for public health action.' (Scottish Public Health Network, Social Isolation and Loneliness)

- 5.1. The HSCP welcome the findings of this report which will help inform our ongoing commitment to prioritise public health. The importance of improving health and wellbeing/public health is clearly articulated within the NHS GGC's public health strategy 'Turning the Tide', and locally recognised as a priority area in our HSCP's Strategic Plan and emerging transformation programme. By working collaboratively, and in conjunction with our local communities and third sector organisations, we aim to address the social determinents of health, including lonliness and social isolation, to improve the health and wellbeing of our local population and help stem the demand on already stretched Acute Services. This priority is also intrinsic to our partner organisations' own transformation programmes Moving Forward Together (NHSGG&C), and Right for Renfrewshire (Renfrewshire Council).
- 5.2. Furthermore, Stephen McLellan shared the findings of the report with the Community Planning Executive Group in December 2019 on behalf of the Strategic Planning Group. Social Isolation is one of the Renfrewshire Community Planning Partnership's 6 priorities for 2020/21 and the SPG was asked, in its capacity as a Community Planning Group, to take forward this agenda on behalf of the Executive Group and report back in March 2020 on how it intends to implement the report findings.
- 5.3. At the Strategic Planning Group meeting on 11th December, there was a focus on how the reports findings and recommendations could best be taken forward. From discussions at this meeting, taking account of the information in the report, the Strategic Planning Group agreed that work would initially focus on 3 key areas:
 - Young people in a survey carried out by ACUMEN in 2017/18, people under 25 reported as twice as lonely as those over 65 (the caveat being that there was a relatively small number of respondents n=300);
 - 2. Older people there is a lot of evidence that older people have a high risk of becoming lonely or socially isolated at certain stages in their lives and our ongoing review of older people's services has

reinforced this, highlighting the need for joined up, person-centred approaches to ensuring people stay connected to whatever is important to them;

- 3. Those people least connected with services certain characteristics such as homelessness and unemployment can mean that people do not access some services and therefore are at greater risk of becoming lonely and/or socially isolated.
- 5.4. It was agreed that a Delivery Group will be established with members of the orginal Short Life Working Group but also broadened out to include representation from Renfrewshire Leisure, DWP, West College Scotland, UWS and Skills Development Scotland to better reflect the wide ranging contributory factors and action areas identified within the report.
- 5.5. Given the scale and breadth of how lonlieness and social isolation can affect people of all ages etc, the report recognises that a partnership, Renfrewshire-wide response is critical. The HSCP will look to support the Delivery Group to develop branding / communication for a Renfrewshire wide initiative. Furthermore, members of the Delivery Group, as well as providing specialist input based on their role, knowledge and experience, will act as 'champions' in tackling loneliness and social isolation within their own work areas.
- 5.6. RAMH have received funding from the second stage of the Aspiring Communities fund which they have agreed to link in to support this work. In addition, the Delivery Group will seek to identify any other supports/resources required and will link with the likes of the Culture, Arts, Health and Social Care (CAHSC) group, the Improving Life Chances group and the Forum for Empowering Communities to ensure that there is a broad and full consideration of opportunities to address the issues.
- 5.7. All Renfrewshire's Local Partnerships have identified loneliness and social isolation as priorities to be addressed, either explicitly or implicitly, and the Group will link with them to support any ideas or initiatives that they would like to take forward, as well as engaging them in any developments that the Group might initiate in their communities.

6. Future Reporting

6.1 The Group will bring a further update on its delivery plan to both the IJB and Community Planning Executive Group in March 2020.

Implications of the Report

1.	Financial – None
2.	HR & Organisational Development – None
3.	Community Planning – This work is being undertaken on behalf of the
	Community Planning Executive and will provide regular reports
4.	Legal – None
5.	Property/Assets – None
6.	Information Technology – None
7.	Equality & Human Rights – None
8.	Health & Safety – None
9.	Procurement – None
10.	Risk – None.
11.	Privacy Impact – None

List of Background Papers – None.

