

Efford Building Communities Initiative Masterplan

**A Summary of the Health Needs Assessment
Report prepared by
PHDU Public Teaching Primary Care Trust**

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A SUMMARY OF THE HEALTH NEEDS ASSESSMENT

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1) AIMS OF THE HEALTH AND WELLBEING STUDY

The Plymouth Public Health Development Unit (a Directorate of the Plymouth Teaching Primary Care Trust, PtPCT) was commissioned by Plymouth City Council to undertake a '*health and wellbeing needs assessment*' (HNA) as part of the Efford 'Building Sustainable Communities' master planning.

A Community Public Health Practitioner and a Health Impact Specialist have carried out this HNA. HNA can use a range of methods; in this case a simple, pragmatic and '*public health*' approach has been adopted. The specific aims of this HNA were:

- to assess the broad health needs of the Efford population
- to assess the available health (and related) services in the light of the identified needs (including considering the needs of different groups within the Efford population)
- to suggest prospective changes to health services, and other changes that may promote well-being (in the context of the Heart of Efford master-planning and consultation processes)

2) ABOUT PUBLIC HEALTH

Public health practice includes health promotion and tackling the general causes of ill-health and disease. Public health recognises that good health is not simply the prevention of disease but rather the promotion of '*wellbeing*'. Our health is influenced by many factors, some of which are; our wealth, our housing conditions, our environments, our social networks, our diet and lifestyles.

3) METHODS

This study has been conducted in 4 inter-related phases:

- (i) Using desk research to undertake a rapid '*health profile*' of Efford and summarise the health needs of the population.
- (ii) Using desk research, and consultation with various groups, to assess the existing health (and related) services available in Efford
- (iii) Consulting with different groups regarding prospective improvements to health (and related) services in Efford. This included meeting with different Managers and staff within the PCT and Local Authority.
- (iv) Summarising and prioritising the results.

Consultation has been undertaken by various methods:

- Health questions included in the public questionnaire
- A health questionnaire adapted by and for young people, and undertaken by Lipson College students

- Young people considering 'wellbeing' issues whilst working with the artists appointed to Efford during the 'masterplanning' process.
- Consultations and meetings with groups (eg older people) and individuals in various settings which include: lunch clubs; parent/toddler groups; nurseries; resident association meetings; Heart of Efford Community Partnership (HECP) committee consultation
- Consultations and meetings (and/or phone conversations) with service providers such as General Practitioner's, Health Visitors, the Waterfront Community Care team, Pharmacist, Nursery Providers and the Youth and Community Centre Manager (etc)
- (Unfortunately it has not been possible to consult with all of the potential stakeholders for this assessment - see Key Messages)

The same type of questions were presented to people in a range of consultation 'settings', for example:

- How do they perceive their health?
- How do they perceive community health?
- How do they rate local health services?
- Are there additional health services required?

The public health team have analysed the data by quantifying questionnaire returns, inserting comments into simple matrices, and reviewing the information received.

Provisional findings have been shared with senior public health managers, colleagues from the Local Authority and the Efford regeneration team, before identifying our 'key messages'.

4) A SUMMARISED POPULATION HEALTH PROFILE

When the Government's '*Neighbourhood Renewal*' health indicators are compared across the 43 neighbourhoods of Plymouth, Efford can be described as the 5th worst performing neighbourhood in the city. These standardised indicators include:

- Life expectancy
- Teenage conception rate
- Cancer mortality for under 75 year olds
- Coronary Heart Disease mortality for under 75 year olds
- Households with children where one or more parents smoke (Plymouth Teaching Primary Care Trust 2006).
- Infant mortality

The 2001 Census showed that 11.5% of residents rated their health as '*not good*' as compared with a city average of 10.1% and an England average of 9.2%.

Questionnaires used during the master planning process record residents rating their health (to date) as:

- *Very poor*: 3
- *Poor*: 11
- *Average to good*: 27
- *Very good*: 19

However, 4 local GP's described community health as '*Poor*'.

In 2005, 26.5% of Efford Year 1 and 6 school pupils were recorded as overweight or obese. (There are 10 other Plymouth neighbourhoods with similarly high levels of child obesity). Obesity for Year 1 pupils in these neighbourhoods was more than double the obesity rate for Year 1 pupils in the least deprived neighbourhoods.

Housing conditions can also have a major effect on health. Efford has a relatively high number of households renting homes from the Council or 'social' landlords (and a

a higher than average proportion of households without access to a car). Efford has one of the highest rates of 'non decent' private dwellings (only St Peters and the Waterfront are worse) and there are above average rates of fuel poverty in private dwellings.

5) A SUMMARY OF EXISTING HEALTH SERVICES

Efford is served by 2 General Practices. However many local people are registered with GP's outside the area.

