

# **Health Impact Assessment of the Cam Ymlaen Project, Conwy**

## **August 2008**

### **Introduction**

Health impact assessment (HIA) is defined as “*a combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population.*” (Health Impact Assessment: Main concepts and suggested approach. World Health Organization. December 1999)

It is a process which supports organisations to assess the potential consequences of their actions and decisions on people’s health and well-being either positively or negatively.

It provides a systematic and flexible approach that can be used to consider the wider effects of local and national policies or initiatives and how they, in turn, may affect people’s health in the broadest sense. It uses the wider or social determinants of health as a framework. Health impact assessment works best when it involves people and organisations who can contribute different kinds of relevant knowledge and insight. The information is then used to build in measures to maximise opportunities for health and to minimise any risks. It also provides a way of addressing the inequalities in health that continue to persist in Wales.

The Welsh Assembly Government (WAG) is committed to developing its use as a key part of its strategy to improve health and reduce inequalities. The Welsh Health Impact Assessment Support Unit was established to help support the use of the process in Wales, is impartial and facilitated the HIA on the Cam Ymlaen Project, based in Colwyn Bay, Conwy on behalf of the organisation.

A rapid HIA was conducted in August 2008 in order to assess the contribution of the Cam Ymlaen Project on the health and wellbeing of both those who are part of the project and the community as a whole. The HIA was used as a basis to inform and improve the services Cam Ymlaen currently offers.

And looked at the positive and negative health and well-being impacts of the service on the local community. It provided an opportunity for key stakeholders to provide practical recommendations on how Cam Ymlaen could further improve the health and well-being of the population and how any actions could be implemented.

It encompassed a half day participatory stakeholder workshop held on August 16<sup>th</sup> 2008. This was facilitated by Liz Green of WHIASU. A list of the participants is included in (Appendix One). The stakeholder group was varied encompassing representatives from Cam Ymlaen itself, service users, Conwy

and Denbighshire Trust and the Local Health Board and a consultant Psychiatrist. It was a small group but invitations had been sent to; the local authority health and wellbeing partners, GP's with a specific interest in mental health and the National Public Health Service in Wales (NPHS). The group considered who within the local community would benefit from the work of Cam Ymlaen and how.

An evaluation was undertaken at the end of the session (results in Appendix Two).

### **Stage One**

#### **Health impact assessment workshop**

After presentations to the group on the work of Cam Ymlaen, 'what is health impact assessment' and a case study of a previous HIA, the participants systematically assessed the any impacts on health and wellbeing of the project using the wider determinants of health as a framework (see Appendix 3).

The following table shows a summary of where the group identified strengths and weaknesses (i.e. positives/negatives) of Cam Ymlaen and its activities. It focussed on vulnerable groups as well as the wider population (Appendix Four). The HIA was based around the framework of 'what has worked well' and 'what could be improved' within Cam Ymlaen. The overarching aim was to maximise the positive health implications and minimise / negate any potential negative impacts.

## Lifestyles

Positives identified	Negatives identified
<ul style="list-style-type: none"><li>• Gardening – physical activity and allotments – growing vegetables etc leading to dietary improvements.</li><li>• Pre-vocational training includes awareness of diet/nutrition and fitness</li><li>• Liaise with local organisations re: alcohol/risk taking behaviour</li><li>• Lessen dependence on prescribed drugs through being part of a scheme – improve diet/physical activity</li><li>• Cam Ymlaen “wakes you up a bit!” Makes physical activity improvements – eases depression</li><li>• Improves self- esteem – something to look forward to/ get up for</li><li>• Comfortable environment to bring people’s lifestyles on. Helps to make them better</li></ul>	<ul style="list-style-type: none"><li>• Doesn’t fit in with local Gyms/facilities</li></ul>

### Gaps

- Need to raise awareness of issues and increase training re: alcohol/risk taking behaviour

### Recommendations

- Talk to John Hardy, CCBC Leisure Services re: possibility of dovetailing local fitness programmes with Cam Ymlaen’s pre-vocational training programme

