

Local Community Coordination (LCC) Bridgend Council:

Case synopsis 1:

M has struggled with chronic anxiety, agoraphobia and depression for 17 years. M's mental health deteriorated to the point her husband had to give up work to care for her. She would experience severe panic attacks and struggled with paranoia that people were watching and judging her. She would feel distressed, even in her own home, and would cry most days, especially following the death of her mother who was her best friend and biggest support. M had also suffered breast cancer, but was now facing new pressures to find work from the local job centre. M was then referred to the Local Community Coordinator who had recently started in post in her area. The Coordinator is also a registered and trained social worker with mental health and learning disability experience.

M has progressed from not leaving her house at all, to present day volunteering to run a befriending group every Monday, helping others. Approximately 15 people now attend the befriending group and the group is growing all the time. In addition, M's husband is now able to work part time and M regularly informally cares for A (older lady), another recipient of LCC services.

M has made new friendships with other women attending the group, who also experience severe anxiety and agoraphobia. Her life is busy and at one stage she was attending the craft group (helped set up by the LCC), a local sewing group, Tai Chi and other activities. Now she has reduced all the other things to concentrate on developing a local Befriending group. The group is a fantastic resource for the LCC and a great success. It has been nominated for a BAVO award by a local counsellor. I am very inspired by these ladies and admire M for the determination she has shown. M continues to keep contact with the LCC and when she needs some support, I am available to help reassure her. She now needs just low level, in the background, small 'pick me ups' to continue to be a huge resource to her community. M is a natural community connector and she is fantastic with vulnerable people. She has completed training through BAVO and is a trained volunteer. She goes from strength to strength.

Case synopsis 2

As a Local Community Coordinator I support people in my local community who are natural assets and connectors for others also. I met B as she is a regular visitor to the gym at the Halo life centre and a force of nature." I instantly recognised B was a natural community connector as she liked to help people and was happiest when she was busy. She has a bubbly personality and caring nature and at 77 years old she loves to keep active". At the time of first speaking to B she volunteered in a local charity shop but this wasn't enough for her. She was frustrated that residents in the sheltered accommodation where she lived, didn't share her outlook and interests. I noticed that she enjoyed popping into the Life Centre next door where she enjoyed being around younger people and helping out with small tasks. I spoke to B to explore her interests and what makes her happy. In partnership with Halo colleagues I have helped B become more involved in activities she enjoyed. B has enjoyed participating in the "My Sporting Days" project with Awen and since has become a formal volunteer with Halo .B is very proud of wearing her uniform and being part of the team. B volunteers at the fortnightly "Olympage" sessions and is a great help to attendees. We also helped B start up her very own Film Club which she runs from the Life Centre. Here she helps a group of old ladies choose films and she

bakes and serves tea and coffee with fine china. B is now an established and cherished member of the Halo family and is thriving in her new role.

Case synopsis 3

Mrs X is a 77 year old lady who lives alone. She has a diagnosis of degenerative physical disability which significantly affected her speech and mobility. She said this made her feel depressed and frustrated and that she was losing her confidence and really missed socialising and spending time with people in her community.

Over the last 2 years Mrs X's confidence and social circle have significantly grown. Mrs X now has a very active social life and routinely attends most of the day time groups running in her area (Olympage, Cwrt Gwalia Café, Memm Coffee Group, Housebound, Film Club) with support from Community Transport. Mrs X now has a wide circle of friends who she stays in contact with outside of the community groups. Some are new friendships she's established, others are people she lived next to growing up or from school who she had lost contact with.

She is an asset to the LCC role as she is a natural social connector and will go out of her way to make sure everyone is made welcome in each group, especially new group members. I have recently helped her to establish up a fortnightly coffee morning in a local community building. Mrs X and health clinicians have observed a noticeable increase in her strength and mobility as she is now more active.

There have been significant reductions in her care package due to her social activities:

- Initially 4 calls a day for personal care and meal preparation –and two day centre days – Mrs X has dropped the Friday day centre and only attends Monday day centre twice a month due to Olympage. She is in the process of discussions with her social worker to cancel this completely. She has cancelled 2 lunch time calls due to having lunch in the community groups. She's also considering cancelling the daily 15mins as she feels she no longer needs them.

Case synopsis 4

K is a complex character with a long history of being supported throughout her traumatic life. She was taken into care as an infant due to physical abuse. LCC has built a relationship with K over the past two years. K has also been a heavy drinker and drug user with depression and suicidal thoughts. LCC has been able to support her to build resilience and manage her alcohol intake (e.g. when there were issues or delays with her benefits, LCC were able to provide foodbank vouchers to give her access to food).

LCC supported K to complete a mandatory appeal relating to benefits and attended her appeal, as an advocate, which she won. K was identified as someone who would benefit from social interaction in a controlled environment and so was introduced to the Butterfly Garden arts group during its early stages. The arts group has been a huge stepping stone for K. From being initially shy and very quiet in the group and giving little more than one word answers, she has now flourished and become one of the natural group leaders. Having gained in confidence, she is vocal and helps with the decision-making process of the group. She has been particularly supportive of one member of the group who is going through a difficult time and they have built up a firm friendship. After several months of attending the arts group and LCC working alongside her, she stopped drinking and reduced her smoking, she gained confidence and even joined a small choir linked to the arts group through Valley and Vale arts. Through LCC intervention she has built up her resilience. LCC linked her into CAB to look at her budget once her benefits had been reinstated. From this signposting K now attends

church regularly and has developed a new circle of friends. K is now much happier and in demand as she now volunteers at a charity shop and at the foodbank that once supported her.