The redeveloped Mount Gould Local Care Centre is about 1 mile away by road.

The large Derriford Hospital is about 3 miles away by road.

TABLE OF EXISTING HEALTH SERVICES IN EFFORD

Efford Medical Centre General Practice, Torr ridge Way
<ul style="list-style-type: none"> • General Practitioner • District Nurse (attached): visit patients at home & provide domiciliary care etc • Practice Nurse (p/t) ie wounds, smears, screening, immunisations, asthma, diabetes • Pathology laboratory results service • Community Midwife (Attached, covers more than one GP) with antenatal clinics • Contraceptive services • Community Psychiatric Nurse & Counselling service • Maternity medical service • Child health surveillance • Minor surgery eg cryo surgery • Health Visitor services (attached), based at Plym View School Children centre
Pathfields Practice, Laira (satellite practice from main site in Plympton)
<ul style="list-style-type: none"> • Several GPs in rotation (c50% of patients from Efford) • GUM services ie sexual health screening and advice • Drug abuse treatment services • Other services as for Efford (above)
Community Public Health Practitioner (via Public Health Development Unit) c 1.5 days a week
<ul style="list-style-type: none"> • To initiate & support community health promotion projects eg Smoking Cessation • To link communities with health service providers • To build links between health & other relevant services at neighbourhood level • To run health promotion campaigns eg blood pressure checks • To contribute to reducing health inequalities
Mount Gould (1) Primary Care Centre
<ul style="list-style-type: none"> • 4 GP's (currently seeking new local patients) • services similar to other GP's • Carer's register (to help provide support to Carer's)
(2) Local Care Centre (60+ beds, a mini Hospital + outpatient services, c1 mile by road from Efford)
<ul style="list-style-type: none"> • Stroke Unit • Rehabilitation wards • Continence clinic • Day therapies • Outpatients clinic (various) • MRI scanner (diagnostics) • Physiotherapy, occupational therapy • Child & adolescent mental health services • Social Services office • (Other services tbc)
Dentist – NONE based in Efford. The nearest NHS dentists with vacancies at present are Ernesettle & Milehouse Road. The nearest actual dentist (private patients only) is TJ Martin at 60 Lower Compton Road (3/4 miles from Torr ridge Way).
School Nurse (covers both schools): drop in service for pupils at Highfield

<p>Social Services (Plymouth Council): Community Care (Adult services, Waterfront team)</p> <ul style="list-style-type: none"> • Risk & needs assessments • Domiciliary care • Carers support • Respite services • Support with meals • Tenancy support (Eg Paternoster House (supported housing)) • Occupational Therapists <p>Children's Services</p> <p>Recently been reorganised; provide a range of services from the city centre. <i>(Unable to arrange interview)</i></p>
<p>Children & Adolescent Mental Health An outreach worker for NE Plymouth is due to be appointed</p>
<p>Efford Children's Centre (a virtual network of services)</p> <ul style="list-style-type: none"> • Extra support for families with children 0-4 • Outreach worker (enhanced service) • To be developed
<p>Extended Children's Services for all families:</p> <ul style="list-style-type: none"> • Childcare Provision • Varied Menu of Activities • Parenting Support • Swift and Easy Referrals • Community Access to school facilities etc
<p>Plym View School: Playtots Nursery (0-5 years) After School Club Community room</p>
<p>Highfields School: Bright Sparks playgroup (0-11 years) Community Room</p>
<p>Lipson Vale School: Bobtails Nursery Community Room</p>
<p>Efford Youth & Community Centre (EYCC):</p> <ul style="list-style-type: none"> • drop-in youth club • detached youth work • Sexual health advisor • Youth Forum • Young Carers Group (covers the whole city) • Holiday Play schemes • Adult Education
<p>Lipson Community College: sports & recreation facilities available</p>
<p>Council Parks service</p>
<p>Community Flat (Devon & Cornwall Housing Association)</p> <ul style="list-style-type: none"> • Venue for young people • Community development worker
<p>Pharmacist, Co-operative Retail Society, Torridge Way</p> <ul style="list-style-type: none"> • Pro-active service including blood pressure & weight monitoring service, wide range of clients • Home delivery service
<p>Private gym</p>
<p>Counselling service for parents (@ Highfields School) via Plymouth Family Support Services</p>
<p>Senior Citizens Group/Older people's bingo club (currently based at Community Centre)</p>
<p>In Touch Befriending (visiting service, activity group for older people, used to meet at the Church, now at Highfields)</p>
<p>Hope Credit Union (planning a regular presence in Efford)</p>
<p>Heart of Efford Community Partnership. (Planning to organize community events etc)</p>
<p>Residents Associations</p>

6) A SUMMARY OF THE CONSULTATION REGARDING THE HEALTH NEEDS OF EFFORD

This study has gathered a range of data from different individuals, groups and 'professionals'.

