

ANNUAL REPORT

April 2024 - March 2025



Pathways CIC

Message from our Managing Director



At Pathways CIC, our mission is to reduce inequalities and ensure that everyone, regardless of circumstance, has the opportunity to thrive. This year has been one of significant progress, innovation and collective impact. Our teams have responded to increasing levels of need with dedication and compassion, continuing to deliver sustainable, person-centred solutions across all our programmes.

This annual report highlights the achievements of our staff, the trust of our partners and the resilience of the communities we serve. It also demonstrates the powerful effects of early intervention, which result in improved wellbeing, clients confirming they feel there has been an increase in their confidence and demonstrable evidence of people with health conditions remaining in or returning to good work.

Key examples include:

- Our Be Well In Work service responded to rising physical and mental health needs, achieving an 83% return-to-work rate and 81% reporting improved wellbeing. With our musculoskeletal pathway remained essential, with 100% of clients experiencing 15%–60% improvements in pain, mobility and daily functioning.
- We launched a national workplace social prescribing service with Mid Cheshire Hospitals NHS Foundation Trust, where over 90% of NHS staff reported improved health and wellbeing.
- Through our Personalised Care Training Academy, we strengthened the national workforce by delivering accredited training for Health Coaches, Care Coordinators and Work & Health Coaches across England.
- Our Working Well programmes supported people with health conditions through 654 Work & Health interventions, 848 health appointments and 199 wellbeing workshops, helping people move closer to employment.
- Our Pathways 50+ and One You Cheshire services tackled inequalities and strengthened prevention by supporting confidence, community connection and healthier lifestyles at a neighbourhood level.

Together, we are reducing inequalities, strengthening communities and creating meaningful, lasting change. I am immensely proud of all we have achieved this year and remain optimistic about the impact we will continue to make.

About us



Who We are

Pathways CIC is a forward thinking, innovative Social Enterprise established in 2006 and operates across England



Our Vision

Our vision is to recognise challenges and find local solutions to promote positive health, positive lifestyles, positive employment and positive families for the communities we serve



Our Mission

Our mission is to provide effective holistic and personalised bio-psycho-social services for individuals, and to promote community engagement that drives development, reduces inequalities and drives social change towards a brighter future for all.



What we do

We deliver a range of pioneering health, work and wellbeing programmes and training, designed to create sustainable change for individuals and for local communities, with a focus on enabling people to live happier and healthier lives.

How we do it

Through the services we offer, we are able to support people and their communities to address the real pressing matters of inequality, and support them to improve their health, wellbeing and/or achieve their goals, empowering them to improve the quality of life in ways which are important to them



Be Well Manchester

Providing bespoke in-work support and health services for those that are in work but who are currently on sick leave and are in need of help to return to work.

Alternative Solutions

Cheshire based social prescribing programme supporting individuals with a wide range of social, emotional or practical needs to take greater control of their own health and wellbeing.

Personalised Care Training Academy

Provides a range of PCI accredited training programmes that support health and care professionals to deliver effective, person-centred conversations to make personalised care happen and to positively influence the lives of everyone in the healthcare system.

Working Well Work & Health

Offering personalised support and advice for individuals with a health condition who need help to stay in or return to work across Greater Manchester

Pathways 50+

Providing wellbeing support to people aged 50 years plus who are unemployed and living in North Manchester.

Mid Cheshire Hospital's Social Prescribing Service

A social prescribing service supporting Mid Cheshire Hospitals staff to improve wellbeing through personalised, non-clinical support

ONE YOU CHESHIRE EAST

www.oneyoucheshireeast.org

 everybody
HEALTH & LEISURE

 Cheshire East
Council

One You Cheshire East

A lifestyle service supporting Cheshire East residents to manage their weight, be more active, stop smoking and improve balance and mobility.

WORKING WELL

**DOING THINGS DIFFERENTLY
FOR GREATER MANCHESTER**

Support to succeed

A personalised, health first programme supporting economically inactive residents in Manchester to improve wellbeing and progress towards employment



Be Well Manchester



About Be Well

Pathways CIC is a partner in delivering the Be Well Programme.

