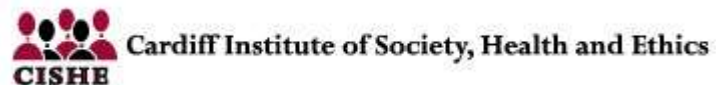


# Corwen Healthy Living Centre Partnership, Denbighshire

## Report on Rapid Health Impact Assessment of Healthy Living Centre

January 2007



## **Author**

Liz Green – Health Impact Assessment Development Officer, Welsh Health Impact Assessment Support Unit.

## **Foreword**

The Healthy Living Centre Partnership Board would like to thank all those individuals and partner agencies that have supported the Corwen Healthy Living Centre over the past 5 years, especially those who attended the health impact assessment on 20<sup>th</sup> January 2007. We hope that you found the day useful and believe that the information gathered will help to inform future provision within the Centre and help to maintain its sustainability. Thank you for your enthusiastic participation and we look forward to continue to work with you in the future.

We would also like to thank Liz Green, Health Impact Assessment Development Officer, for her willingness to work very closely with the members of the Partnership and without whom, the event would not have been possible and for her work in compiling this report.

## **Introduction**

A rapid health impact assessment (HIA) was conducted on the Healthy Living Centre based in Corwen in Denbighshire. The Healthy Living Centre is used by all members of the community as a resource and is operated by the Healthy Living Centre Partnership – which includes partners such as Denbighshire County Council, Denbighshire Local Health Board, Denbighshire Voluntary Services Council and MIND. Appendix One describes the partners and the work of the Healthy Living Centre in Corwen. The geographical area that the HLC services is approximately 8 miles in radius and is of a highly rural nature – with the associated impacts of access to services and transport issues. The HIA was used as a basis to inform and improve the services of the Centre so that the partners can plan for funding and services to be offered in the future.

The HIA looked at the positive and negative health and well being impacts of the Centre and its services on the local community. The HIA aimed to contribute to an Action Plan in order to inform the partnership of its priorities and needs with regard to this plan. It provided an opportunity for key stakeholders to provide practical recommendations on how the centre could further improve the health and wellbeing of the population and how any actions could be implemented.

It encompassed a day long participatory stakeholder workshop on January 20<sup>th</sup> 2007.

A list of the attendees is included (Appendix Two).

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

The stakeholder group was wide and varied and encompassed not only representatives of the Partnership but also local community members, Centre workers, health professionals and representatives of the Local Health Board and Local Authority. The group considered who within the local community the work of the Centre affected – and particularly any vulnerable groups in the population.

## **Stage One**

### **Potential Implications on Health and Wellbeing**

This table is a summary of where the group identified strengths and weaknesses (i.e. positives/negatives) of the Centre/Partnership and its activities, in relation to the wider determinants of health. It focussed on vulnerable groups as well as the wider population (Appendices Four and Five). The HIA was based around the framework of ‘what has worked well’ and ‘what could be improved’ at the HLC. The overarching aim was to maximise the positive health implications and minimise /negate any potential negative impacts.

# Health and Well-being Determinants for Corwen Healthy Living Centre

## Health Impact Assessment

Held 20<sup>th</sup> January 2007

### Lifestyles

<b>Positives Identified</b>	<b>Negatives Identified</b>
Food and Mood workshop run MIND/Health Visitor  Kitchen (funded by IHF,WAG) Cook and Eat (Funded by IHF,WAG)  Glyndyfrdwy Good Companions provide a healthy lunch  Food Tasting and introducing food from different cultures to the young by Food & Nutrition Youth Worker (IHF,WAG)  HLC promotes Healthy Behaviours: Alcohol Drugs Relationships  Accredited YP courses based on local needs Local presence ensures relationships developed with users  (MIND) Physical Activity Tasters i.e. Yoga encourage confidence building (MIND) provide Benzodiazepine Service and Suicide Prevention Smoking Cessation service	Lack of space is a barrier to services. The HLC is full to capacity and have to turn people away - thus limiting the project  Yale Suite is not always in use (6 hours per week). Computers in Suite not always in use. MIND looking at purchasing computers  Youth Service have no space in centre for the Digi Lab facility Perceived increase in demand by all partners for IT  Clwb Y Berwyn Lunch Club full to capacity due to lack of space (Health and Safety regulations)