Authors: Roisin Robertson, Community Link Team Manager Frances Burns, Head of Strategic Planning & Health Improvement

Any enquiries regarding this paper should be directed to Frances Burns, Head of Strategic Planning and Health Improvement (Frances.Burns@renfrewshire.gov.uk/0141 618 7656)

RENFREWSHIRE HSCP: STRATEGIC PLANNING GROUP SHORT-LIFE WORKING GROUP: LONELINESS AND SOCIAL ISOLATION

Report Authors:

Stephen McLellan, Chief Executive, RAMH Ann Drennan, Health, Homelessness and Housing Lead, Renfrewshire HSCP 1st October 2019

'Understanding who are the socially isolated and lonely within the wider population is an essential pre-requisite for public health action.' (Scottish Public Health Network, Social Isolation and Loneliness)

What is the scope for Public Health Action? (McCann, Mackie and Conacher, May 2017)

1. INTRODUCTION

Renfrewshire's Health and Wellbeing Survey 2017/18¹ showed that 1 in 14 (7%) residents felt isolated from family and friends, and that this rose to 15% in the most deprived areas. From this survey, the Strategic Planning Group identified loneliness and social isolation as a priority issue and, in April 2019, set up a Short Life Working Group (SLWG) to address this. Invitations were sent to statutory and third sector colleagues across Renfrewshire to contribute to the group.

A membership was constituted from interested parties and the group had an initial meeting in May 2019. It was determined that 'loneliness', albeit the determining aspect, was essentially a negative connotation and the group identified 'Connectedness' as a more positive concept, representing a successful vision upon which to build. The group has since met 4 times and this report represents the considered thoughts of the members.

Whilst Renfrewshire HSCP have taken the initiative to investigate the implications of 'loneliness / connectedness', the group are of the opinion that this is a wider, societal issue which has a plethora of supporting evidence to substantiate this view (Holt-Lunstad)². The impact of 'loneliness' may more obviously be seen in health and social care, in GP surgeries and associated budgetary pressures, but fundamental issues such as:

- Access to secure and suitable housing
- Public safety 'fears'
- Public transport availability
- Injury prevention
- Public space and activity
- Anxiety and depression

¹ Renfrewshire Health and Wellbeing Survey 2017/18 (Ref. Page 41: Social

Connectedness): <u>http://www.renfrewshire.hscp.scot/media/9026/NHS-GGC-HW-Survey-</u><u>1718/pdf/..pdf?m=1548089480210</u>

² Julianne Holt-Lunstad: 3.4m participants were followed over an average of seven years. She found that those classed as lonely had a 26% higher risk of dying, and those living alone a 32% higher chance, after accounting for differences in age and health status.

are contributory factors which require a concerted approach, not only by agencies, but across the sphere of society, including schools, places of worship and the community.



2. BACKGROUND

Loneliness and Isolation are related, but distinct, concepts.

Loneliness is a subjective but negative experience: the unpleasant experience that occurs when a person's network of social relations is deficient in some important way, either quantitatively or qualitatively (Perlman and Peplau, 1981).

Social Isolation is an objective measure reflecting an individual's lack of contacts or ties with others (family, friends, acquaintances, neighbours, potentially service providers) (Cited by T Schiff, Newcastle, 2016).

'Social isolation and loneliness can affect anyone – at all ages and stages of life. As our society changes, there is increasing recognition of social isolation and loneliness as major public health issues that can have a significant impact on a person's physical and mental wellbeing.⁴

³ A Connected Scotland: Our Strategy for tackling Social Isolation and Loneliness and building stronger Social Connections: The Scottish Government, 2018 ISBN:978-1-78781-459-2 (Crown copyright 2018)

⁴ Christina McKelvie, MSP, Minster for Older People and Equalities, Scottish Government, Foreword: A Connected Scotland (as above)

2.1 Profile for Renfrewshire

The true extent of social isolation and loneliness within Renfrewshire is uncertain due to affected hidden populations. However, there are risk factors, e.g., socio-economic disadvantage, those with poor physical and mental health, disabled people, those living alone, those who have been bereaved, men over 50, minority ethnic groups, and those from LGBTQI+ communities that mean people are more at risk of social isolation.

