Edinburgh Community Link Worker Service

Annual Review 2025-2026

Edinburgh Health and Social Care Partnership

Working together for a caring, healthier, safer Edinburgh

Edinburgh Community Link Worker Service Impact Overview 2018-2026

32,671 Referrals

Top Reasons for referral:

1. Mental health 14,091
2. Social isolation & loneliness 8,474
3. Housing 3,389

79,073 Engagements

55,124 Total Links

Contents, Figures and Tables

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Welcome

Welcome to the Edinburgh Community Link Worker Service's Annual Review for 2025/26.

It will not have escaped anyone's notice that this Review is slightly different to our previous editions. Whilst the statistics, photographs, quotes, in-year highlights and looking forward sections are all still there we have switched from the familiar printed document to an electronic version, reducing both our carbon footprint and costs!

It is fair to say that there are many challenges in Community Link Working. The greatest challenge has undoubtedly been collating this year's statistics as we grappled with marrying the tail end of Salesforce data - which is not presented in the same way as Elemental – to the body of data we had from Elemental. I am indebted to the Edinburgh CLW management team for their perseverance and determination to make this happen! Thank you all.

Both the Improving the Cancer Journey Link Workers and Community Link workers are resilient, passionate and professional, showing resourcefulness in finding ways to refer people onto activities despite a diminishing number of available services. I am continually in awe of this ability to keep on supporting people – and so grateful that they do! Again, thank you all.

I hope that you still enjoy reading about Community Link Working in Edinburgh in our new format.

Anne

Anne Crandles
Community Link Worker Service Manager
Edinburgh Health & Social Care Partnership

Referrals

Annual Referrals

In total, 4,823 referrals were received during this reporting year, compared with 4,283 in the previous reporting period. This represents an increase of 13% and is the highest number of referrals the service has received since its inception.

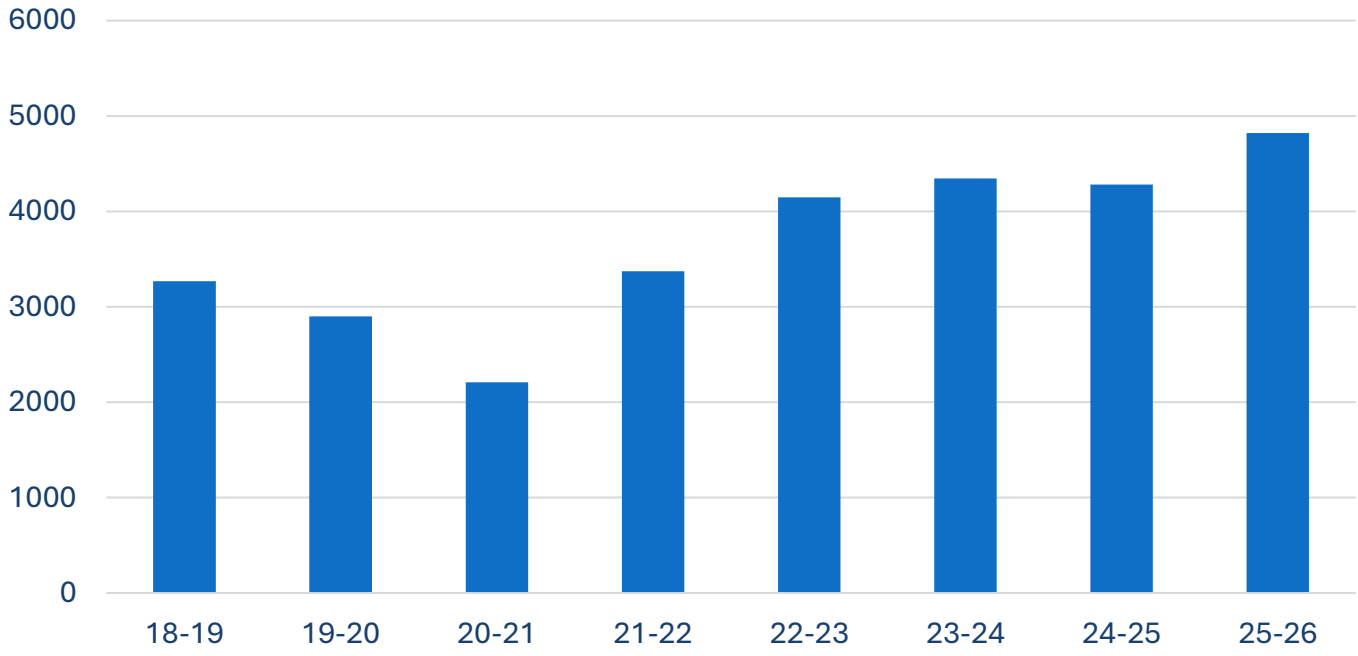

Figure 1: Annual referrals 2018-2026

Monthly Referrals

Referral activity remained relatively consistent throughout the year, with a median of 416 referrals per month. The highest number of referrals was received in September (453), closely followed by January (451), while December recorded the lowest monthly total (317), reflecting the typical seasonal reduction in activity over the festive period.