<p>External Referral – Signposts GP Services</p> <p>Talks given to local people by police etc.  Young Persons Health Service which addresses:  Healthy Sexuality  Tobacco and Alcohol. This is a targeted provision for Young People who do not want to go to their GP</p> <p>Relate provide Advice/Counselling for Relationships including Sexual Activity and Sexual dysfunction</p>	<p>Both MIND and Relate referred to lack of referrals by GPs</p>
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**Recommendations/Gaps**

- Tie into Primary Care Estates Strategy – Primary Care Centre redevelopment will have a couple of rooms available. Explore any other buildings available
- Outgrown Building - DCC officers to meet to discuss 2 options: Pavilion and Life Long learning Centre
- Free Up space in Yale Suite (not IT) - E-mail Elaine for access
- Actively pursue GP's in their 'protected time' and access this

## Social and Community Influences on Health

Positives Identified	Negatives Identified
<p>Proportion of Welsh speakers is rising Clwb Cymry raises – Cultural Awareness Also opportunity for young people to speak &amp; socialize in the Welsh Language</p> <p>Ysgol Feithrin aim to give confidence to parents to speak Welsh and influences the use of the Welsh language in the local primary school</p> <p>Welsh Language Class (Sadwrn Siarad) Languages in the EU</p> <p>Open College Network Yale College promotes local pride via courses which encourage social contact networks</p> <p>No one is refused access to services ie MIND Women’s Aid provide courses which are open to all women and raise awareness of and facilitate social networks and provides a mutual support group for women.</p> <p>Reduces stigma of issues such as domestic violence, mental health problems and improves peoples perceptions</p> <p>Volunteers generated by Partners</p> <p>MIND Offer service user involvement which informed the local</p>	<p>Young People suggest it is not ‘cool’ to speak Welsh language – need to address this gap/perception</p> <p>Ysgol Feithrin (Playgroup) highlighted the lack of parents who speak Welsh, which was also highlighted by a programme on Radio Cymru.</p> <p>Welsh speaking recruitment also an issue</p> <p>There is a barrier that excludes those with children as there is no childcare provision. This also affects the timetable of the centre (i.e. picking up children after school at 3pm)</p> <p>Fund holders require evidence of targeting, but unable to access building in the evening. It is full to capacity (Links to lifestyles)</p> <p>Still a lack of volunteers. More needed</p> <p>Lack of venue in Corwen for Speech and Language Therapy which can be offered on a 1 to 1 basis by Royal Alexandra Hospital Relate Family counselling not available in Wrexham (need local</p>

<p>needs. Also looking at new service offering Mental health advocacy Relate offer Counselling Also young people, same sex etc. working with NCH re children from separated relationships showing aggression</p> <p>Youth Service – Citizenship Activity HLC promotes social networks in all age groups and helps to avoid social isolation. Caledfryn helps combat economic isolation. HLC is a safe place for young people to meet</p>	<p>venue)</p> <p>Need to promote active participation/engagement MIND has evidence that if HLC is not in existence, then people are 'confined to barracks'</p>
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## Recommendations/Gaps

- Welsh Language Scheme- all statutory bodies have Welsh Language Scheme report to them/Estyn recommendation in Action Plan
- Look at own Welsh Language Policy
- Youth Service to look at adding child care in as a programme cost in bid.
- Mini Project required to look at:
  - -Capacity
  - -Current Provision/timetable
  - -Future Provision
- Possible way forward may be to look at Convergence funding
- Use DCC Lotus Notes general notice board within DCC to highlight the need for volunteers. Or put a note in payslips to generate interest and raise the profile of HLC. Use the Women's Aid Volunteer Open Evening or the DVSC Volunteer Bureau but depends on people coming forward.
- MIND offered to manage counselling. Sally Baxter to come back to Carol Evans. There is a generic gap in counselling for all ages (Relate and Mind identify this). Could tie in with Yale trainee student counsellors who need placements
- Develop a mechanism for involving young people via a Youth Council or other forum
- There is a need for all partners to gather/collate evidence to support the HLC funding bid



## Living/environmental Conditions affecting Health

Positives Identified	Negatives Identified
<p>Provides Community Safety</p> <p>Children/ Young People designed Logo &amp; Mosaic on the outside of the HLC building</p> <p>Yale stated workers enjoy experience 'buzz' of coming to Healthy Living Centre</p> <p>HLC set in a beautiful area</p> <p>On main road – easy to find</p>	<p>Lack of access, shortage of car park space. Can lead to injuries ie unauthorised parking on the kerb outside. DCC may introduce Charging in car park. This barrier to access may have an impact on services</p> <p>Lack of space in building</p> <p>Geography of Corwen Top/Bottom: Flooding</p> <p>Appearance of building could be improved – signs and a facelift required. Confusion between Healthy Living Centre and Health Centre</p> <p>Access to building and access to toilet for the disabled is an ongoing issue (see living/environmental conditions)</p> <p>Malfunctioning heating – constantly hot in the office</p>