Particular attention has been given to those groups who may be more vulnerable to local health inequalities, such as parents with young children, young people and older people.

6.1) GENERAL QUESTIONNAIRES

The general questionnaires have suggested some discontent with local health services:

- Respondents describing services as poor: 15
- ok: 19
- good: 14
- very good: 3

At least 7 respondents stated that additional services were needed.

6.2) YOUNG PEOPLE

Seventy-six young people's (aged 11-16) questionnaires were analysed. Key points included:

- 8% described their health as *'poor'*
- 20% felt local health services are good/very good; 58% said *'ok'*; 17% said *'poor'*
- 22% felt additional health services were required, 12% said *'No'* (the rest were *'don't know'* or blank)
- Regarding the question *'how suitable are Efford park areas for all family members?'* 54% answered *'Poor'* and 39% *'Ok'*
- There were many comments about the parks: *'more stuff to do improve the park...'* *'A more comfortable place for people to go...'* *'A place where youths can go and do what they like (in a certain respect)'*
- One young person felt that *'Torridge Way has improved by having a Doctor's'*, but another said *'I don't feel I could go into the health centre.'*
- Other young people suggested *'Well there could be a health centre where you could exercise and stuff'* or a gym, as well as calling for a *'bigger doctor'* and a *'Fruit and veg shop'*.
- Health-related problems identified included *'there is (broken) glass everywhere'*, *'Youths getting drunk'* and *'smoking'*
- There were a significant number of calls for better sex education.
- Several young people also wanted a local Dentist.
- A pertinent observation about young people was made by an Efford resident in a letter published by the Plymouth Herald newspaper: *'Not every parent can afford to give them money to go to the sports centre, plus bus fares.'*

6.3) 'WELLBEING OBSERVATIONS' ARISING FROM THE ART/YOUTH PROJECTS

The artists contracted to participate with young people in the master-planning process also engaged with various health and well-being issues. Some provisional observations can inform this HNA:

- the lack of things for young people to do
- quite a few young people appear to experience crowded and far from ideal housing
- young people can seem to be a constant target or *'subject'* for other people's *'labels'* eg the experience of aggressive policing when Police are *'called out'* (or even sometimes when on routine patrol)
- a group of young people = *'a gang'*
- young people are not homogenous - they are all very different: although they share common needs.. such as somewhere to go, and something to do
- young people are very aware that some young people can be *'out of order'* and dangerous to themselves, as to well as to other youngsters and the wider community
- young people have an intricate local network of walks and places... *'an invisible geography.. a bit like those high frequency sounds that, literally, only the adolescent brain can hear'*.
- Perhaps though some Efford young people suffer from *'a poverty of ambition and view... almost ironic, considering the literally amazing viewpoints that characterise their location'*

6.4) PARENTS WITH YOUNG CHILDREN

Parents with young children have suggested that there is an ongoing need for good quality, flexible and affordable childcare. More specifically there appears to be a demand for more services for children with behavioural needs. Health Visitors support this suggestion and propose more services relevant to alcohol abuse and domestic violence.

6.5) OLDER PEOPLE

- Older people suggest a need for better and accessible meeting places for vital (although often 'voluntarily' provided) services such as lunch clubs and social groups
- They also specify a need for local chiropody and dental services.
- More generally older people would welcome better local shops and easier and safer road crossings.
- They would welcome the maintenance and improvement of local bus services, particularly for accessing primary and secondary healthcare facilities elsewhere in the city
- They can also be concerned about groups of young people appearing threatening in public spaces, and suggest there's a need for more things for young people to do, as well as a need for better policing.

6.6) LOCAL GP'S

Local GP's have made various comments. They recognise that the main causes of ill-health are '*social deprivation*' ... '*drugs/alcohol/smoking, lack of healthy food options, lack of affordable exercise (gym)... poor quality housing*'.

GP's suggest that they could consider commissioning extra services at a suitable local community facility, perhaps teenage and general '*drop-in services*', '*obesity classes*' In the meantime they are developing extra services for '*ultrasounds*' and other rapid diagnostics, '*ear nose throat referrals*', '*orthopaedics*', lung diseases, '*minor operations*'.

More generally GP's observe that wellbeing could be promoted by services such as '*counselling*', '*cooking classes*' and a '*low-key drop in centre*'.

6.7) GENERAL RESIDENT'S VIEWS RE: HEALTH

A range of other views has been gathered from local residents, including from the recently formed HECF committee.