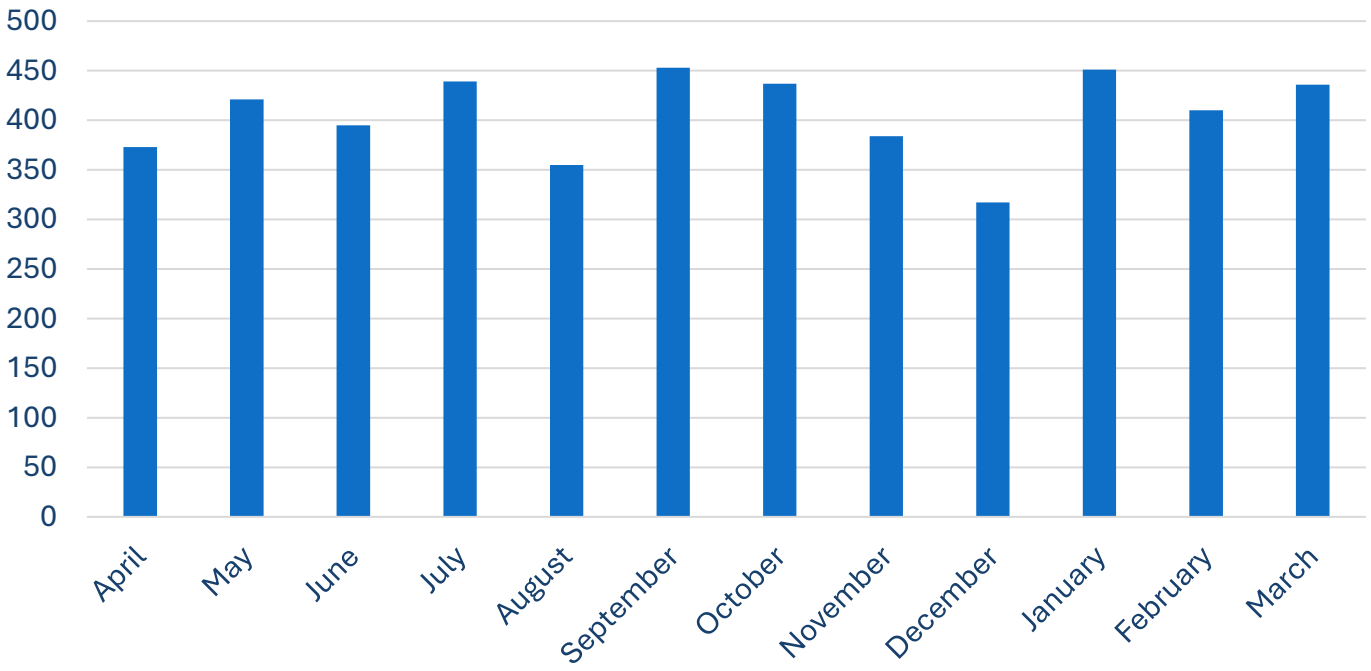

Figure 2: Monthly referrals

5 Referrals

Monthly referrals April 23 - March 26

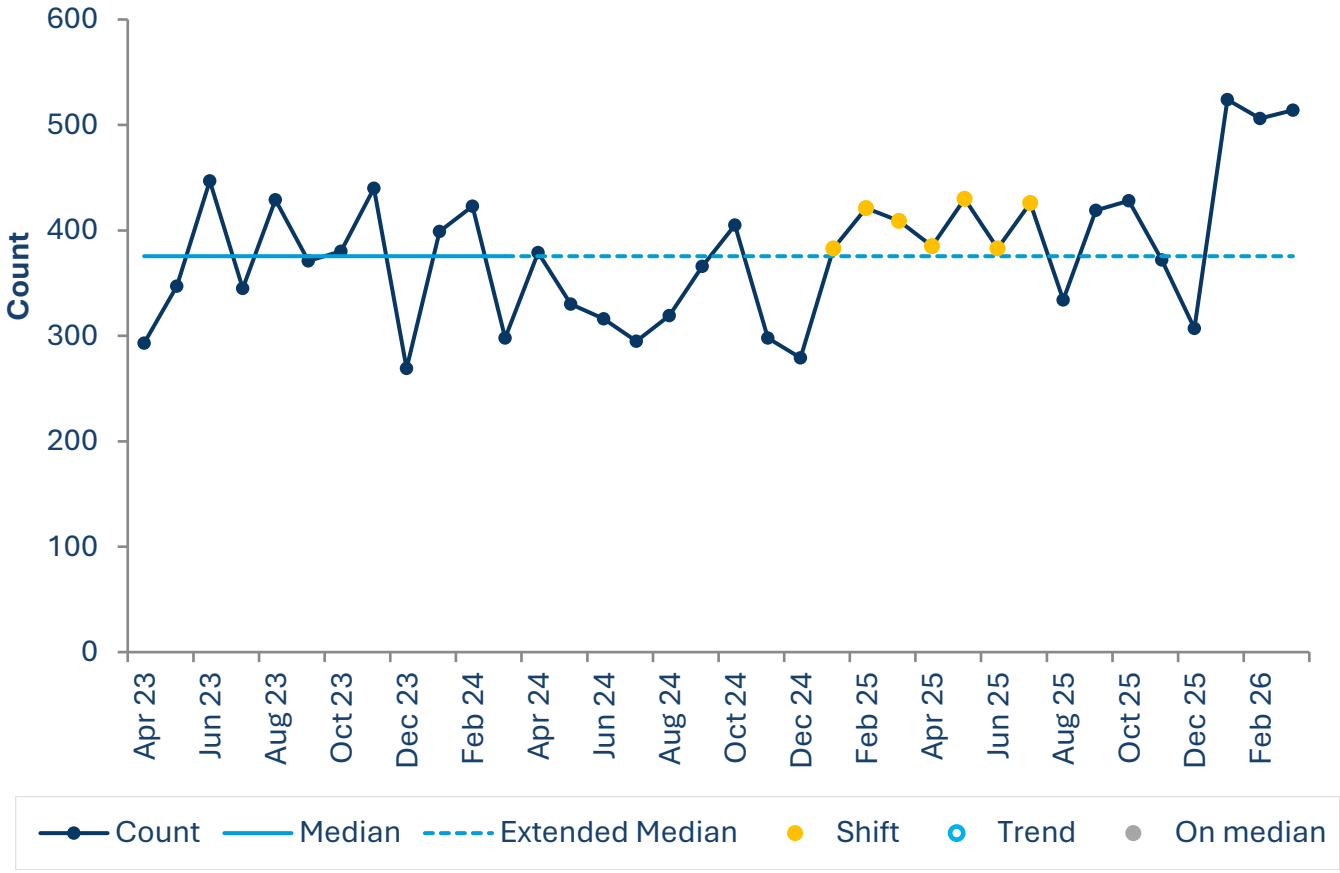

Figure 3: Monthly Referrals Apr23-Mar26

This run chart shows monthly referrals from April 2023 to March 2026 with a median of approximately 375 referrals per month.

Monthly referrals remained broadly stable between April 2023 and December 2025, fluctuating around a median of 375 referrals per month. A recurring seasonal pattern is evident, with referral numbers typically decreasing during the summer months and over the Christmas and New Year period before recovering in following months. A period of sustained higher activity was observed during the first half of 2025, with six consecutive data points above the median, suggesting a temporary shift.

The most significant change occurred from January 2026 onwards, when referrals increased to over 500 per month, representing the highest levels recorded during the reporting period. Further data are required to determine whether this increase represents a sustained change in demand or service utilisation.

Referrals by Gender

Of the patients referred, 59.9% identified as female and 39.5% as male. The remaining 0.6% identified as transgender, non-binary or other, preferred not to say, or had not yet disclosed their gender.