It's worth noting that loneliness and social isolation can affect people of all ages, genders and ethnicities. This means a robust response will be needed to address all age ranges from young to old. Also, people may not be willing to self-identify. It is recognised that building a meaningful rapport with someone who is socially isolated can take time in order to create a trusting relationship. However, through population estimates we can look at the current demographics to try and quantify potential at risk populations.

Current population estimates (Source: NRS population estimates, Mid 2018) for Renfrewshire are:

- 15-24 year olds = 20,013 or 11.26% of the population
- 25-44 year olds = 44,595 or 25.08% of the population
- 45-64 year olds = 51,520 or 28.98% of the population
- 65+ year olds = 33,288 or 18.72% of the population
- 75+ year olds = 14,842 or 8.35% of the population

By looking at the most recent Scottish Household Survey (2017), the figures for Renfrewshire are 18% of residents under the age of 65 live in a single household. In comparison, 13% of residents over 65 live alone.

71% of all male suicides are men who live alone or are unpartnered (Choose Life).

3. ADDITIONAL RESEARCH

3.1 ACUMEN and RAMH

Between October 2017 and March 2018 ACUMEN and RAMH carried out research on social connectedness within Renfrewshire⁵. The highest loneliness scores came from those who identified mental health problems as being a barrier to social connectedness. The research identified the importance of providing information on local services, including formal and informal peer support to build people's confidence in accessing services. The report went on to note that one of the key aspirations for individuals was to form relationships which were epitomised by 'greater intimacy' (more meaningful).

3.2 A Realistic Medicine Approach to Loneliness

Dr Catherine Calderwood, CMO at Scottish Government in her 2016 publication:

'A Realistic Medicine Approach to Loneliness' asked:

- Can we change our 'style' to extend shared decision making?
- Manage risk better?
- Build a personalised approach to care?
- Reduce unnecessary variation in practice and outcomes?

⁵ Connectedness in Our Communities: A Study on Social Connectedness, ACUMEN and RAMH, October 2017 – March 2018

• Become improvers and innovators?

4. PUBLIC HEALTH

NHSGG&C's 10 year Public Health Strategy: Turning the tide through prevention⁶ has at its core 6 Public Health Priorities which align with Scotland's 6 Public Health Priorities. Scotland's 6th: *'Community and Place'* is addressed by NHSGG&C through their 6th Priority: *'Strengthen links to support community planning activities and engagement with communities and third sector organisations'*. Addressing loneliness and social isolation is a major component in delivering this 6th Priority.

'Social Isolation and Ioneliness are public health and health inequalities issues. An unequal distribution of income, power and wealth and the experience of stigma and discrimination can result in social isolation and Ioneliness, and vice versa.'

(Dr. Andrew Fraser, Director of Public Health Science, NHS Health Scotland)

5. A BRIEF OUTLINE OF THE GROUP'S DISCUSSIONS

During the first 3 meetings of the Group a plethora of information, including web links, was gathered: examples were offered of places where people were already meeting including Men's Sheds, Gardening Clubs, Groups, etc.

However, it became apparent that these activities needed to be not only publicly available, but readily available, distributed widely and visibly throughout the localities.

At an early point during the Group's discussions an Action Plan was developed which identified key areas as follows:

No.	Action
1.	To promote and improve Access to Information and Activities utilising all methods of communication including social media.
2.	To carry-out an audit of Physical Spaces available for use by groups/clubs, etc.
3.	To examine what could be done to improve Transport
4.	To support and promote action to improve Safety
5.	To target those who are most at risk of loneliness, including those affected by homelessness, people requiring housing support, and those with mental health issues, all of whom are the least connected .

5.1 Access to Information and Activities

'If you don't know, you don't go' (RAMH beneficiary)

The Group acknowledged ALISS (A Local Information System for Scotland) (**ref.8.6**) as an available on-line resource, but not widely known of in communities. It was initially set up by the Health and Social Care Alliance to gather information on local clubs, groups and activities across Scotland and present them in an easily accessible way. However, not everyone has access to, or the ability to use, the internet. In addition, there is a

⁶ NHSGG&C, Turning the tide through prevention: Public Health Strategy 2018-2028

growing body of validated, verified self-management tools, including APPS, which provide related access to support.