Be Well Manchester offers support to clients who are employed and off work sick or at risk of going off work sick, to help them to return to or stay in work much quicker by providing holistic early intervention.

The employed element of the service which Pathways CIC delivers is telephone-based, with each client upon referral from a GP or health professional are assigned a link worker, who will work with the client to understand their current circumstances, challenges with work, health and wellbeing, condition management and its effect on their employment, and/or lifestyle amongst other factors. We have specialists on hand, working collaboratively to provide support for musculoskeletal and/or mental health Coaching / Counselling coupled with Human Resources Advice.

During 2024/25, the service supported increasing levels of physical health need, receiving **368** referrals. Of these, 70% were triaged immediately, while 30% were identified through assessment and supported through multi-disciplinary input. We also made **236 MSK referrals**, with 168 clients progressing to treatment with our Physiotherapist/Chiropractor.

This year we received



3018 Referrals

Since the programme began in 2018



we have received in total
17,843 Referrals

Outcomes



Key to our success on programme is the commitment of our Be Well in work support team being able to achieve the necessary performance outcomes. Our team have excelled again this year in relation to our contractual performance outcomes.

- 83% of in work service users returned to work following support.
- 81% of clients reported improved physical and mental wellbeing by service exit

- 80% reported improved outcomes in the social factors affecting their health (e.g., housing, finances, employment, daily living, confidence and connection)

- All clients who engaged with MSK treatment recorded 15%–60% improvement in pain, mobility and day-to-day function



Note from Service Lead - Jenna Goodall

2024/2025 was a year that brought some exciting changes, fostering personal and professional growth, improving efficiency and quality, and opening up new opportunities. We transitioned onto a new system in Autumn 2024, the team approached this proactively and positively, but it did bring some challenges, working to closing deadlines and limiting access to our regular reporting.

We took on two new opportunities to enhance our current model through a programme called Work Well, designed to help local residents of Greater Manchester who are struggling to stay in work due to health-related challenges. Work Well was built into our current Be Well model, some slight changes to what we report into the system, but the implementation and creation of a Thrive in Work Plan that outlines tailored support strategies for our clients to help them stay in, return to, or enter employment, particularly when facing health-related challenges. Through Work Well came our second opportunity, working in partnership with Alchemy Arts, for Racially Minoritised Groups offering support to clients who are employed and off work sick, at risk of going off work sick. The quality of our thrive in work plans and case studies have been well received, with feedback from our stakeholders; ***“We have read them and found them to be a great summary of the holistic support that is being offered in a tailored way to participants. The MDT approach is very strong and highlighting that in future case studies will demonstrate how team collaborations can impact an individual. I would say, just keep them coming!”***

The last 12 month provided me with more insight into the dedication and support that has been given to our clients. Brilliant feedback and testimonials have highlighted the wonderful work that has been provided, such as ***“I found the service extremely helpful in guiding me to where I could get the support I needed at the time. This support included physical intervention in respect of physiotherapy treatment and support in respect of my emotional well-being. I was not aware of a number of resources that I was put in contact with, for which I am extremely grateful as financial resources are limited for me and my family, so knowing where we can access this support in the future is really helpful not just for me personally, but for our family as well”.***

“My overall experience with the service was really positive and helpful. The mental health counsellor was attentive, understanding, and provided me with valuable support. I felt comfortable opening up about my feelings and struggles, and the counsellor offered practical strategies to cope with difficult emotions. The sessions helped me gain clarity, perspective, and a sense of relief. I truly appreciate the guidance and assistance I received, and I feel more equipped to navigate challenges moving forward. I found the support in managing stress, coping with anxiety, and improving communication skills to be particularly useful. The counsellor provided effective techniques for relaxation, helped me identify triggers for my anxiety, and offered guidance on expressing my emotions more effectively. These areas of support were instrumental in helping me develop healthier coping mechanisms and communication strategies. I would recommend the service to others because of the great care and personalised support I received. The team's empathy and professionalism make it a valuable resource for anyone looking for help with their mental well-being”.