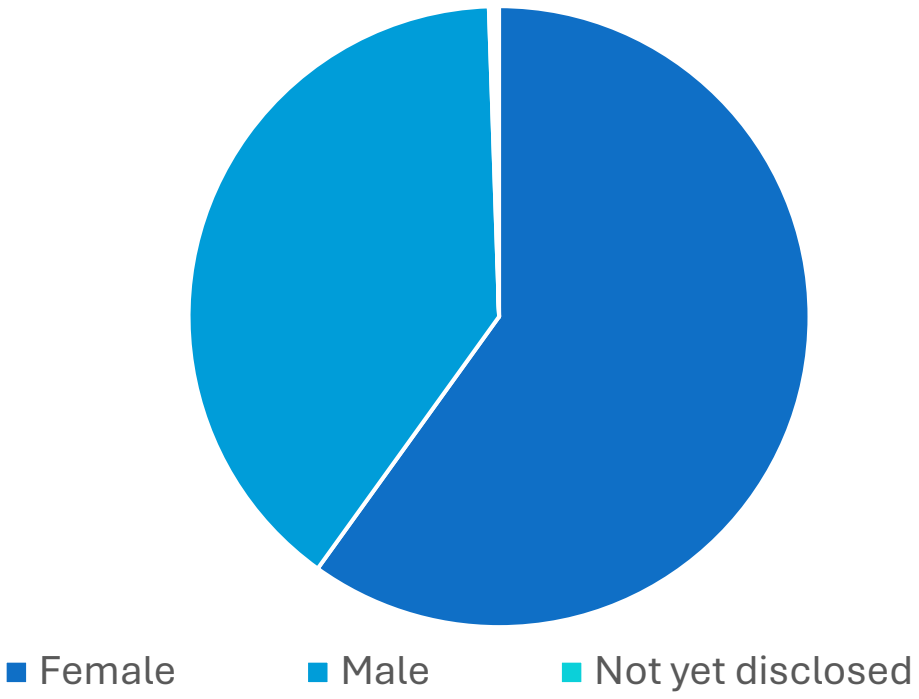

Figure 4: Referrals by Gender

Referrals by age bracket

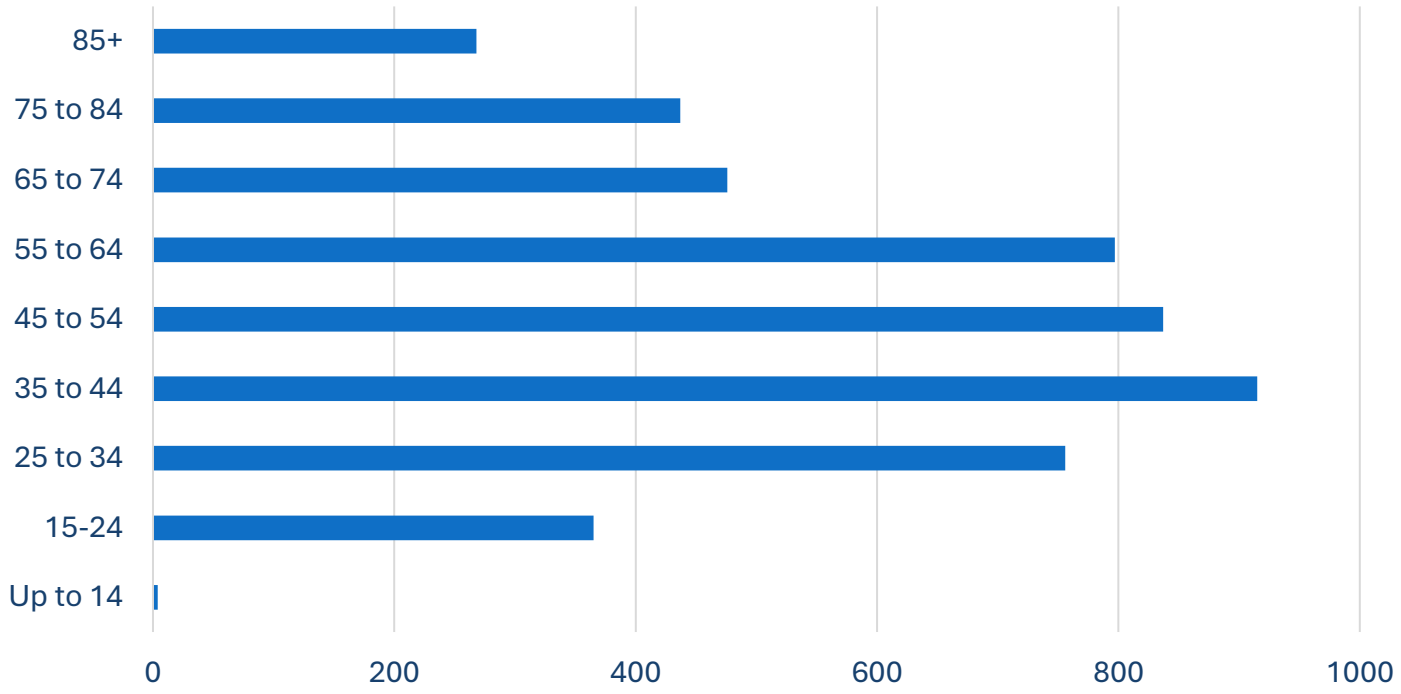

Figure 5: Referrals by age bracket

Referrals by Ethnicity

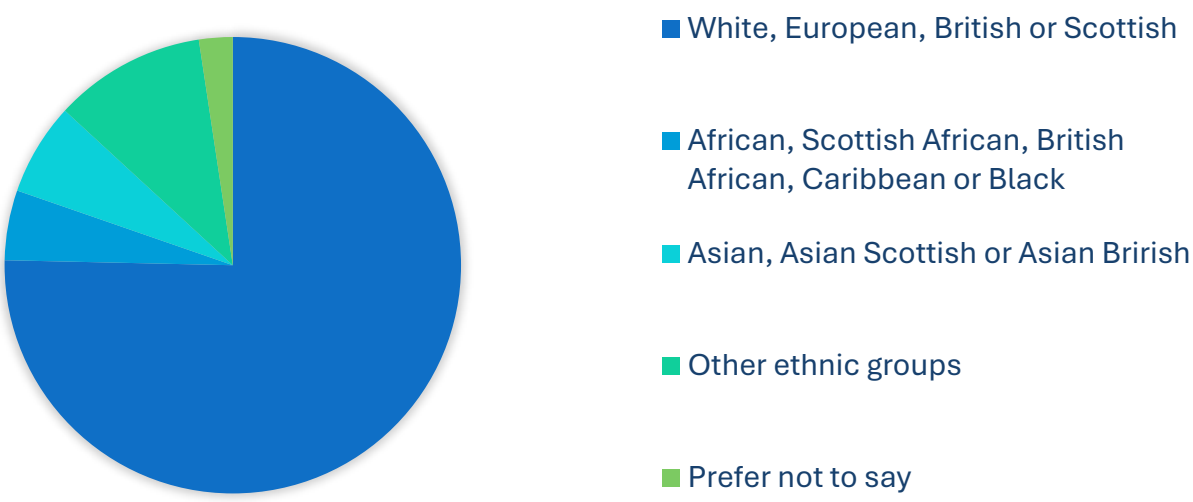

Figure 6: Referrals by Ethnicity

Referral Reasons

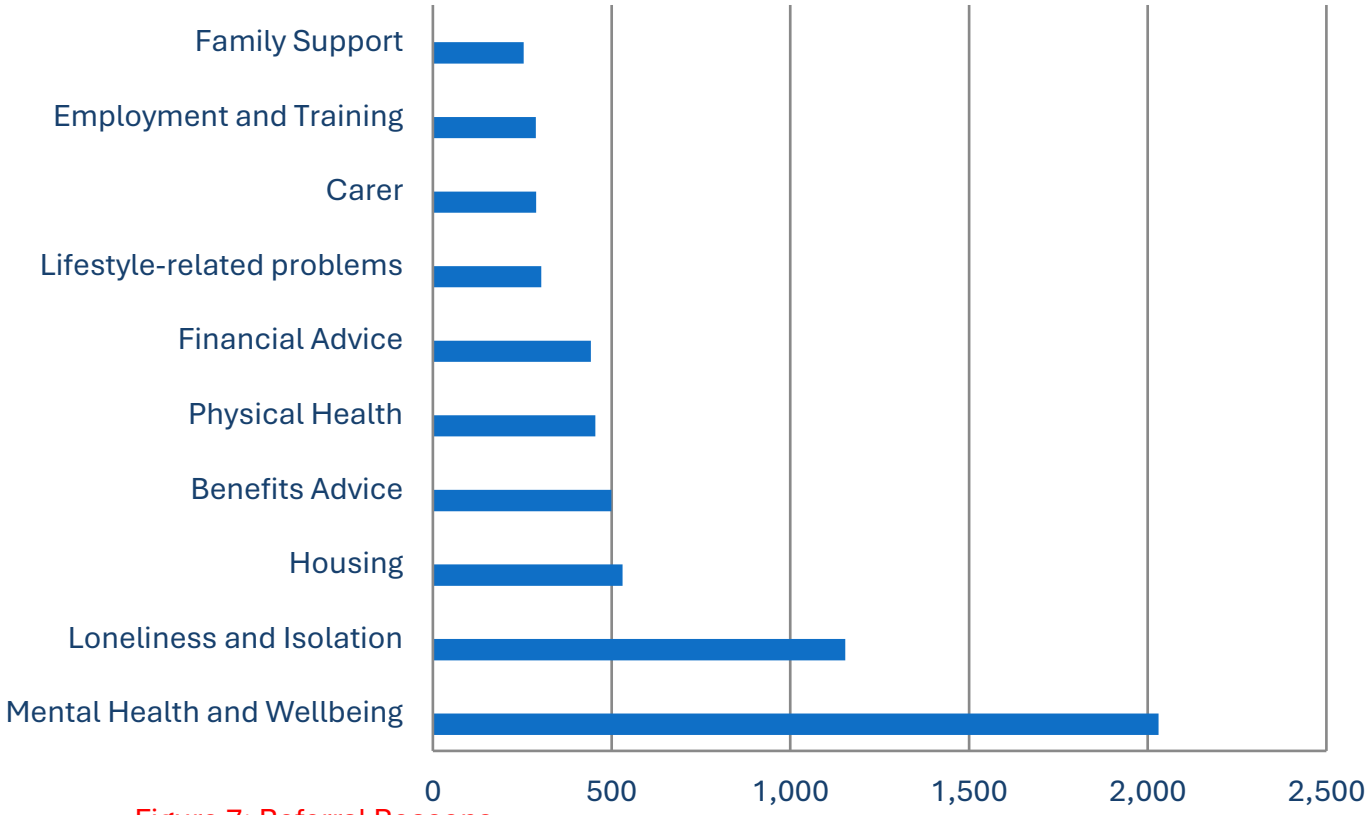

Figure 7: Referral Reasons

The profile of referral reasons identified by the referrer remains broadly unchanged from previous years. Mental Health and Wellbeing, Loneliness and Isolation, and Housing have consistently been the three most common referral reasons, demonstrating ongoing and persistent need in these areas. Needs identified by the CLW often differ from those of the referrer and this is reflected in the onward referral destination.

"'You've built me a bridge to get me over a bump.'

'I'm feeling a lot more positive now, thanks to you.'

'You have made such a difference to our isolation and stress.'

'Very useful - a very good service sits well between physical and mental health. Thank you.'

'You've made a big difference in my life. It's because of you I feel more comfortable. Your role is very important.'

'Things have now started to happen for us since you became involved.'

'You've opened up avenues I didn't know about. I would be stuck if it wasn't for you".

Links

A total of 10,447 onward links were made by CLWs, an increase of 28.1% when compared to last year's reporting period. These links were made to 972 different groups, services and activities. In keeping with previous years our most frequently linked to service for patients was Edinburgh Leisure, with a combined total of 810 links, an increase of 22.7% compared to last reporting year.

Service Name	Referrals Made
Edinburgh Leisure	648
Social Care Direct	277
Health All Round	193
Health in Mind	118
Cyrenians	115
VOCAL	107
Carr Gomm	90
Volunteer Edinburgh	87
Thrive Welcome Team	61
The Thistle Foundation	59
Edinburgh Community Yoga	50
The Health Agency	50

Table 1: Most common referral service providers

Housing and Welfare Rights support remain core issues for CLWs. A total of 1503 links were made to services within this category accounting for 14.4% of CLWs work. Some CLWs have direct access to Welfare Rights within their practices but this is not universal across all. CLWs do not support patients with Welfare Rights claims, they refer this on to specialist workers.

Service Name: Housing	Referrals Made
CEC Housing Departments	132
Right There	89
Four Square	70
Turning Point	68