Action: Promote ALISS and Digital Information resources, such as validated selfmanagement resources to communities, schools and throughout the Council, the HSCP, partners and Local Partnerships, and provide support to access the internet.

Action: Work in concert with 'Digi Ren' (a Renfrewshire-wide group that includes private, public and third sector agencies talking about and sharing all things digital in Renfrewshire).

5.2 Physical Spaces

An audit of Physical Spaces available for use by groups, clubs and communities was recommended and led by the Chair of the Paisley West and Central Community Council. Research identified sources of information and provided the SLWG with links to the Council's Building Safer and Greener Communities Progress Report (May 2018) (**ref. 8.3**) (with an updated Report submitted to the Communities, Housing and Planning Board on 20th August); and to the Council's web-site for information contained within 'Your Home, Your Street, Our Community' (**ref. 8.4**).

A successful example of supporting 'connectedness' is West End Growing Grounds Association (WEGGA) which provides a gardening space in the West End of Paisley. The Project has proved a success not only in the produce grown, but in bringing people together for companionship in a safe and welcoming environment. Social isolation had been identified as a concern in the area with many people living alone. The Project has encouraged residents to join with others, some for the first time.

*'It's more than just a place to grow things; it's a place to meet.*⁷ A video link to a short film on the Project can be found at **8.5**.

5.3 Transport

Transport is regularly highlighted as an issue in consultations with communities. This topic has been the subject of numerous pieces of work but the situation appears static. There are good examples that may be useful to draw on from other parts of the country. Police Scotland have championed bus driver training and passenger safety through films and leaflets called 'Traveling with Confidence'. This has currently only been rolled out in the east of Scotland but there may be scope to extend to Renfrewshire. Community Transport Association Scotland have a growing network and new models of community transport concepts. NHS Grampian have created a jointly funded post with Nestrans for a 'Health and Transport Action Plan Programme Manager', with the purpose of reducing missed health appointments and reducing injuries and isolation. NHS Borders have also recently calculated the cost of missed appointments and are looking to develop and fund community transport:

<u>http://www.nhsborders.scot.nhs.uk/patients-and-visitors/latest-news/2016/july/7/the-real-cost-of-a-missed-appointment/</u> Establishing community transport infrastructure can then be extended to activities beyond health.

⁷ A quotation from a member of WEGGA within an Article within Scottish Housing News, August 2019.

Action: A working group should be established to identify models that could be replicated in Renfrewshire.

5.4 Safety

Loneliness and social isolation can affect people of any age group however older people are particularly at risk of loneliness and isolation caused by a fall or fear of falling. Someone who is isolated is at higher risk of sedentary behaviour leading to a fall, and is also at much greater risk of financial harm. Renfrewshire Community Falls Prevention Group is a multi-agency and department collaboration. The purpose of the group is to work together to design and implement interventions that will reduce or prevent people, in particular older people, from injurious falls and health damaging loneliness.

Action: Support and endorse the work of this group.

5.5 Reaching out to the least connected

Pathways to enhance contact need to be robust and flexible. The key is identification, knowing what to do next, who can help, and how to engage with someone who is socially isolated, or at risk of social isolation and loneliness.

Identification of individuals most likely to be at risk is an important step in understanding the extent of loneliness and social isolation across Renfrewshire. Some people have contact with services from health, social care or housing. However, others have little interaction and no family or friends close by to support them. Therefore, when someone who is isolated comes into contact with a staff member within the Council, NHS or a frontline service such as a shop, restaurant or transport, it is key that the staff member feels able to provide an initial response. As such, having training materials that are designed for everyone is one way to equip staff, and the public, with the knowledge to enable them to signpost someone who they feel could be lonely or socially isolated to an appropriate group or service. This is not to say that frontline workers are to become experts but, should the occasion arise, sign-posting someone to advice and support would help to establish a supportive and inclusive environment.