## Social & Community Influences on Health

Positives identified	Negatives identified
<ul style="list-style-type: none"><li>• Cam Ymlaen has a big impact in breaking down stigma of mental health issues. Leads to long term impact on community through contact with people with mental illness. "Normalises" issues</li><li>• Go out to employers to dispel myths and gives practical, positive examples. 117 in structured employment August 2008</li><li>• Leads to positive role models</li><li>• Can support activity and prevent relapse</li><li>• Cam Ymlaen very good start to supportive "recovery" and integration into community. Raises self-confidence and frees primary and secondary care capacity and resources to see more clients and the community can access mental health services more quickly</li><li>• Can increase neighbourliness in the community network by being employed and giving a person something to talk about</li><li>• Many areas in Conwy are deprived and Cam Ymlaen supports work and can help improve individual situations/community sense</li><li>• Increased sense of self-confidence leads to increased number of friends/contacts. Improve networks and socialising.</li><li>• Real life examples/case studies</li><li>• Provides access to transport for people from rural areas</li></ul>	<ul style="list-style-type: none"><li>• Don't have time and capacity to raise awareness/train</li><li>• Hard to quantify this</li><li>• What happens if Cam Ymlaen ends? Ethical issues/stress. Leaves people "high and dry"</li></ul>

<ul style="list-style-type: none"> <li>• Staff have experience of mental health issues and so are positive role models and can understand and empathise. Provides credibility to services</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of capacity to go out to community and isolated areas</li> </ul>
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#### Gaps

- Need for contingency plans and an exit strategy if Cam Ymlaen comes to an end
- Need for funding to a) cover gaps left by the lack of capacity to go out into the community and isolated areas and
- b) to raise awareness/train

#### Recommendations

- Lobby Welsh Assembly Government (WAG) to support the giving of time and capacity to raise awareness/train re: mental health issues
- Search for funding to allow outreach into the community and isolated areas
- Build on Gareth's story with Halfords to break down stereotypes and also Susan's story

## Living & Environmental Conditions affecting Health

<b>Positives identified</b>	<b>Negatives identified</b>
<ul style="list-style-type: none"><li>• Cam Ymlaen helps to get people homes or moved to better homes by liaising with authorities. Helped support 1 client to get a home after sleeping in the car.</li><li>• Help access housing more quickly or prevent homelessness.</li><li>• Liaising with the relevant partners and organisations. “Rescuing people”</li><li>• Cam Ymlaen can support people into work and so they are not hanging around streets.</li><li>• Cam Ymlaen gets people out of house and interacting with society,</li></ul>	Hard to quantify

<b>Gaps</b> <ul style="list-style-type: none"><li>• Need for further “Quality of Life” questionnaire?</li></ul> <b>Recommendations</b> <ul style="list-style-type: none"><li>• Evaluation of well-being post Cam Ymlaen</li></ul>
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## Economic Conditions affecting Health

Positives identified	Negatives identified
<ul style="list-style-type: none"><li>• Support in accessing/avoiding benefit system</li><li>• Very strong relationship with Benefits agency/Housing Services, etc</li><li>• Supports improvement of economic/employment situation</li><li>• Cam Ymlaen helps to save the Government money. Money can be saved by avoiding use of secondary care services and accessing primary care and Cam Ymlaen only</li><li>• Directly supports people into employment with a variety of jobs</li><li>• The service frees up financial resources for LHB by reducing dependence on prescribed drugs</li><li>• Can contribute to economic prosperity/profile of the area which is very good for all concerned</li></ul>	<ul style="list-style-type: none"><li>• DSS very negative</li><li>• If Cam Ymlaen disappears, then it will have a detrimental effect on service users</li><li>• If no Cam Ymlaen, who will help users?</li><li>• What is this benefit? How to quantify it?</li><li>• Job/workload of advisers in other organisations will increase if Cam Ymlaen ends – knock on effect to other agencies/GP's and secondary care system</li><li>• Lack of funding makes staff hard to retain and recruit and morale becomes low. This has a knock-on effect on referrals and clients</li></ul>