Service Name: Welfare Rights	**Referrals Made**
Granton Information Centre	185
CHAI	105
The Advice Shop	83
Cyrenians Income Max	74
Citizens Advice Edinburgh	72

Table 2: Most common referral service providers: Housing and Welfare Rights

A further 947 links were made to services supporting other areas of core needs. This includes over 300 referrals to foodbanks and over 200 referrals to the Fuel bank foundation.

Service Name: Core Needs	Referrals Made
Foodbanks	314
Fuel Bank	214
Edinburgh Lothians Trust Fund	145
Hope4U	72
Empty Kitchens Full Hearts	47

Table 3: Most common referral service providers: Core needs

Signposting links are also captured, with the most common signposting destinations similar to the issues presenting through the onward referral destinations.

Service Name	Signposts Made
Thrive Welcome Team	166
Health All Round	164
Edinburgh Leisure	162
Health in Mind	153
The Thistle Foundation	99
Citizens Advice Edinburgh	89
North Edinburgh Arts	80
VOCAL	80
The Advice Shop	70
Hope Park Counselling	65

Table 4: Most common signposting service providers

Funds and Grants

In this reporting year, CLWs secured £104,493 in grants and funding for patients. This represents a 42% increase from the 2024–25 total of £73,513. This reflects the growing need for support with essential goods and basic living costs.

The funding landscape continues to be challenging, and CLWs are continually seeking new funding opportunities to support patients. To assist with this, the team has developed a funding and grants resource document, which is currently 28 pages long.

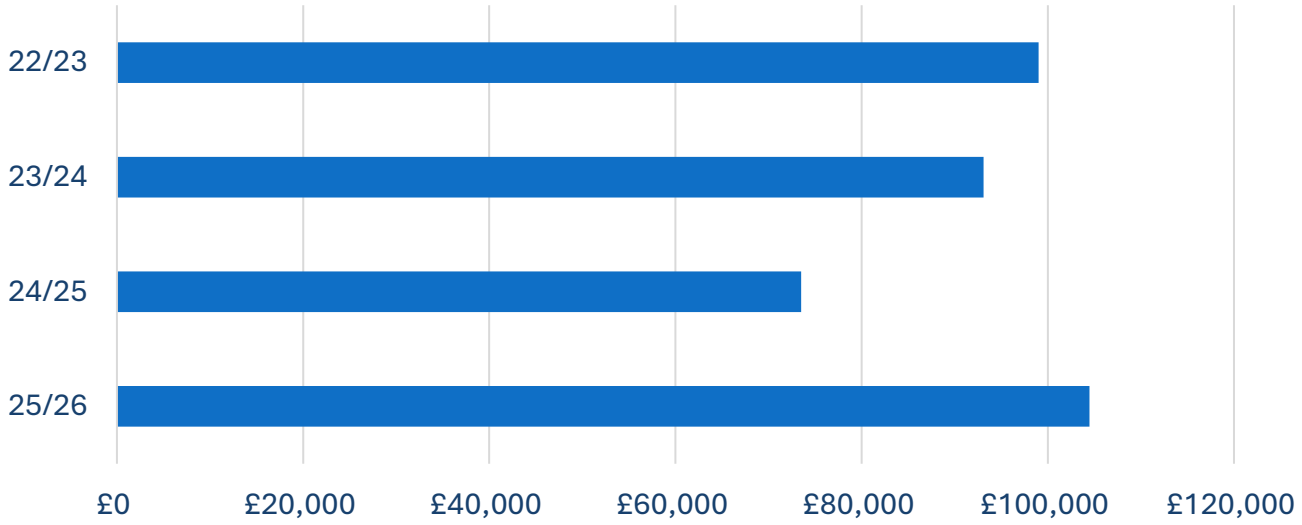

Figure 8 Funds secured 2022-2026

Wellbeing Measures

For the second consecutive year data is available around wellbeing measures. CLWs continue to use ONS4, a standard wellbeing tool developed by the Office of National Statistics designed to assess key aspects of wellbeing.

Patients are offered the questionnaire at the beginning and end of their support with a CLW, offering a standardised way to measure personal wellbeing. The questions consider four measures: life satisfaction, feelings of worthwhileness, happiness and anxiety. Overall, the data shows CLW support was associated with improvements across all four ONS wellbeing domains. On average life satisfaction increased by 1.70 points per patient, an improvement of 6.3% from last reporting period. Anxiety decreased by an average of 1.71 points per patient, an improvement of 14% compared to last reporting period. Anxiety scores are reversed to reflect a reduction in anxiety.