This feedback goes a long way, so I want to personally thank all of the In Work Support team, who have contributed to the success of the service. Each year we continue to enhance the service, be innovative in our thinking and excel in our delivery and every member of the team play an integral part in it's journey.

As Service lead, I am looking forward to taking the programme forward into its 8th year, with the extension of a 3 year contract; I am excited to see what new opportunities in can bring beyond 2025.

Alternative Solutions



Alternative Solutions

Within Alternative Solutions we work extremely closely with the Practices that we have Social Prescribers based within, in line with the NHS Long Term Plan. We support the Primary Care Networks to meet their wider agenda around Social Prescribing and their obligations towards patient care.

Each Social Prescriber provides a personalised care plan focused on what matters to the individual. We provide both face to face and telephone interventions.

Throughout 2024/25, we have worked closely with Primary Care Networks and a wide range of voluntary, community and faith sector organisations to ensure patients receive timely, personalised, non-medical support. As a key connector within the community, we continue to strengthen links with grassroots organisations and have actively contributed to Cheshire East Care Communities, as well as JSNA steering groups, including Loneliness & Isolation, Mental Health, Eat Well, Move More and Women's Services.

Over the course of the year we have had three Social Prescribers across the GHR PCN (Grosvenor, Hungerford and Rope Green), collectively which serves around **45,000 patients**, and one Social Prescriber at Tudor Surgery within the Nantwich & Rural PCN, which also supports a further **36,492 patients**.

This year, our team has taken an active role in local community events to raise awareness of the service and connect with potential clients. Michelle joined colleagues from Tudor Surgery for the St Luke's Hospice Midnight Walk, completing 11 miles and helping raise £300 for the charity.



We also represented the service at the Crewe Care Hub Roadshow, and visited Nantwich Community Gardens to strengthen links with local partners. These activities reflect our ongoing commitment to being a visible, approachable and supportive presence within the communities we serve.



Personalised care plans

This year, Alternative Solutions has continued to make a significant impact across the GHR and Nantwich & Rural Primary Care Networks through the delivery of high-quality Personalised Care Plans (PCPs). Working closely with each Practice, our Social Prescribers have supported patients to explore what matters to them and to access the right local support at the right time

Hungerford: 229 referrals | 205 PCPs

Rope Green: 488 referrals | 389 PCPs

Grosvenor: 588 referrals | 417 PCPs

Across GHR PCN, the Alternative Solutions service achieved a strong 74% conversion rate from referral to completion of a Personalised Care Plan.

Whereas our Social Prescriber in Tudor Surgery achieved a strong 71% conversion rate from referral to Personalised Care Plan during 2024/25. Across the year, the Social Prescriber handled 370 referrals, completing 264 plans.

They also delivered important proactive work, including **15 Cancer Care Plans, 56 Nursing Home Care Plans, and 11 Mental Health Plans**, ensuring additional personalised support for patients with more complex needs. **As a result, Tudor Surgery exceeded NHSE expectations for the year.**

As part of our continued commitment to early intervention and prevention, Proactive Social Prescribing was introduced at Grosvenor Surgery for patients identified as having a BMI over 24 and showing early indicators of diabetes and/or hypertension. This data-driven approach enabled Social Prescribers to reach patients at an earlier stage, reducing risk and supporting long-term health improvements.

A total of 94 patients received a personalised care plan with tailored lifestyle guidance, support to access local health and wellbeing services, and ongoing encouragement to build sustainable habits. Many of these patients benefitted from early identification of health risks, preventing escalation and enhancing their confidence in managing their own wellbeing.

Health Impact



To evaluate patients' health-related quality of life, and facilitate personalised care, the social prescribing link workers ask at initial assessment and at discharge from the service 4 questions, to ensure patient's needs have been met, improve outcomes for patients, and demonstrate the distance patients have travelled.

Below are the aggregated overall scores for the social prescribing service, showing that social prescribing is supporting patients to improve their life satisfaction, their happiness and feeling worthwhile whilst lowering anxiety.