## **Gaps**

- There needs to be a method of quantifying how much money is saved by avoiding secondary care and just accessing primary care and Cam Ymlaen's services

## **Recommendations**

- Find out/research what financial resources are freed up by the reduction of prescribed drugs

## Access and Quality of Services

Positives identified	Negatives identified
<ul style="list-style-type: none"><li>• Pre-vocational Training:<ul style="list-style-type: none"><li>Offers qualifications</li><li>Offers a CV (often for the first time!)</li><li>Offers computer courses</li></ul></li><li>Leads to increased skills, work and increased income</li><li>• Can show value of Cam Ymlaen by comparing to how other Local Authorities support (or don't) those with mental health issues back into employment</li><li>• Dedicated Support Officer to help with filling in forms, etc/accessing services</li><li>• Training in Health &amp; Safety. Employers value this</li><li>• Work with Llandrillo. Colleges provide 9/10 courses. Central features: self-esteem, socialisation, improved skill base, normalisation</li><li>• Accessible to all</li><li>• Value of scheme to people willing to travel</li></ul>	<ul style="list-style-type: none"><li>• Different ways of working in Conwy and Denbighshire</li><li>• 2 streams to access mental health services - long term/short term split</li><li>• Accessible but people have to travel often up to 2 hours and change buses, making this difficult for some</li><li>• Limited access from rural areas</li></ul>

**Gaps**

- Need to extend service into rural areas

**Recommendations**

- Research funding sources for the above

## **Macro-economic, Environmental & Sustainability Factors**

<b>Positives identified</b>	<b>Negatives identified</b>
<ul style="list-style-type: none"><li>• In Wales, Cam Ymlaen exudes best practice and supports WAG strategies and policies</li><li>• Supports economic development</li></ul>	<ul style="list-style-type: none"><li>• In England, also investment in CBT Therapy – why/ how?</li><li>• Haven't devoted enough time to showing value of Cam Ymlaen to WAG - Vicious circle</li><li>• Lack of funding and resources lead to constrained services</li><li>• Lack of support for economic consultations</li></ul>

### **Gaps**

- WAG missing out on learning from best practices of Cam Ymlaen
- Need to identify which clients use which service in order to support WAG/funding with figures enhanced, etc
- Need to see if we can chart progression and jobs people go to

### **Recommendations**

- Lobby WAG and raise awareness of best practice
- Lobby Professionals to support service and future funding

## **Stage Two**

### **Key Issues and Recommendations**

Having identifying potential impacts on health and wellbeing on the service users, employees, the organisation and its effects on the wider community or any gaps in provision, the facilitator then asked the participants to consider some recommendations to mitigate any negative implications or constraints to the service. The table lists these.

However, it can be said that several main themes arose and need to be addressed:

- Positive contribution to local economy and health and wellbeing of vulnerable groups and wider community
- Need to lobby Welsh Assembly Government in how Cam Ymlaen supports many policies and how it exudes best practice in Europe and not just Wales
- Long term funding is essential to support provision of service in the future. Need for to gather evidence to support this.
- Lack of capacity and resources constrains service.
- Need for increased awareness raising and training in ‘de-stigmatising’ thinking around mental health.

Final recommendations included the following:

- Establish links with local organisations and raise awareness of the positive contribution of Cam Ymlaen to health and wellbeing and the local economy
- Need for contingency plans and an exit strategy if Cam Ymlaen comes to an end
- Need for funding to a) cover gaps left by the lack of capacity to go out into the community and isolated areas and b) to raise awareness/train
- Lobby Welsh Assembly Government (WAG) to support the giving of time and capacity to raise awareness and do more training with regard to mental health issues
- Search for funding to allow outreach into the community and isolated areas
- Write up and disseminate positive case studies of service users, past and present
- Discuss the need for a further “Quality of Life” questionnaire and introduction of an evaluation of well-being post Cam Ymlaen
- Find out/research what financial resources are freed up for the Local Health Board through the reduction of prescribed drugs in user groups from improved mental health. Try to quantify how Cam Ymlaen contributes to a reduction of stress on secondary care system