Although there are commonalities, an individualistic approach is valuable as not everyone can, or would wish to, attend groups, or wants to engage in services that are designed for specific groups. This is particularly pertinent when looking at younger people and adults who are lonely, in particular men. Information databases such as ALISS could be useful in explaining what groups/clubs someone's community has to offer.

5.6 'Keep Safe' (I Am Me)

A possible model is the example of 'Keep Safe' (I Am Me) which is a charity that melds free and accessible information resources with a locally identified solution to safety. The charity has created a film, I Am Me along with a training pack to educate about the impact that bullying and harassment can have. The project also has an initiative called 'Keep Safe' which was developed in response to feedback from the local community, and was designed in collaboration with disabled people from across Renfrewshire. The initiative works in partnership with Police Scotland and a network of local businesses to create 'Keep Safe' places for disabled, vulnerable, and elderly people when out and about in the community. This is now a national initiative.

5.7 Housing

Having a viable, sustainable home is a fundamental pillar of a cohesive community. Homelessness can contribute to an individual's sense of isolation. Renfrewshire Council and FLAIR (Federation of Local (Housing) Associations in Renfrewshire) are more than simply providing a roof over someone's head, important though that is. Examples of FLAIR's specific projects and other work include:

Creative Pathways, Community Funds, Tenancy Sustainment, Health and Wellbeing, Challenging Poverty, Care and Repair Renfrewshire, Welfare Rights, Community Facilities and Meeting Spaces, Community Events, Arts and Culture, Creative Ageing, Employability, Car Clubs, Community Engagement, Environmental Works, Training for prospective Board Members, Digital Projects, and the very successful Community Connectors Project (an initiative comprising 3 local organisations: Recovery Across Mental Health (RAMH), Active Communities and Linstone Housing Association working together to provide a social prescribing initiative for people with complex, non-medical issues who frequently attend their GP).

Action: Promote the role of Community Connectors as well as information systems such as ALISS, which allow someone to access support and information.

5.8 Homelessness

In Renfrewshire in 2018/19, 848 people made a homeless application with over 75%⁸ of applications received from single person households. Over 57%⁹ of applications were received from single males and 18%¹⁰ were received from single females. A high proportion (62%)¹¹ of homeless applicants self-identify as having one or more support needs, with the highest proportion of support need identified as relating to mental health issues.

5.9 Housing Support

While Housing Support is offered to all homeless applicants during their stay in temporary accommodation, and is also available to those who feel they would benefit from it when moving into a new tenancy following a needs assessment, many people are reluctant to engage with statutory services to obtain this support. Housing Support is also available for people who already have their own home but who feel they may need some extra assistance and support. It is highly likely that a significant proportion of people who are homeless or are threatened with homelessness experience feelings of loneliness and isolation, either at the point they are staying in temporary accommodation, or when they move into a permanent tenancy.

⁸ Scottish Government Annual Report for Renfrewshire 2018/19

⁹ Scottish Government Annual Report for Renfrewshire 2018/19

¹⁰ Scottish Government Annual Report for Renfrewshire 2018/19

¹¹ Scottish Government Annual Report for Renfrewshire 2018/19

6. CONCLUSION

6.1 A Public Health and Societal Challenge

Loneliness is a public health and societal challenge. Developing a more socially connected community requires commitment from across the spectrum of public, private and community environs.

The weight of responsibility will inevitably fall on public sector agencies, however promotion of socially connected communities is fundamentally a cornerstone of a fair and caring society. However, Renfrewshire HSCP can take the initiative to promote a coherent approach to developing resilient communities throughout Renfrewshire. Creating a *Confident Renfrewshire*, where individuals feel empowered to reach out to neighbours and acquaintances, transcends corporate or legislative imperatives.

Action: Roll out basic training to key retailers, frontline Council and Health staff and public transport providers, and provide a pocket-sized resource they can give to someone about available support.

