

Community Led Approaches – how they support prevention

This resource forms part of a series by Healthcare Improvement Scotland on community-led approaches.

Community-led approaches are an approach to the design and coordination of the way services operate. They emphasise relational care and support centred on outcomes – finding out what really matters to people and bringing in the care and support from across the system. Community-led approaches better meet people's needs in the community, and by doing so reduce the need for more downstream services. For more information on this series or community-led approaches please contact his.transformationalsystemchange@nhs.scot.

This resource articulates how community-led approaches support prevention. The Health and Social Care Service Renewal Framework talks about prevention with reference to secondary and tertiary prevention (with primary prevention being covered by the Population Health Framework). It describes prevention activities as early intervention and anticipation of declining health to maintain good health. There is a lot of good prevention work taking place across the health and social care system. However, they are often service or condition centred, resulting in disjointed activities.

Community-led approaches look at prevention from the point of view of understanding what individuals need to keep them well, bringing services together in new ways to tailor support to people, and ensuring quick access to proportional services. Community-led approaches offer a practical way to start building a system that spans health, social care, local authority and third sector – preventing health deterioration and maintaining wellbeing, as two sides of the same coin.

Supporting prevention	Maintaining wellbeing
Services prevent disease, enable early detection and effectively manage chronic and long-term conditions	Services are accessible and respond quickly to people's needs. So that they can get care and support when they feel their health is starting to get worse.
Care is designed around people rather than the 'system' or 'services'	Care and support are delivered collaboratively based on where the person is at, with different services playing different roles at different times.
Delivery of health and social care is people-led and 'Value Based'	People are involved in decisions about their care, offered a range of options of care and support. Having more support available in the community results in less reliance on higher cost specialist services.

The Health and Social Care Service Renewal Framework sets out a principle of prevention that we should work towards when thinking about transformation.

Prevention Principle - "Health and care is focused on prevention and proactive early intervention to realise long term wellbeing and reduce the burden of disease. All parts of the community and health and social care system will work together to maintain better population health and reduce inequalities and stigma."

Health and Social Care Service Renewal Framework

The Health and Social Care Service Renewal Framework describes what is required within system that is centred around prevention.

1 Services prevent disease, enable early detection and effectively manage chronic and long-term conditions –

There is a focus on helping people stay well, detecting problems early and supporting those living with long-term conditions.

2 Care is designed around people rather than the 'system' or 'services' – People are placed at the centre of decision making, designing support to better meet individual needs resulting in greater effectiveness and efficiency in achieving outcomes for people.

3 Delivery of health and social care is people-led and 'Value Based' – Care and support addresses health outcomes that matter to people while making the best use of available resources. It focuses on improving quality, equity, and patient experience by aligning care delivery with outcomes rather than activity or volume.

Community-led approaches supports a number of things which can contribute to a system that is centred around prevention:

- accessible services
- getting to know what keeps people well
- flexible support
- learning from doing

4 Accessible services - Community-led approaches emphasise accessibility of services. This means ensuring that services are in easy to reach, welcoming spaces. It also means thinking about eligibility criteria of services, with most support normally being open to everyone.

- Having a drop-in approach removes a lot of the barriers to people engaging with services, meaning that they are more likely to seek help when preventative support will be effective.
- This approach to accessibility also means that services can be more responsive to the needs of people with long-term conditions. People with long-term conditions have fluctuating and changing needs which require different types of support. They might not be able to wait until their next specialist appointment. These approaches will help meet their needs quicker and closer to home.
- Having screening and testing in these settings removes the need for waiting for GPs, then waiting on a secondary care appointment with the potential for being re-referred elsewhere. This shortens the time it takes to get the right support.

5 Getting to know what keeps people well - Community-led approaches seek to understand people and what keeps them well before exploring how different services might be brought in to help. In this way care and support are designed around people, rather than services.

- Through [good conversations](#), we can identify what a person needs to keep well, along with what might be driving their ill health. Therefore, along with health or care early interventions, we can also provide extra services. These include housing or money advice. This way, people can have the right environment to stay healthy.
- Understanding what keeps people well provides value in being able to identify where third sector service can work alongside clinical services to improve health outcomes. For example, volunteer led exercise and cooking classes can help in reducing the need for specialist cardiology input.
- Understanding people's motivations and personal goals and focussing on these rather than diagnostic criteria, supports more sustainable health behaviours.

6 Flexible support – A common challenge in our health and social care system, is that services tend to be either ‘on’ or ‘off’. In other words, people either have a service or they do not. The ability to dip in and out of services as needs fluctuate is often limited. Community-led approaches have more flexibility to respond, ‘as required’. This is due to a greater understanding of the whole person needs, not only their presenting care need. In addition, being collaborative and not embedded in traditional pathways also helps community-led approaches be more responsive and flexible.

- flexible support is key in managing long-term conditions as people’s health can fluctuate rapidly
- through collaboration, services can intervene early when staff supporting someone notice changes in health or behaviour, they can link in with an appropriate service to understand what the issue might be
- it is also the case that in the context of people’s lives, things happen which might require a temporary increase in support, such as a bereavement. Ensuring that these needs are met requires flexibility.

7 Learning from doing - The practice of being community-led is a process of constant learning about what people need and about what works – at a practice level but also at a system level. Senior leadership can work with operational teams to understand what is needed to keep people well. They identify system barriers, such as siloed decision-making and staff skills. Then, they take the necessary steps to remove or reduce these barriers. Community-led approaches therefore generate knowledge and insights about how best to:

- support a move away from acute focussed care
- look at opportunities for changes in leadership and funding structures
- evidence the financial impact of community prevention on wider health budgets