- There appears to be a particularly strong need for increased local support for people experiencing stress, depression and anxiety and other mental health concerns. People were unclear as to where they could seek services for these issues.
- There was also anxiety about a perceived increase in cancer-related illnesses
- Suggestions for developing health services included making some complementary therapies available, a local healthy living café, and a '*community building*' space where people could meet for activities and for simply '*having fun*'.
- There was also a suggested need for a community gym, and for improvements to be made to local sports facilities (such as the football pitch).
- All in all many local residents seemed to agree that there is a need for the improvement of local health services
- Some residents were concerned about new or proposed developments reducing the amount of green space in Efford

6.8) OTHER CONSULTATIONS

Other consultations included a meeting with the relevant Social Services (Adults) team. They have a number of clients in Efford and practitioners suggested that clients can now use '*Direct Payments*' to (for example) choose to purchase support services locally. Social Services would in principle welcome the opportunity to use new local facilities to offer '*daycare*' type services.

The local Pharmacist is willing to develop more health promotion (etc) activities in partnership with public health and other agencies.

7) CONCLUSIONS:

KEY MESSAGES REGARDING POSSIBLE NEW/IMPROVED HEALTH & WELLBEING SERVICES

The questionnaire used by young people with their local peers included their own question: *'Which parts of Efford do you think need to be changed? How would you suggest they are changed?'* To which one young respondent wrote: *'in anyway possible'*.

Certainly this HNA can be clear in concluding that **change** is required for services (eg youth services, health promotion services, primary health care services) that affect the inter-connected determinants or causes of health and well-being.

The key messages regarding the health needs of the Efford community can be provisionally summarised in the following *'wish-list'*:

7.1) CONCLUSION: PRINCIPLES

- An enhanced choice and range of health promotion activities
- An enhanced choice and range of primary health care services and facilities
- Easy access to health services elsewhere in the city
- A flexible and central 'community building' space for multi-purpose activities, including health-related activities (see above)
- Resources and activities for young people
- Enhanced support services for families that address a range of needs
- Appropriate social and activity facilities for older people
- Improving and encouraging access to green space
- Improving local 'healthy food' shopping opportunities

7.2) CONCLUSION: DETAILS

The 'details' of these principles are outlined below:

7.2.1) improving health services

More General Practitioners

An NHS Dentist

Mental Health promotion services especially access to counselling

Improving sex education, family planning and ante-natal services

Drop-in facilities for services such as smoking cessation, substance misuse

Improved access and information regarding alcohol misuse and domestic violence

7.2.2) improving general services

An affordable gym

A need for public agencies to develop positive relationships with young people

Opportunities for younger people to improve relationships with other groups eg older people

Opportunities for 'space' managed by young people

Utilising the park for health enhancing activities such as a 'green gym' and dedicated spaces for children and young people

7.2.3) health service 'needs' regarding possible new community facilities

This HNA, in common with other aspects of the masterplanning process, suggests the importance of new community facilities in Efford. However the practicalities of providing new facilities are dependent upon the decision-making and resources of various organisations, such as the Council's Lifelong Learning Department (ie decisions regarding new school buildings), the Regional Development Agency, the Plymouth Teaching Primary Care Trust, 'Section 106' contributions obtained from new house-building developments, grants obtained by the Efford Partnership – and so on.

The HNA, and public health 'good practice', would suggest the following approach regarding new community facilities:

- The benefits of co-locating public services whenever possible
- The possible 'flexibility' benefits from new facilities being provided through a range of connected new facilities rather than one large new building
- The need for full disabled access
- The need for simple office space
- Access to kitchen facilities
- Large and flexible rooms for larger gatherings and activities
- A range of smaller flexible rooms for various activities
- The possible benefits of separate 'entrances' for different activities and services

- The short and longer term benefits of a 'sustainable' and highly energy efficient approach to the design and construction of buildings including the use of 'natural' lighting and ventilation systems
- The benefits arising from community access to (minimally regulated) centrally located shared outdoor space (eg a village green or town square)

7.3) CONCLUSION: PRIORITISING

It is important not to raise unrealistic community expectations of possible improvements to health and 'wellbeing' services. In terms of practical action, some of the following proposals *may* be actionable in the relative short-term:

1. GP's may be able to use 'Practice-Based Commissioning' opportunities to enhance services eg counselling services
2. The Primary Care Trust may be able to support new co-located/multi-purpose community facilities
3. Steps can be taken to improve the availability of fresh food in the current local shops
4. The encouragement of more voluntary group activities which contribute to health promotion and well-being
5. Close co-ordination with the Efford Children's Centre initiative, in partnership with local people, to deliver quality services
6. Increasing partnership working with 'social care' agencies to enhance the choice of local services.

7.4) CONCLUSION: 'THEMES'

The HNA key messages tie in with the key themes identified by Shillam and Smith

- Activity
Gym... Green spaces...'Green' gym... Health services
- Focus
Community building... Improving general environment... Green spaces
- Connection
Wellbeing... and various determinants
- Quality
Health services... Fresh food
- Celebration
Social activities eg for young and older people
- Economy
Community cafe

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