

# KEY MESSAGES



GIVING A VOICE TO SCOTLAND'S COMMUNITY LINK WORKERS

## SCLWN: Leads Peer Support Event 25 February 2026

### Introduction

Voluntary Health Scotland and the Scottish Community Link Worker Network hosted their latest SCLWN Leads Peer Support Event on 25 February 2026. The event is an opportunity for those who have responsibility for the operational or strategic management of their HSCP's Community Link Worker Programme to come together with their peers to share learning and good practice. The event focused on Argyll and Bute HSCP's work around the delivery of their CLW programme in rural and island communities.

### Rural Healthcare Expansion

Jenny Dryden and Asia Nicoletti from Argyll and Bute Health and Social Care Partnership presented on their community link working service, focusing on the challenges and successes in delivering care to rural and remote populations. They discussed the expansion of their service from 12 to 21 GP practices, covering 80% of the population, and highlighted gaps in service coverage, particularly on some inhabited islands. The presentation also touched on the complex service delivery model in the area, involving multiple organisations and geographical challenges. Jenny highlighted the positive word-of-mouth feedback and the reluctance of GPs to participate initially, but noted that the service's success has led to increased involvement and promotion by GPs. Jenny shared their [video](#) which includes GP input.

### Community Link Worker Impact Study

Jenny discussed their project evaluating community link working services on Argyll and Bute Islands, funded by the National Centre for Remote and Rural Health and Care. The project aimed to understand the implementation and impact of such services on island communities, generate evidence on reducing health inequalities, and explore how community link workers could improve access to services. The

project focused on gathering insights on the accessibility and perceived value of community link worker programmes, using a qualitative approach to gather feedback.

Two community workshops were held on Islay and Tiree, with Islay currently having a service but low referral rates, while Tiree lacks a service entirely. Jenny discussed the challenges of setting up the Community Link Worker Service in Islay, noting that while GP practices were aware of the service, referrals were limited due to a lack of local community awareness of the project. She explained that the approach has evolved to include community team referrals and maintaining connections with community figures who can champion the service. The group discussion also highlighted the importance of being able to demonstrate impact to secure funding as well as the potential for evaluating different CLW models.

## Community Challenges on Islay and Tiree

Asia presented their findings from research on Isla and Tiree islands, highlighting differences and similarities in community challenges. On Islay, participants expressed concerns about stigma, lack of anonymity, and the normalisation of alcohol-related harms due to the whiskey industry. In contrast, Tiree residents saw potential benefits in community link workers directing people to services and addressing loneliness, though they already felt well-connected. Both islands had mixed views on whether link workers should be from the islands or mainland. The group discussion included considerations for face-to-face meetings, integration of services, and the challenges of telephone appointments due to poor connectivity.

Islay residents preferred an external organisation to provide the service while maintaining a local presence. Jenny mentioned challenges in accessing the islands for workshops, including travel disruptions and accommodation issues. The team plans to conduct a questionnaire to gather broader insights from the communities and potentially visit other islands. They also discussed the possibility of implementing changes to allow island residents to choose between link workers based on or off the island.

## Link Worker Registration - Policy Challenges

The group discussed challenges with community link workers being registered at the same GP practices where they work, particularly in remote and rural areas. Lynn shared that some GP practices in Lanarkshire were uncomfortable with link workers being registered at the same practice where they work, while others were more accepting. Leanne noted that a policy exists across all practices in North Ayrshire, preventing staff from being registered at the practices where they work. The discussion highlighted the difficulties this policy creates in remote areas,

where travel distances and ferry crossings make it particularly challenging for link workers to access healthcare services.

## Arran's Successful Community Collaboration Model

Leanne discussed the CLW model in North Ayrshire, which includes delivering interventions such as smoking cessation and social isolation support, with a 60-40 split between clinic and non-clinical time. The group discussed a successful voluntary sector model in Arran that works well due to strong community collaboration and professional leadership, unlike other islands where different community groups don't always work together.

Leanne explained that the model's success comes from having a mainland-based link worker who is managed by a cancer-specific charity, rather than a mainland-based post that previously didn't work well.

With regards to a question on additional funding for the CLW programme in Argyll and Bute, Jenny noted that while Macmillan funding supports cancer patients, the approach takes a holistic view of long-term conditions and includes general support activities like walking groups, although this funding is temporary.

## Further information

Contact [Roisin Hurst](#) Project Manager, Scottish Community Link Worker Network

Registered Scottish Charity SC035482 A company limited by guarantee SC267315