ONS Assessment element	Average score on entry	Average Score on Discharge	Change
Life Satisfaction	5.07	6.56	1.5
Worthwhile	5.37	6.62	1.25
Happiness	5.07	6.36	1.29
Anxiety (lower score indicates improved outcome)	6.89	5.07	1.82



“I feel really reassured that the service is there if and when I need it. It's so hard to see sometimes what your problems are and talking to someone you feel you can trust and have your best interests at heart has helped so much.

Alternative Solutions Client





Referrals

Throughout 2024/25, Alternative Solutions has continued to strengthen its links with voluntary, community, faith and social enterprise organisations across Cheshire. Our team has built and maintained an extensive directory of support options, enabling Social Prescribers to connect patients with high-quality local services quickly and confidently.

To ensure our recommendations are informed and meaningful, the team regularly attends community workshops, events and taster sessions. Gaining first-hand insight allows us to describe services clearly and reassure patients about what to expect. Many people tell us that small pieces of information, such as who to speak to when they arrive, help reduce anxiety and give them the confidence to engage fully with community support.

This year, Social Prescribers have signposted or referred patients to **104 different services**, delivered by **76 organisations** across Cheshire and beyond. We continue to work closely with a broad range of partners including:

- **Everybody Health**
- **Her Place**
- **Green Space for Wellbeing**
- **St Pauls Centre (Foodbank)**
- **Mental Health Reablement Team**
- **Age UK**
- **Chance Changing Lives (Social Supermarket)**
- **Life Line Debt Advice**
- **Citizens Advice**
- **Carers Hub**
- **Wishing Well**
- **Red Cross (Patient Transport)**
- **NHS Talking Therapies**

Wherever possible, we prioritise local community based options, recognising the value and accessibility they offer to patients.

“I didn't know this role existed but I'm so grateful it does. I felt able to open up without the pressure of a short GP appointment.”

Alternative Solutions Client

When other practice staff identify individuals with needs beyond the scope of clinical care, Social Prescribers use their time with patients to explore “What Matters” and uncover any unmet needs around safety, wellbeing or independence. This year, **16 patients** were referred to the Community Occupational Therapy Team, with all 16 referrals accepted. Each patient received an assessment and appropriate home equipment ranging from grab rails to hospital beds enabling them to remain safe, independent and supported in their own homes.

Household Support Fund

The Household Support Fund, provided by Cheshire East Council, offers crisis support to financially vulnerable households. Social Prescribers are trusted to complete referrals for patients struggling with essentials such as food, energy and daily living costs. By taking time to understand a patient's wider circumstances, Social Prescribers combine immediate financial support with links to low-cost food initiatives like The Bread and Butter Thing and Chance Changing Lives.

This year, **20 patients at Rope Green** and **60 at Grosvenor** were referred through the fund, with many also signposted to additional community services to ensure they receive both urgent help and longer-term, sustainable support

Top reasons for referral

The image below depicts the top reasons for referral this year



Personalised Care Training Academy



Personalised Care Training Academy

The Personalised Care Training Academy (PCTA) was formed in October 2021

The PCTA provides a range of Personalised Care Institute accredited training programmes that support health and care professionals and volunteers to deliver effective, person-centred conversations to make personalised care happen and to positively influence the lives of everyone in the healthcare system.

Our team aim to make our participants proficient in delivering personalised care to empower people to take greater ownership of their health and wellbeing, positively influencing their motivation, adherence and confidence to improve their health outcomes which improves efficiencies and lowers the cost of providing quality healthcare

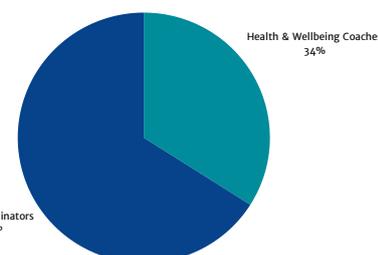
The 2024/25 financial year marked a period of growth and achievement for the PCTA. We exceeded our income targets and delivered our highest-grossing year to date, driven by an increase in learner numbers, programme optimisation, and continued excellence in training quality.