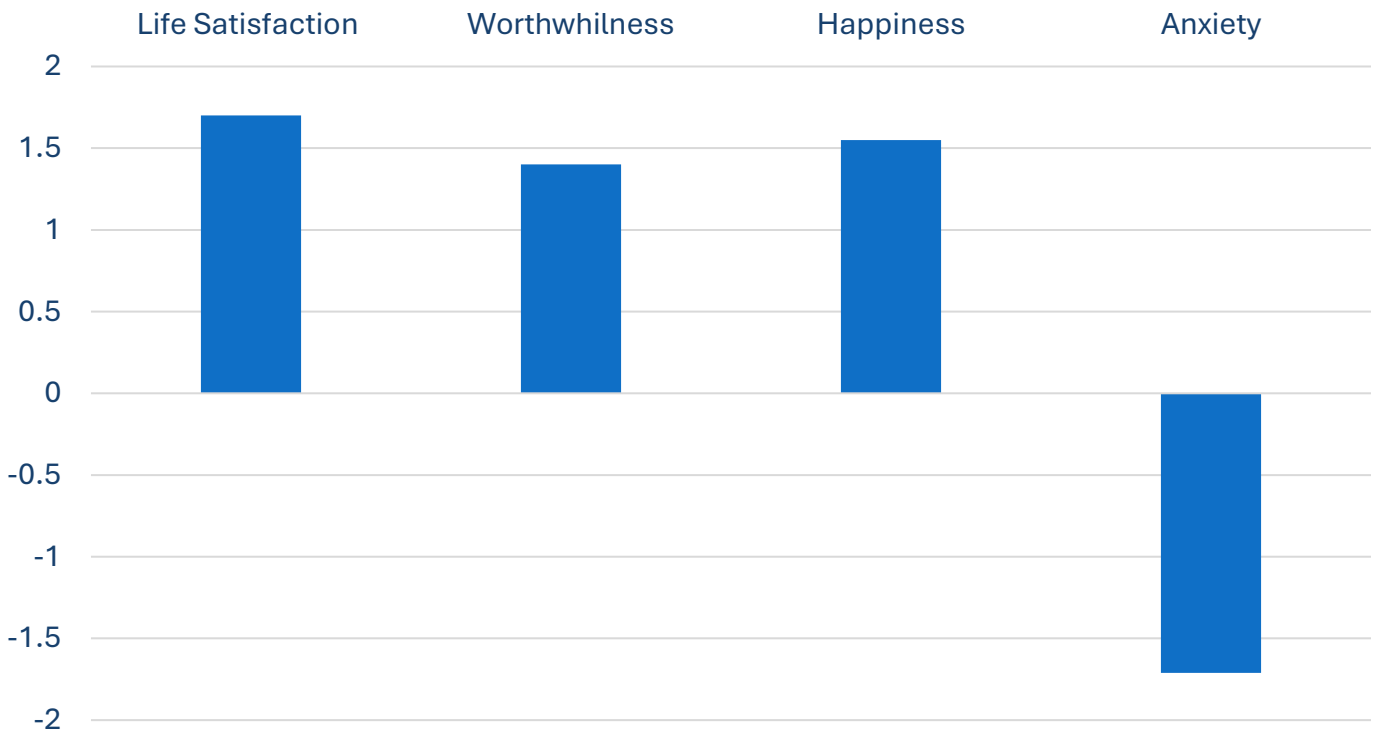

Figure 9: Average change in ONS4 scores after CLW support

The majority of patients experienced a positive change across all four ONS wellbeing measures. The greatest improvements were seen in Life Satisfaction (72.2%) and Anxiety (72.0%) with almost three quarters of participants reporting improvement. Happiness improved for 67.6% of patients while 63% reported an improvement in feeling that the things they do in life are worthwhile. Negative change was reported for fewer than 15% of patients across all measures, with life satisfaction recording the lowest level of negative change at 8.5%.

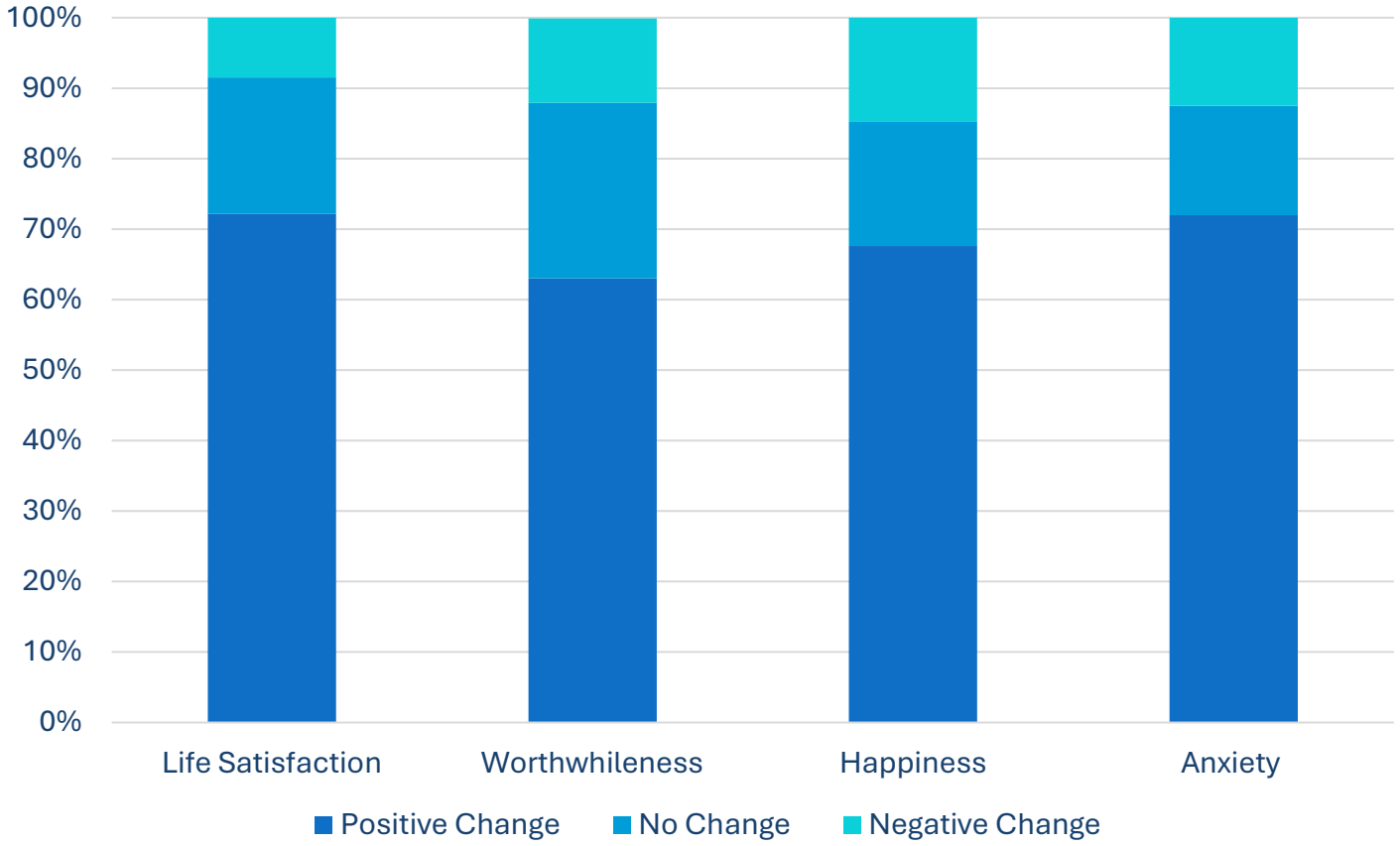

Figure10: Direction of change in patient ONS4 scores after CLW support

14 Wellbeing Measures

Engagements

Type of appointment

In total, 12,925 appointments were made in this reporting period, an increase of 12.5% from the previous year. 66.1% of appointments booked this year were in person which includes all face-to-face appointments, home visits and accompanied visits. The remaining 33.9% of appointments booked were telephone, a decrease from last reporting year when 36% of appointments booked were by telephone. CLWs continue to face room pressures in practices which makes face to face appointments an ongoing challenge.

