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ReConnect

ReConnect is a multi agency service based within the Scottish Borders. It is an umbrella organisation of partner agencies which works with women who have multiple and complex needs; reintegrating them into their communities and reducing their risk of victimisation and offending. This service offers two rolling group work programmes (Connections and Survive and Thrive) and accessible services for women.

The Service Aims:

- To reduce offending behaviour
- To improve health, wellbeing and safety
- To improve access to services



So how did we get there?

- Criminal Justice and Addaction trialled an eight week programme. Local services were invited to become involved by offering an input to the afternoon sessions.
- This was a closed group initially and we would begin a programme of 8 weeks which later developed into 12 weeks.
- The group utilised resources and guidance from the Willow project in Edinburgh.
- However we were only running a group sporadically when there were adequate numbers. This caused difficulty as women could not always access the service when they most needed support

Moving forward we now have a 12 week continually rolling Connections programme which women can access at 6 entry points (every 2nd week). The pool of partners has increased and we are now able to offer support for a wider range of issues. We have also just began trailing a rolling 10 week programme of Survive and Thrive for women who have experienced trauma or abuse.

The Vision and Commitments

Scottish Government's Strategic Objectives:

- Healthier
- Wealthier and Fairer
- Safer and Stronger



The Outcomes

- We live our lives safe from **crime**, disorder and danger
- We realise our full economic potential with more and better employment opportunities for our people
- We have strong, resilient and supportive **communities** where people take responsibility for their actions and how they affect others
- Our **young people** are successful learners, confident individuals, effective contributors and responsible citizens
- Our **children** have the best start in life and are ready to succeed
- We take pride in a strong, fair and inclusive **national identity**
- We live longer, healthier lives
- We have tacked the significant **inequalities** in Scottish society
- We have improved the life chances of children, young people and families at risk

Joint Planning

- Multi agency response to the Commission on Women Offenders report 2012 (Angiolini) – recognition that this is a shared population whose needs are best met through a partnership approach
- **Strategic agreement** within the Scottish Borders to work in partnership with other agencies and stakeholders to ensure that our communities are cohesive and there are fewer people living in poverty and the health inequality gap is reduced.
- **Steering group** established with membership from:
 - Alcohol and Drug Partnership
 - Violence Against Women Partnership
 - Community Justice Authority



Joint Planning ...

- Women's service developed, evolving into **ReConnect**
- Working partnerships developed **locally**, agencies sharing skills and resources. Working within the ReConnect hub to increase accessibility and uptake of services.
- **Reflection** on practice
- **Responsive** to identified need.



Current Situation

Staff involved: 2 x Criminal Justice Staff, 1 x Addaction staff, 1 x Rape Crisis Staff, 1 x volunteer, supported by the Willow Project in Edinbrugh

Partners: NHS Borders LASS and Healthy Living Network Services, SBC Welfare Benefits Service, Borders Addiction Service, Shine Mentor, Domestic Abuse Advocacy Service, Scottish Borders Rape Crisis and SBC Adult Learning

Partnership Structure: Joint meetings with all partners are scheduled three times a year. The purpose is to share resources and plan for better outcomes for women in the Scottish Borders who have multiple and complex needs.



Core Values and Principles

Criminal Justice

- Sustained or improved physical and mental wellbeing
- The ability to access and sustain suitable accommodation
- Reduced/stabalised substance misuse
- Improved literacy skills
- Employability prospects increased
- Maintained or improved relationships
- The ability to access community support
- Improvements in attitude and behaviour.

HLN/LASS

- <u>HLN</u>
- Empowerment
- Reduction in health inequalities
- Strengthening community capacity for health improvement
- <u>LASS</u>
- Health Behaviour Change
- Motivational Interviewing
- Personal Support Systems
- Goal Setting

Why focus on Health Improvement

As already mentioned....

Scottish Government National Health and Well Being Outcomes – reduce health inequalities and improve health outcomes.

We know female offenders are particularly vulnerable to poorer health outcomes because of lifestyle choices and circumstances

Commission on Female Offenders (2012)

Female offender population has doubled within the last 10 years, many are frequent reoffenders. In 2010/11 18,500 women were convicted of a criminal offence in Scotland. In Scottish Borders xxx women were convicted of a criminal offence.

Many women offenders have significantly greater underlying health issues than women in the general population¹⁶. Higher rates of poor mental and incidences of abuse, drug use and unemployment.

Health Profile Scottish Borders

Scottish Borders is a rural area with a population of almost 113,000 people, many of whom live in small villages.

Because of the geographical nature of Scottish Borders, people's vulnerabilities are often hidden. Services and support can be difficult to access

Scottish Borders is significantly worse than the national average for:

- rates of people living in fuel poverty
- patients being prescribed drugs for anxiety/depression/psychosis
- dependence on out of work benefits of child tax credits
- number of people living in 15% most 'access deprived' places

10% of Scottish Borders population were classed as income deprived in 2011 and nearly 13% of children were classed as living in poverty

Engagement with women from NHS

The national Keep Well health checks programme was the initial driver followed by Healthy Living Network engagement to provide longer term support in local community settings.

Women had the opportunity to engage and plan with staff

Regular LASS drop-ins on a Tuesday offering Keep Well checks and the LASS service

HLN consultation identified a need to develop confidence and knicook healthy, cost effective meals.

Pilot health lunch sessions delivered by HLN at a community café. HIIC activities also delivered during these sessions. Informative for both staff and participants



Cooking in Partnership

Community Food & Health Scotland Application to support development of regular cooking skills session

- Partnership work with third sector to employ sessional food worker (JHIT funding) based within HLN team, employed by the Bridge and operational within Reconnect
- Training Food Hygiene, REHIS, cooking skills to enable women/staff to develop cooking skills as part of services offered and increase knowledge, skills, confidence at home
- Joint evaluation to demonstrate the difference and integration to localised community groups and opportunities



Future Direction

- Embed ReConnect into mainstream service delivery
- Increase referrals from a range of partner agencies
- Provide an ongoing safe and secure 'hub' where women can come and develop skills, seek support and guidance and grow as individuals
- Learn from this model and adapt and develop services to better meet the needs of service users



Any Questions?



Community Learning and Development

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Workshop Activity

Planning for setting up a partnership:

- What would be five key steps to building an effective partnership?
- What would be five key steps to maintaining an effective partnership?
- What skills do you think an effective group member needs to have?
- How would you expect to benefit from a partnership?

Reflection on existing partnerships

- How much participation do you have (or want) in the partnership? Are there barriers preventing increased participation?
- Do all partners have the same level of influence in the partnership? is this appropriate?
- How good is communication? is communication two way and appropriate to need? Are project aims, procedures etc, clear?
- Does the partnership develop capacity? Has it resulted in joint work? Has it prioritised work? Has it developed knowledge, understanding, skills etc?
- How inclusive is this partnership? is the diversity of interests recognised?