Growth and Reach

In 2024/25, the PCTA delivered training to 167 participants, an increase of 31 learners from the previous year. Cumulatively, we have now trained 469 individuals since programme inception.



This year we delivered our accredited training to 51 Health and Wellbeing Coaches and 99 Care Coordinators



All trained to PCI accredited standards, meeting NHS DES mandatory requirements.

Programme Development and Innovation

This year, we obtained authorisation to redesign our Comprehensive Care Coordinator programme, reducing it from a three-day to a two-day format. This update brings the programme fully in line with the NHS Workforce Development Framework, improves accessibility for Primary Care Networks and strengthens our position within an increasingly competitive training market.

The streamlined model also reduces delivery costs, supports sales growth and prevents the risk of declining uptake that may have resulted from a longer, more expensive course. These changes ensure the programme remains relevant, high-value and responsive to the workforce development needs of PCNs across the region.

Quality and Learner Experience

We continue to receive excellent feedback across all programmes, with participants rating the overall training **9/10** and the knowledge and expertise of facilitators **9.6/10**

Independent evaluations from the Personalised Care Institute further reinforce the strength of our delivery, with scores of 9.2/10 for meeting learning expectations, 9.4/10 for overall training provision and up to 9.6/10 for impact on day-to-day practice.

These results reflect our commitment to high-quality learning experiences, professional delivery, and training that translates effectively into real-world personalised care.

Stakeholder Engagement

This year, we strengthened our visibility and partnerships across the health and care system through a range of stakeholder engagement activities. A key highlight was exhibiting for two days at the NHS Confederation Expo in Manchester, where we showcased the benefits of Personalised Care training for the wider health workforce. The event provided an excellent opportunity to connect with health and care leaders, commissioners and providers from across the NHS, promoting the value of our programmes and building relationships that will support future growth and collaboration.



Courses we offer:

Our courses include

- 2 day Comprehensive Care Coordination
- 2-day Health Coaching Core Skills
- 1 day Introduction to Care Coordination
- 4 day Comprehensive Health Coaching.

Website

For all bookings and further information about our Personalised Care Training Academy, please visit our dedicated website at www.personalisedcaretrainingacademy.co.uk.

The site provides comprehensive details about our training programmes, resources, and upcoming events.



[Watch video on YouTube](#)

Error 153

Video player configuration error



Working Well Work and Health

WORKING WELL WORK AND HEALTH PROGRAMME



Working Well Work & Health Programme

Pathways CIC are partners to the delivery of the Working Well Work and Health programme, which offers free personalised support and advice for individuals with a health condition who need help to stay in or return to work.

This year our team have completed



654 Interventions

Outcomes



Over the past year, the health team has supported **39%** of programme participants move into employment, a strong achievement given the diverse needs and varying levels of readiness across the caseload.

In addition to employment-focused interventions, the team provided **72** in-work support appointments, helping participants understand workplace rights, access reasonable adjustments, and sustain employment in a healthy and manageable way.

Across the year, the team delivered **212** workshops, offering a diverse programme covering mental and physical health themes. Sessions included:

- Coping With Pain
- Chronic Pain
- Anxiety & Depression Management
- Stress Management
- Self-Care
- Confidence Building
- Eat Healthy on a Budget
- Men's & Women's Health Awareness
- Better Sleep Guide
- Active Living
- Walking Groups
- Introduction to the Health Team (F2F & virtual)



Team Growth & Service Development

The addition of Lucy Devlin (Mental Health Practitioner) and Colleen (Physical Health Specialist) strengthened the team's capacity and broadened the range of support available. Colleen introduced bespoke 1:1 nutrition support, while Lucy brought expertise in bereavement and grief, enabling the service to respond more sensitively to participants experiencing loss.

These developments improved on-site presence across Salford and Trafford and increased access to specialist workshops and interventions. The expansion of the walking groups into Trafford was another significant step in re-building community activity and engagement.

Feedback

Feedback throughout the year highlighted the effectiveness of the team's compassionate, person-centred approach. Participants frequently reported increased confidence, improved health knowledge and a greater sense of control in managing their wellbeing.