Of all appointments booked in this period 35.8% were initial and 64.2% were follow-ups.

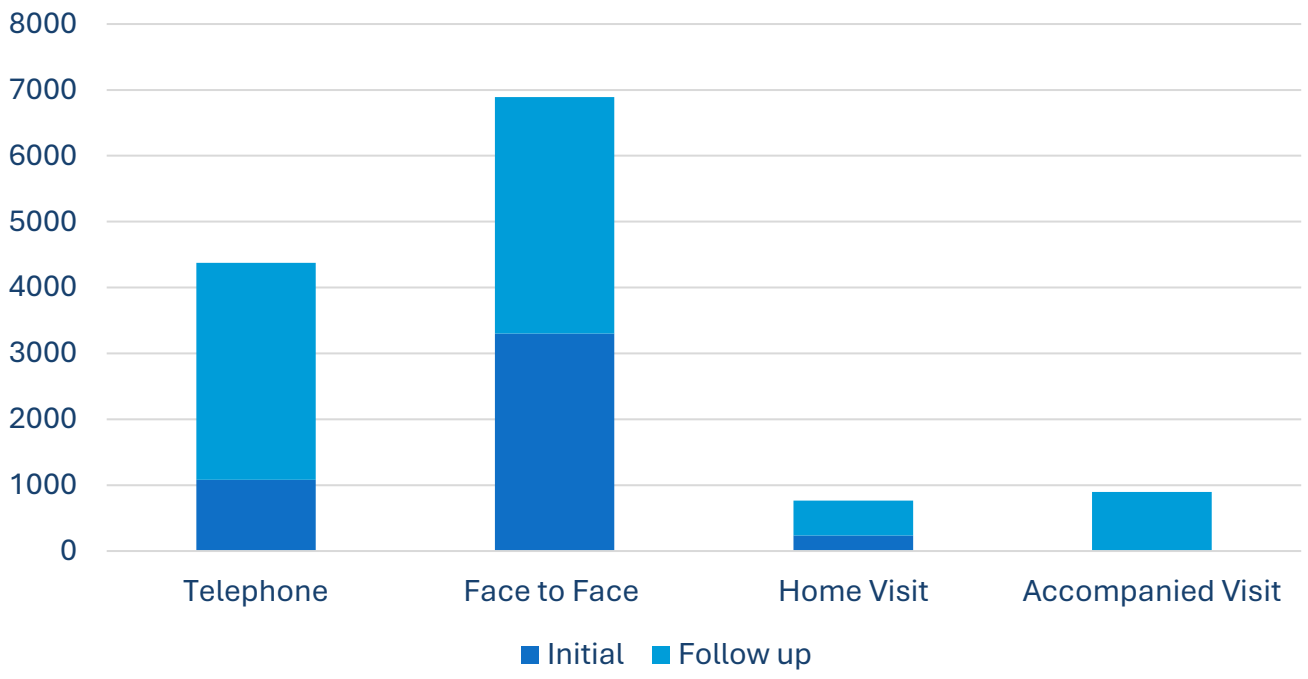

Figure 11: Total Appointments by Type

78.1% of all booked appointments were attended this year, a slight decrease from 80% in last reporting year. Of the appointments not attended 6.4% were cancelled, 5% were rearranged and 10.5% resulted in a Did not attend (DNA).

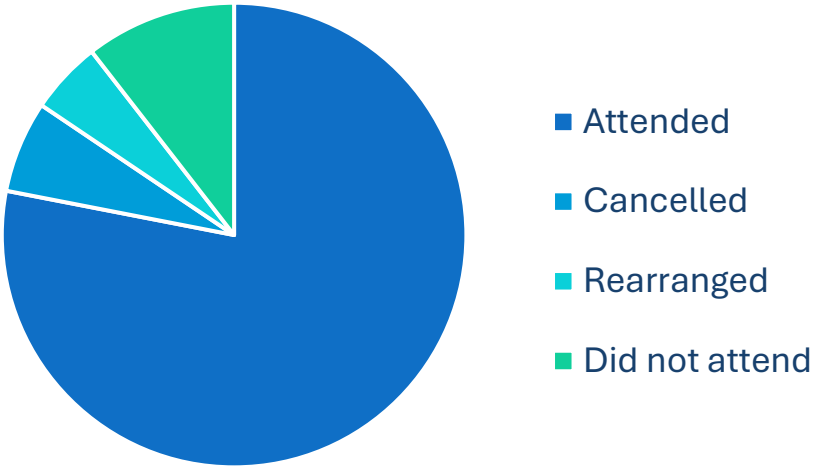

Figure 12: Attendance of Appointments

Length of appointments attended:

78.1% of all booked appointments were attended, resulting in 10,089 CLW delivered appointments.

Face to face appointments remained the most common intervention averaging 53 minutes, while telephone appointments averaged 31 minutes.

Home visits averaged 67 minutes reflecting the additional complexity of supporting individuals in their own home. Home visit time does not take into account the additional time required for CLW travel. Accompanied visits were the most resource intensive intervention, averaging 86 minutes and frequently lasting longer than one hour. These findings demonstrate that CLW support extends far beyond brief contacts, with the majority of appointments involving substantial CLW time to provide person centered driven support.