- Research funding sources to enable outreach services to the more rural community of Conwy
- Lobby WAG and raise awareness of best practice
- Lobby Professionals to support service and future funding

## **Conclusion**

This HIA demonstrated the positive contribution to the local health and wellbeing of the population and economy of Conwy. However, much more could be achieved through the removal of constraints and barriers, such as the constant need for longer term funding, in order to build on what has already been achieved. Positive case studies from service users told on the day of the workshop of their experience of the service showed how negative stereotypes of those with mental health issues could be challenged and how Cam Ymlaen is a service to be hailed as an example of best practice. The HIA has also given the service some pointers to improve the project if longer term funding is obtained.

## **Author:**

Liz Green

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## **Appendix One**

### **Cam Ymlaen HIA, Conwy**

**Date: 28<sup>th</sup> August 2008**

**Venue: Conwy Mental Health Trust, Colwyn Bay**

### **Attendees**

Denise Ashton	CPN Team Manager, Conwy West CMHT
Tim Peters	CPN, Roslin CMHT
Dr. H. Babu	Consultant Psychiatrist
Barry Broadmeadow	Service User Representative
Angela France	Service User
Gareth Weinstein	Service User
Peter Manning	Director, Cam Ymlaen
Susan Meaden	Employment Officer, Cam Ymlaen.

### **Appendix Two**

#### **Evaluation Comments/Ratings (1 =did not meet expectations/poor and 10 = very much met expectations/excellent)**

- The workshop was very informative, bringing up and discussing very relevant topics, clarifying information, showing me how important Cam Ymlaen is as a service, which I know through my own personal experience. Also identifying some negative aspects of the service which can be worked on with the correct funding (10)
- Very interesting and I am glad that I was invited. I hope that I have helped. Liz is extremely 'savy'. Thanks (10)
- Wasn't too clear prior to the meeting as I was here representing another person. Very useful session, this should help with any proposal. Excellent facilitation (9)
- I felt the workshop got people talking. All areas were covered and hopefully a greater understanding of Cam Ymlaen's impact on the health of people with mental health problems (9)
- I hope that the workshop may help Cam Ymlaen go from strength to strength and keep going (9)
- Fully addressed and identified positives and importantly identified potential areas which need to be incorporated into funding applications. Plenty of material to 'enhance' the bid (9)
- All as expected – very informative, a good mix of attendants and comments, both positive and negative. All have to support this vital service which should be funded by DWP, not rely on funding which has to be fought for! (8)
- Wasn't sure but was very valuable, I hope, in terms of the long term future of Cam Ymlaen – fingers crossed! (8)

### **Appendix Three**

The next two pages show part of a toolkit that was used during the appraisal taken from “Improving Health and Reducing Inequalities – A Practical guide to health impact assessment”

(Welsh Health Impact Assessment Support Unit & Partners, 2004.)