In May, during National Walking Month, the team established a new community walking group to encourage physical activity, connection and consistency in participants' wellbeing routines. The group has provided a relaxed, accessible space for participants to improve their physical health while also benefiting from social interaction and peer support.

One regular client has seen such a positive improvement in both their health and wellbeing through attending the walks that they have now signed up to complete a Couch to 5K, demonstrating the real, lasting behaviour change that simple, accessible activity can inspire.

Support to Succeed



Support to Succeed

In 2024/25, our health team continued delivering physical and mental health interventions as part of the Working Well Support to Succeed (STS) programme. Building on year one, we expanded our workshop offer, strengthened delivery, and worked closely with partners.

Across the year, the team completed **848** health appointments, providing focused mental and physical health support.

Workshops

The health team delivered **199** workshops, covering topics such as anxiety, depression, stress, nutrition, physical activity, menopause, sleep and relaxation techniques. The quality of delivery remained consistently high, with 100% of participants rating sessions between 8 and 10 out of 10.



Participants showed strong increases in confidence and practical skills, scoring an average of 9/10 for developing new tools to better manage their health. A bespoke workshop delivered for **23 participants** at the Fatima Foundation highlighted our ability to tailor sessions and work collaboratively with community partners.

Future Development

To meet demand and enhance the mental health offer, we welcomed Lucy Delvin as a Mental Health Practitioner. The team has already expanded its workshop menu and strengthened relationships with external partners by offering bespoke sessions for staff teams.

“

“Learning all of the different types of relaxation was really enlightening. I also really enjoyed that the pace was relaxing and there was plenty of time to enjoy the techniques as we practiced them. Emily is also very calm, reassuring and has a lovely voice. She clearly is extremely well-informed and enthusiastic about helping people.”

Support to Succeed Client

Pathways 50+



PATHWAYS 50+ Pathways 50+ Service

Our Pathways 50+ service provides wellbeing support to people aged 50 years plus who are unemployed and living in North Manchester.

The service offers our clients an opportunity to connect with others and engage in activities whilst receiving personalised support from our team.

This year we received



110 Referrals

However across the full lifetime of the project, a total of 209 referrals were received.

To note this programme concluded in August 2024



Outcomes



- **100%** of engaged participants made progress in at least one Outcome Star area
- Average of 4.7 life areas improved per participant, showing wide-ranging change

Largest areas of progress recorded in:

- Lifestyle, Managing symptoms & Family & social relationships

19% of participants progressed into training, including:

- IT & Cyber Security
- ESOL
- Business & employability courses

Participants achieved employment, volunteering and community engagement outcomes, including:

- Movement into paid work
- Entry into volunteering roles
- Increased engagement in community groups and wellbeing services

Partnerships & Referral Pathways

The programme worked closely with:

- Jobcentre Plus (Cheetham Hill, Newton Heath, Gorton)
- Community partners including Hopewell, No.93 Harpurhey, MAES, Yes Manchester, Wood Street Mission, Age UK, Groundwork, Breakthrough, and many more.

By the end of delivery:

- **48.3%** of referrals came via Jobcentre Plus
- **51.7%** via community services

Cheetham Hill JCP became the most consistent referral route following the introduction of a streamlined weekly booking process.

Feedback

A participant shared their positive experience with the programme:

“Everyone I’ve spoken to from the team has acted with empathy and has wanted to help. They have provided me with advice on how to find jobs, booked workshops to help me with this and have enquired about my general well-being and mental health. They have genuinely listened to me and tried to understand my problems and provide the right solutions. Sidra from the Pathways 50+ team has been excellent. She is a very genuine person has tried her best to support me. She is very good at being empathetic and encouraging and suggest the right things (like websites) to help my job search. She also makes sure to check in on my mental health which I believe is very important. Finding a job when you’re older i.e. over 50 has different challenges to generally being unemployed. It’s hard to find people who understand these issues and genuinely want to help. This service has provided me with the support to build my confidence that I can work again, and has encouraged me to keep trying even with all the failures I have faced. The team has also provided me with support to improve myself i.e. build a better CV, suggest English classes. Anyone who is an older jobseeker needs this support.”