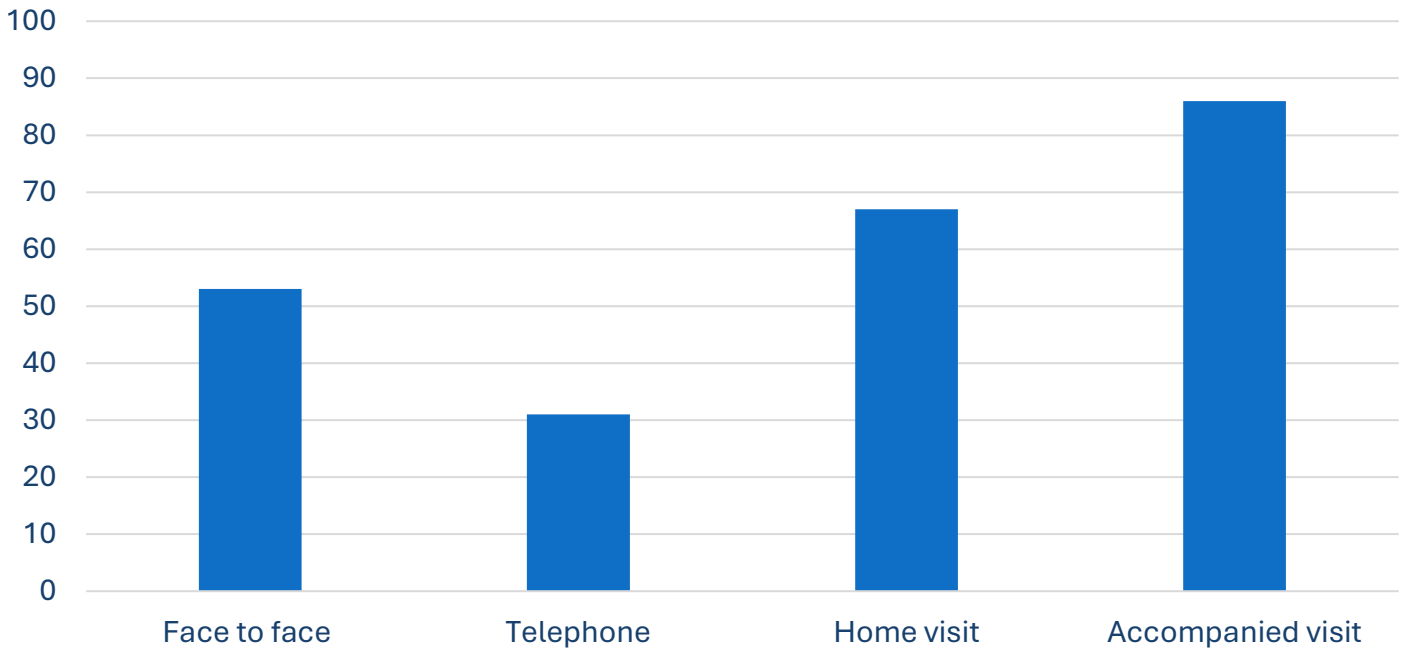

Figure 13: Total appointments by Type

16 Engagements

Further analysis of engagement data shows initial appointments consistently take longer than follow up appointments, suggesting time is used during initial appointments to build trust and rapport. Patients have reported in feedback not feeling rushed to tell their story.

Telephone follow up appointments remain the shortest intervention with a median duration falling within the 16–30-minute time band. This indicates they are frequently used for ongoing review, support and check in with patients.

Home visits remain resource intensive regardless of whether they are initial or follow up, averaging more than one hour, plus travel time. Home visits account for less than 6% of total appointments booked.

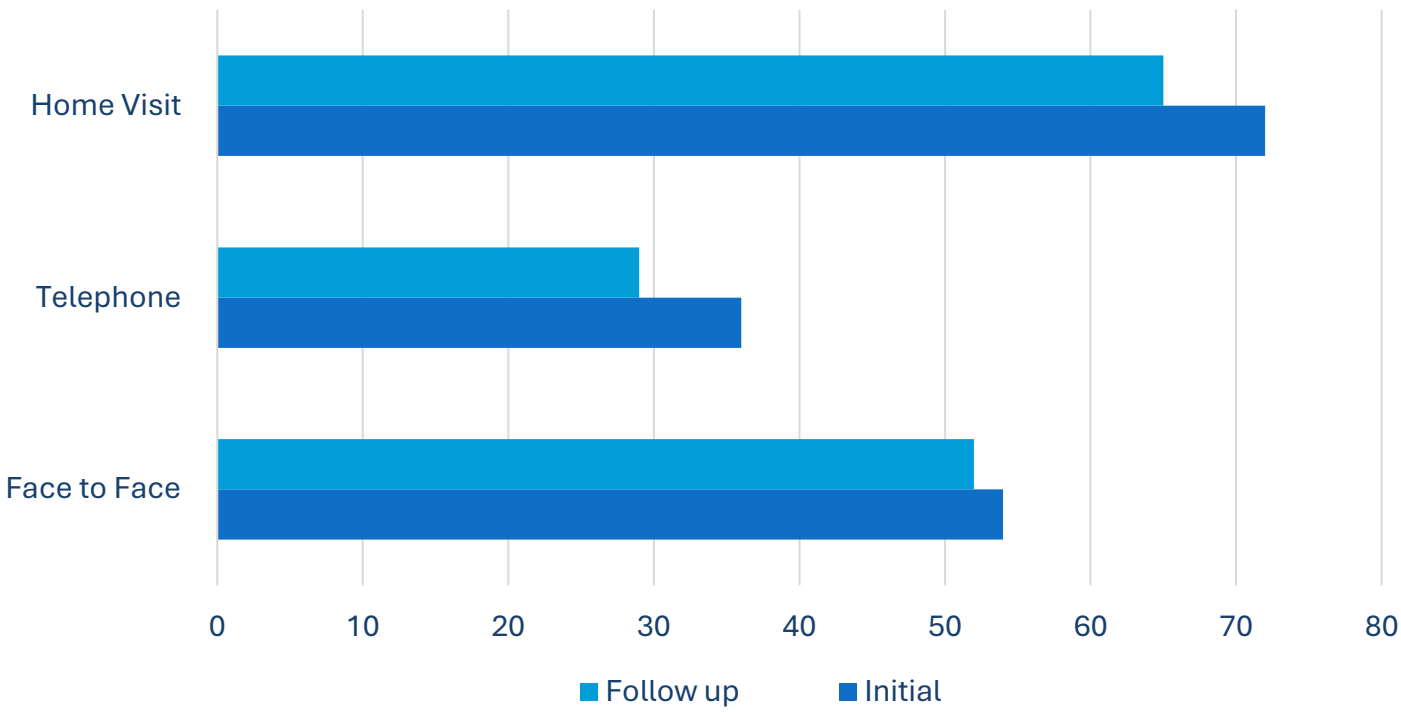

Figure 14: Average Appointment Time in Minutes

Highlights of 2025-2026

Queen Margaret University research

The research paper *Third sector perspectives on community link worker referrals in social prescribing: a realist analysis* was published in October 2025, following a year-long study.

The research identified several areas that the CLW service want to explore further; these include accompanied visits, referrals to the right place, third sector understanding of the CLW process/model, relationships between CLW and services, and patient outcomes.

During this period, there was proposed funding cuts to 64 third sector organisations. These potential cuts created significant uncertainty for the sector and would have reduced the number of community resources available to CLWs to refer to.

A working group of 5 CLWs has been established to explore these themes and will feed findings back to the research team.

National CLW Advisory Group

The Scottish Government led working group continued its review of Community Link Worker programmes across the country, with an update expected autumn/winter 2026.

NHS Education Scotland, commissioned by Scottish Government, also progressed the development of a national Skills and Knowledge Framework for Community Link Workers and Social Prescribers. The working group includes programme leads from across the country, academics, Scottish Government, and Macmillan. The framework is due to launch during 2026.

Elemental Wave 4

This year saw wave four of Elemental integration and the final 12 Vision practices move over to the system. This involved training the remaining CLWs who had continued using Salesforce. The integration was completed in stages throughout the year, with all twelve practices fully operational by January 2026.

To complete the transition to Elemental, a workaround was introduced for the remaining seven EMIS practices, as EMIS does not currently integrate with Elemental. Salesforce was officially retired from the service in March 2026. From 1st April 2026 all service data is recorded within a single reporting system, enabling more streamlined data collection, evaluation, and reporting.

Highlights of 2025-2026 cont

Scottish Community Link Worker of the Year

The service was delighted to have two CLWs shortlisted as finalists in the inaugural Scottish Community Link Worker Network awards in May 2025.

Dawn Craig and Sophie Carmichael were nominated by their employing organisations, Carr Gomm and Pilton Community Health Project. Dawn Craig was named Scottish Community Link Worker of the Year. Her lead GP, Catriona Morton, described her as "Dawn is an integral part of our practice team, empowering us to understand better how we can enable patients to move on from what are often debilitating and lifelong conditions, and early life trauma."