6.2 Partnership-working

Renfrewshire's Local (Community) Partnerships all include addressing loneliness and social isolation as a priority issue which can only be delivered successfully through partnership-working. A real and sustained culture shift is needed to embed the consideration of loneliness and social isolation as a vital component within the everyday lives of communities, schools and health and social care staff, within working practices, and within joint needs assessments. The SLWG has comprehensively discussed the subject of loneliness and social isolation and have looked at what could be done to address this issue. It is hoped that the following Recommendations might offer a practicable and effective response.

7. RECOMMENDATIONS

- 7.1 Identify a 'Champion' for 'Connectedness' (potentially a Renfrewshire Elected Member).
- **7.2** Identify a Lead Officer to ensure that the roll-out of information is readily available in public and private places, e.g., libraries, schools, leisure centres, town centres, GP surgeries, clubs, etc., utilising various types of platform to display information, e.g., posters, notices in local papers, touch-screens in public areas, etc.
- **7.3** Embed the consideration of 'connectedness' within all Joint Needs Assessments in the same vein as Routine Sensitive Enquiry.
- **7.4** Offer Awareness Sessions in Social Connectedness across the communities of Renfrewshire.
- 7.5 Note the Actions included throughout this report.
- 7.6 Review progress on Recommendations / Actions in 6 months' time by the SLWG.

8. ATTACHMENTS / WEBLINKS

8.1 A Connected Scotland: Our Strategy for tackling Social Isolation and Loneliness and building stronger Social Connections: The Scottish Government, 2018 ISBN:978-1-78781-459-2 (Crown copyright 2018): <u>https://www.gov.scot/publications/connected-scotland-strategy-tackling-social-isolation-loneliness-building-stronger-social-connections/</u>.

8.2 Renfrewshire Health and Wellbeing Survey 2017/18: <u>http://www.renfrewshire.hscp.scot/media/9026/NHS-GGC-HW-Survey-</u> 1718/pdf/..pdf?m=1548089480210

8.3 Council's Building Safer and Greener Communities Progress Report (May 2018): https://renfrewshire.cmis.uk.com/renfrewshire/Document.ashx?czJKcaeAi5tUFL1DTL2U E4zNRBcoShgo=7bVJWTiGBAo59%2fNARLur%2b6qbDKP2ZCG11yVMf6KcXQGnom EUJ%2f2Cfg%3d%3d&rUzwRPf%2bZ3zd4E7lkn8Lyw%3d%3d=pwRE6AGJFLDNlh225 F5QMaQWCtPHwdhUfCZ%2fLUQzgA2uL5jNRG4jdQ%3d%3d&mCTlbCubSFfXsDGW 9lXnlg%3d%3d=hFflUdN3100%3d&kCx1AnS9%2fpWZQ40DXFvdEw%3d%3d=hFflUd N3100%3d&uJovDxwdjMPoYv%2bAJvYtyA%3d%3d=ctNJFf55vVA%3d&FgPIIEJYlotS %2bYGoBi5oIA%3d%3d=NHdURQburHA%3d&d9Qjj0ag1Pd993jsyOJqFvmyB7X0CSQ K=ctNJFf55vVA%3d&WGewmoAfeNR9xqBux0r1Q8Za60lavYmz=ctNJFf55vVA%3d&W

8.4 Your Home, Your Street, Our Community:

http://www.renfrewshire.gov.uk/YourHomeYourStreet

8.5 Web-link to the WEGGA video:

https://www.youtube.com/watch?v=3jn5gK80PIA&feature=youtu.be

8.6 Support in Your Local Community (including Local Clubs and Groups).

This web link: <u>https://www.renfrewshire.hscp.scot/article/5197/Local-Clubs--Groups</u> takes you to 3 separate web links:

Scotland's Services Directory: https://www.nhsinform.scot/scotlands-service-directory;

ALISS: <u>https://www.aliss.org/;</u> and;

NHS Inform: https://www.nhsinform.scot/.

Stephen McLellan, Chief Executive, RAMH Ann Drennan, Health, Homelessness and Housing Lead, Renfrewshire HSCP 01.10.19