### Recommendations

- Lobby Elected Member (agenda item for a Partnership meeting)
- Take photos (evidence the problem)
- LHB to raise the issue of spatial planning via discussions with DCC
- Involve Young people in improving appearance of Centre

## Economic conditions affecting Health

Positives Identified	Negatives Identified
<p>Credit Union gives access to financial advice            Yale – increase employability of people            (MIND) – Plas Newydd Llangollen offering Training and employment opportunities for service users including Corwen            Youth Service exploring NEAT project in other areas of Denbighshire including ICT infrastructure and outreach programmes            Perceived large gap for over 25's            HLC provides jobs for local people            Local people have benefited from HLC</p>	<p>Lack of affordable homes            Lack of transport            Lack of local jobs for young people            Youth Service – lack of range of courses, need to travel to Wrexham.            Lack of outreach welfare rights service (gap in partnership)            Ysgol Feithrin have offered placement opportunities, but no take up.            Unemployment benefit – have to sign on in Wrexham, lack of employment facility/jobcentre or services offering CV help, interviewing Skills etc.            Careers Wales wanted to offer course here, but no space (see access and quality of services)            No availability of mobile unit or jobcentre.</p>

Recommendations/Gaps
<ul style="list-style-type: none"> <li>• Link with expansion (see lifestyles )</li> <li>• In the future more partners and services are required (encompass this in economic section too)</li> <li>• Link in to mini project</li> <li>• Provision of economic 'education' via informal learning</li> </ul>

## Access and Quality of Services

Positives Identified	Negatives Identified
<p>Good Link between Young Peoples Health Service and GP Services</p> <p>Existence of MIND/Rural Outreach Service mobile information unit (DORIS)</p> <p>Minibus much in demand</p> <p>Glyndyfrdwy Good Companions have Community transport scheme.</p>	<p>Lack of GP referrals</p> <p>Lack of access to Health professionals in GP Practice (it's a busy Practice) MIND and relate identify this. (see Lifestyles)</p> <p>Lack of space in Health Centre</p> <p>DORIS is very busy - used by all partners and others.</p> <p>Issue of staffing of minibus through changes in regulations. A D1 test could lead to a need for increased funding for a course for minibus test. Lack of driver training.</p> <p>Used a lot by those outside of partnership therefore restricts partnership access.</p> <p>MIDAS course not recognised, shortage of volunteers to drive</p> <p>Rural issue highlights constraints for young people. They rely on parents in order to go out and come home.</p> <p>Overall lack of co-ordinated transport in the area</p>

Recommendations/Gaps
<ul style="list-style-type: none"> <li>• GPs have protected time in Centre (find out via Sally Baxter)</li> <li>• LHB trying to address this</li> <li>• Need Daughter of DORIS (Mobile shop effect)</li> <li>• Mini project required to look at minibus provision i.e. volunteers and access.</li> <li>• Look also at Community Transport Association to provide admin for all transport co-ordinated by HLC.</li> <li>• Due to rurality issue the Youth Service is looking at Young People travelling independently</li> <li>• Find out about Bus Stop Initiative in Corwen</li> </ul>

## Macro-economic, Environmental and Sustainability factors

<b>Positives Identified</b>	<b>Negatives Identified</b>
Ideal of HLC ties in with 'Making the Connections' Consortium funding through Design for Wales	Lack of funding with the policy Flooding possible by the nature of the geography – Corwen a high risk area HLC not a current 'trend' and many are closing down National Perception of HLC's is leading to no recurring funding Reduction in future lottery funding is affecting potential funding streams Not enough recycling provision within the HLC No HLC co-ordinator centre based as agreed with NOF

<b>Recommendations/Gaps</b>
<ul style="list-style-type: none"><li>• Partnership acknowledge not just one funding bid is necessary</li><li>• Business plan with each partner identifying updated situation &amp; requirements</li><li>• Lobbying and Presentations to strategic groups</li><li>• Gareth Mawby – currently £150,000 funding required, suggest bring it to £100,000 as a minimum case scenario</li><li>• Explore other funding arenas</li><li>• Centre co-ordinator to co-ordinate day to day activity.</li></ul>