Big House Multibank

In spring 2026, the CLW formed a partnership with Edinburgh Community Food who are a satellite hub for the Big House Multibank.

The Multibank distributes returned, unused goods from several large retailers which would otherwise have gone to landfill. Through this partnership, CLWs can request clothes, toiletries, and household goods amongst other items on behalf of patients.

Initial feedback from patients has been positive, with patients very appreciative for the additional support. The partnership provides CLWs with another valuable resource to help address practical needs and reduce financial hardship.

Highlights of 2025-2026 cont

Improving Cancer Journey (ICJ)

Referrals increased steadily throughout the year, with the most significant growth occurring in the final three quarters. The service supported 380 individual cases during the year.
This growth reflects the ongoing promotional work undertaken by the ICJs, who engaged with teams across primary and secondary care, as well as statutory and third sector organisations.
Integration with the CLW service strengthened joint working between ICJs and CLWs, including the delivery of joint training sessions.

The most common concerns raised by patients continued to be money and finances, fatigue, and uncertainty. Financial concerns remained particularly significant, with almost one in two patients being referred to a welfare rights service. Maintaining a strong partnership with the Macmillan team at the Advice Shop has therefore remained a key priority.

During the year, patients referred by the ICJ service to the Advice Shop team secured a total of £500,967 in financial gains (from successful benefit applications). This additional support helped patients feel more financially secure and alleviated some of the stress and uncertainty associated with treatment and recovery.

University of Edinburgh 1st Year Medical Students

This year marked the fifth anniversary of working with first year medical students from the University of Edinburgh to introduce them to link working and social prescribing. This year's cohort consisted of 241 students.

In a change from previous years, the service created a feedback form which the students accessed via a QR code directly after the session to help demonstrate the value of it. Just over one hundred students completed the form, with 97% reported their understanding of the social model of health improved following the session, while 98% said their understanding of social prescribing and its impact on patient health had improved.

Highlights of 2025-2026 cont

Scottish Chamber Orchestra

Following a successful pilot with Glasgow Community Link Workers, the Scottish Chamber Orchestra (SCO) approached the service in autumn 2025 to offer *Concerts on Prescription* as part of the 2025/26 concert season.

The initiative began with a familiarisation concert, enabling CLWs to experience the programme first-hand before recommending it to patients. The opportunity was extended to patients resulting in 23 attendees enjoying a performance of *The Nutcracker* at the Usher Hall in early December.

Since then, a further seventy-nine concert tickets have been taken up by patients. Building on the success of the programme in Glasgow and Edinburgh, the SCO has now expanded *Concerts on Prescription* to CLWs in Perth and Kinross and hopes to continue the programme during the 2026/27 concert season.

Feedback from participants has been very positive, with patients describing the experience as enjoyable, uplifting, and beneficial to their wellbeing. Some participants shared the following comments:

Patient A

"After months of anxiety and treatment, it was lovely to look forward to an evening out. It was good to be out among the public again and those interested in classical music. The concert was lovely and it was good to 'get dressed up'. I came out relaxed and in fact slept much better that night. I am truly grateful."

Patient B

"After a few stressful months of surgery and recovery, it was good to be able to chill, to relax and have nice thoughts while listening to the orchestra. I certainly slept better after it – I must really have unwound."

Patient C

"It takes much resolve to leave the warm of your home on a dark January evening but in every sense it was worth it. To attend a wonderful concert and to have succeeded in being out in an evening was a success on so many fronts."

Highlights of 2025-2026 cont

Primary Care CLW Survey

During the second half of the year, the service carried out its first survey of GP practices since Community Link Workers were introduced in 2017.

The survey was distributed to all practices that have allocated CLW resource via Practice Managers who were invited to share it with any member of the practice team who works with their CLW. Participation was voluntary and responses were anonymous.

The survey explored three key themes:

- the benefits that Community Link Workers bring to practices
- integration into the practice team
- suggestions for future service improvement and development

A total of 164 responses were received.

Feedback was overwhelmingly positive, with respondents agreeing or strongly agreeing that CLWs are an essential support for patients, strengthen links between the practice and local communities, and has increased staff awareness of community organisations and services.

Respondents consistently described CLWs as an invaluable part of the multidisciplinary team highlighting their expertise in helping patients with complex non-medical needs and connecting them with appropriate community resources.

Key messages included:

- recognising the service has produced stronger relationships between primary care and the third sector, alongside recognition of the importance of sustainable funding for community organisations.
- strong support for increasing CLW capacity and securing long-term funding for the role; and
- opportunities to improve referral processes, strengthen communication between practices and CLWs, and continue promoting available community services.

Overall, the findings demonstrate that the CLW service provides a vital role in bridging the gap between third sector and primary care, supporting both patients and practice teams while providing robust evidence to inform future commissioning decisions.

Looking Forward

Quality Improvement Project(s)

Edinburgh Health & Social Care Partnership strongly encourage the use of Quality Improvement (QI) methodology (*"a systematic approach that uses specific techniques to improve quality" NES, 2021*) throughout its services and functions.
The CLW service's management team has attended QI training and are currently progressing a QI project looking at disengagement in a small number of practices across the city.
This project will be the first of many and there are some examples of early use of QI tools in this year's annual review.

Single System Reporting

As mentioned in the Highlights section, the CLW service looks forward to all 44 practices with a CLW being fully integrated with Elemental allowing the service to have a single system that all users can utilise in the same way.

Commissioning

The Third Sector Organisations that employ Edinburgh's CLWs were transferred to City of Edinburgh Council contracts for the financial year 2025/26.
During this time, a further extension to these contracts, allowing adequate time to set up and see through a commissioning process, was agreed for 2026/27. Details for this process are currently being developed and will be shared later this year.

National Institute for Health and Care Research

Work continues on this important piece of research with Edinburgh and Glasgow CLW services providing the two Scottish sites for the study – a further five sites in England are taking part. The first reports will be published in summer 2026.

Scottish Government's National Advisory Group for Community Link working

This group's work looking at Community Link working across Scotland is due to conclude over the coming months.
A CLW training resources will be available on TURAS (an NHS learning platform that CLWs can access) by late autumn, an outcomes and evaluation resource will be published after the summer, and a financial assessment has been put before MSPs during the summer.

Patient Quotes

Just wanted you to know how much you helped me yesterday. I don't even think I realised it at the time, it wasn't until I was trying to get to sleep last night (which is always the hardest time) that reflecting on things we had discussed really hit me. For the first time in two months I slept most of the night. That is completely thanks to you.

You made me take a look from a different angle and that has tremendously helped me.

Thank you so much for firstly taking the time to speak with me and for secondly helping me start to put my life back in together. I cannot thank you enough

'the service has been amazing. I don't know what I would have done without you. I saw my therapist 4 times but you personally have given me help. Your kindness and you are so on the ball with everything. I haven't had that much support from anybody!

'I think the things that have been offered have been very good. Sometimes my frame of mind is that I don't want to do it, but I'm glad you pushed me into the men's group. I got to met new people and its given me confidence.'

'the service I have received has been excellent. There are lots of differences between before and now. In terms of, I look forward to when we all get together and enjoy being with the groups. Before I had nothing. I was like a loner, miserable, sad and when you are by yourself you just watch TV. It's nice to feel some nice feelings.'

Working together for a **caring, healthier, safer** Edinburgh

www.edinburghhsc.scot

Photo credits:
Pilton Community Health Project
CLW Service