Mid Cheshire Hospitals NHS Foundation Trust Social Prescribing Service

In April 2024, Pathways CIC partnered with Mid Cheshire Hospitals NHS Foundation Trust (MCHFT) to launch a workplace Social Prescribing service specifically for hospital employees. The service was designed to proactively support staff health and wellbeing by addressing the wider social determinants of health through a personalised, non-clinical model of care.

This year we received



196 Referrals

Partnership Working

The service works in close partnership with:

- Occupational Health
- Human Resources
- Health & Wellbeing Teams
- Divisional leads and line managers

Social Prescribers also connected employees to over 70 local and national organisations, including:

- Financial support services
- Mental health services
- Cancer & menopause support
- Food banks & household support schemes

This wraparound model ensures employees receive practical, emotional and social support alongside clinical care.

Outcomes

Social Prescribers use the Wellbeing Outcome Star to measure progress across key life areas including lifestyle, managing symptoms, work, money, housing, family and emotional wellbeing.

Key outcomes achieved:

- **Over 90%** of staff supported reported improved health and wellbeing
- Significant progress recorded across:
 - Lifestyle & self-care
 - Managing symptoms
 - Work & financial wellbeing
 - Family & relationships
 - Feeling positive

One You Cheshire East



ONE YOU CHESHIRE EAST

Start the journey to a healthier you

We are here to help you manage your weight, be more active, stop smoking or improve your balance and mobility

One You Cheshire East



One You Cheshire East is a preventative lifestyle service supporting residents to improve their health and wellbeing across areas such as physical activity, smoking cessation, weight management, strength and balance, and overall healthier lifestyles.

Pathways CIC delivers this work by supplying Community Link Workers (CLWs) to Everybody Health & Leisure, embedding our staff within local communities to engage residents who are traditionally underrepresented in health services.

Direct Referrals & Programme Uptake

Community Link Workers were able to register residents directly into the One You system at the point of contact, significantly streamlining access to support. Referrals were generated across key programme areas including:

- Active Lives
- Reshape (weight management)
- Be Smoke Free
- Stand Strong (strength & balance)
- Swap to Vape / Stop Smoking

Early impact shows strong engagement particularly within Active Lives and Reshape, with growing interest in smoking cessation support.

Community Engagement & Reach

Throughout the year, Community Link Workers have been a visible and consistent presence across local communities, delivering outreach in GP surgeries, food banks, family hubs, libraries, community centres, schools, job centres, faith settings and public events. This face-to-face engagement has been central to building trust, reducing anxiety around formal services, and enabling early intervention.

Between February and October alone, the team attended 55 community events and held over 1,000 meaningful health and wellbeing conversations with residents. Many of those engaged would not typically seek support through traditional GP routes, highlighting the importance of proactive, community-based engagement in preventing ill health and reducing pressure on primary care.



We believe
in making
a difference!

Cost Benefit analysis



For every £1 invested in Pathways services sees a return of £3.38

Our total financial return on investment is:

£3,875,988

Additionally, Pathways has made a public value return on investment of £17.20 for every £1 invested in Pathways services, bringing our total public value return on investment of:

£19,723,962

This shows an overall cost benefit of Pathways services of:

£23,599,950

Carbon Footprint



In line with our commitment to sustainability, we are actively addressing our carbon footprint. This year, we measured and reported our carbon emissions which you can see from the image below, taking the right steps towards understanding our environmental impact.

We recognise the need for action, and as part of our long-term sustainability goals, we aim to achieve a 100% reduction in our carbon footprint by the year 2030. This ambitious target demonstrates our dedication to contributing to a greener and a more sustainable future.



we commit to
being a carbon
neutral
organisation
by 2030



Contact

Pathways Community Interest Company
Timbrell House
86-88 Timbrell Avenue
Crewe
CW1 3LY
01270 617 685

www.pathwayscic.co.uk 

info@pathwayscic.co.uk 

www.facebook.com/PathwaysCommunityInterest 