#### **Health and well-being determinants checklist**

**Please note that this list is a guide and is not exhaustive.**

<b>1. Lifestyles</b>	<ul style="list-style-type: none"><li>• Diet</li><li>• Physical exercise</li><li>• Use of alcohol, cigarettes, non-prescribed drugs</li><li>• Sexual activity</li><li>• Other risk-taking activity</li></ul>
<b>2. Social and community influences on health</b>	<ul style="list-style-type: none"><li>• Family organisation and roles</li><li>• Citizen power and influence</li><li>• Social support and social networks</li><li>• Neighbourliness</li><li>• Sense of belonging</li><li>• Local pride</li><li>• Divisions in community</li><li>• Social isolation</li><li>• Peer pressure</li><li>• Community identity</li><li>• Cultural and spiritual ethos</li><li>• Racism</li><li>• Other social exclusion</li></ul>
<b>3. Living/environmental conditions affecting health</b>	<ul style="list-style-type: none"><li>• Built environment</li><li>• Neighbourhood design</li><li>• Housing</li><li>• Indoor environment</li><li>• Noise</li><li>• Air and water quality</li><li>• Attractiveness of area</li><li>• Community safety</li><li>• Smell/odour</li><li>• Waste disposal</li><li>• Road hazards</li><li>• Injury hazards</li><li>• Quality and safety of play areas</li></ul>
<b>4. Economic conditions affecting health</b>	<ul style="list-style-type: none"><li>• Unemployment</li><li>• Income</li><li>• Economic inactivity</li><li>• Type of employment</li><li>• Workplace conditions</li></ul>
<b>5. Access and quality of services</b>	<ul style="list-style-type: none"><li>• Medical services</li><li>• Other caring services</li><li>• Careers advice</li><li>• Shops and commercial services</li><li>• Public amenities</li><li>• Transport</li><li>• Education and training</li><li>• Information technology</li></ul>
<b>6. Macro-economic, environmental and sustainability factors</b>	<ul style="list-style-type: none"><li>• Government policies</li><li>• Gross Domestic Product</li><li>• Economic development</li><li>• Biological diversity</li><li>• Climate</li></ul>

## **Appendix Four**

### **Vulnerable and/or disadvantaged population groups**

The target groups you identify as vulnerable or disadvantaged will depend on the characteristics of the local population and the nature of the proposal itself. The most disadvantaged and/or vulnerable groups are those which will exhibit a number of characteristics, for example children in living poverty. This list is therefore just a guide and you may like to focus on groups that have multiple disadvantages.

#### **1. Age related groups\***

- Children and young people
- Older people

#### **2. Income related groups**

- People on low income
- Economically inactive
- Unemployed
- People who are unable to work due to ill health

#### **3. Groups who suffer discrimination or other social disadvantage**

- People with disabilities
- Refugee groups
- People seeking asylum
- Travellers
- Single parent families
- Lesbian and gay people
- Ethnic minority groups\*\*
- Religious groups\*\*

#### **4. Geographical issues**

- People living in areas known to exhibit poor economic and/or health indicators
- People living in isolated areas
- People unable to access services and facilities

You will also want to assess the impact on the general adult population and/or assess the impact separately on men and women.

Please note that this list is a guide and is not exhaustive.

\* Could specify age range or target different age groups for special consideration.

\*\* May need to specify.

## **Appendix Five**

### **About the Welsh Health Impact Assessment Support Unit.**

Health Impact Assessment is a process which supports organisations to assess the potential consequences of their decisions on people's health and well-being. The Welsh Assembly Government is committed to developing its use as a key part of its strategy to improve health and reduce inequalities.

Health impact assessment provides a systematic yet flexible and practical framework that can be used to consider the wider effects of local and national policies or initiatives and how they, in turn, may affect people's health. Health impact assessment works best when it involves people and organisations who can contribute different kinds of relevant knowledge and insight. The information is then used to build in measures to maximise opportunities for health and to minimise any risks. It also provides a way of addressing the inequalities in health that continue to persist in Wales.

### **Welsh Health Impact Assessment Support Unit**

WHIASU is based in the Cardiff Institute of Society, Health and Ethics which is part of Cardiff University's School of Social Sciences. It is funded by the Welsh Assembly Government, through the Wales Centre for Health and is resourced to cover both North and South Wales.

#### **The key roles of WHIASU are:**

- To support the development and effective use of the health impact assessment approach in Wales through building partnerships and collaborations with key statutory, voluntary, community and private organisations in Wales.
- To provide direct information and advice to those who are in the process of conducting health impact assessments.
- To contribute to the provision of new research, and provide access to existing evidence, that will inform and improve judgements about the potential impacts of policies, programmes and projects.

#### **For more information with regard to HIA or the Welsh Health Impact Assessment Unit please contact:**

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