## **Recommendations**

A number of recommendations were agreed by the group: The main themes for the document which the Partnership Board need to consider are as follows:

- 1 Establishing a 'Mini Project' to look at the capacity of the HLC, the current provision/timetable of the Centre and any the future services to be provided from it. For example, the Youth Service to look at adding child care in as a programme cost in any bid.
- 2 Funding is a key issue. The Partnership acknowledges not just one funding bid may be necessary and that there is a need for all partners to gather/collate evidence to support the HLC funding bid. That there is a need to explore other funding arenas and that a possible way forward may be to look at Convergence funding
- 3 The Partnership recognises that there is a need for a Strategic Business Plan with each partner identifying updated situations and requirements.  
Lobbying and Presentations to strategic groups and elected members is essential.
- 4 Tie development of the HLC into the Primary Care Estates Strategy. The Local Health Board will raise the issue of spatial planning with Denbighshire County Council and facilitate links with the Community Health Centre.
- 5 The ruralness of the Corwen area is an issue that needs to be addressed because of the constraints that this places on the activities of the HLC. There is a need for a 'Daughter of DORIS' which is the Rural Outreach Service' mobile information unit. A Mini project is required to look at minibus provision i.e. volunteers and access. Ties need to be strengthened with the Community Transport Association in order to provide administrative support for all transport co-ordinated by HLC.
- 6 Overall, there must be enhanced working between the different sectors that work within the Partnership. To tie together the aims of the Healthy Living Centre with those of the Local Authority, Local Health Board and other sectors in order to provide better access to services for the community as a whole.

## **Conclusion**

The group considered that the implementation of the above recommendations would have the potential to improve health and wellbeing and reduce health inequalities within the local community via delivery of services through the Healthy Living Centre in Corwen. It will be used as a basis for work within the Partnership to produce a new Action Plan and start a search for funding during the autumn of 2007. It has given a more defined and realistic vision of what can be achieved by the Centre and the Partnership. Indeed, the work on the day has already led to some positive outcomes by focussing minds on the health and wellbeing implications of the work of the Centre.

The findings of the day will be disseminated to the Partnership Board, who commissioned the HIA, and Denbighshire as a whole via the Rural Outreach Service Conference in May. It was encouraging that all partner agencies were enthusiastic in the commissioning and undertaking of the HIA. Furthermore, all participants have expressed that this was a positive and useful experience. The one day session has demonstrated that there is a wealth of ideas in relation to this area and further HIA work could be undertaken in the future.

It is anticipated that these findings will form the basis of proposals to the Local Health Board and partner organisations and potential funding sources in order to further the project and benefit the health and wellbeing of the local population.

For further information on the Healthy Living Centre and its Partnership or this HIA, please contact:

[HLCAdmin@denbighshire.gov.uk](mailto:HLCAdmin@denbighshire.gov.uk) or [Liz.green@wch.wales.nhs.uk](mailto:Liz.green@wch.wales.nhs.uk)

## Appendix One

A total of £693,492 was received, over a five year period, to promote health and well-being in Corwen and the surrounding area

### The main aims are to:

- Improve the quality of life in Corwen
- Address the needs of the disadvantaged
- Encourage community participation
- Enable people to take care of themselves and their families, and
- Become active and valued citizens in their community

The partnership consists of the following members:



It doesn't have to be this way!

CYNGOR GWASANAETHAU  
GWIRFODDOL SIR DDINBYCH



DENBIGHSHIRE VOLUNTARY  
SERVICES COUNCIL



CYNGOR  
Sir Ddinbych  
Denbighshire  
COUNTY COUNCIL



O blaid gwell  
iechyd meddwl  
For better  
mental health



Clwb y Berwyn

# Y Bartneriaeth The Partnership



GLYNDYFRDŴ  
GOOD  
COMPANIONS





Appendix Two

**Facilitator: Liz Green, Welsh Health Impact Assessment Support Unit**

**Venue: HLC, Corwen, Denbighshire**

**Attendees**

Sian Bennett	Health Policy Officer, DCC
Siwan Jones	Senior Public Health Practitioner,
Carol Evans	Rural Outreach Service/Vale of Clwyd Mind
Roger Ellerton	Youth Service, DCC
Sally Baxter	Chief Executive, Denbighshire LHB
Elaine Roberts	Yale College
Roger Farnham	Administrator, HLC
Carol Morris	Youth Service, DCC
Nigel Roberts	Councillor (Corwen)
Emyr Williams	Denbighshire Voluntary Services Council
Anita Jones	Relate
Elen Jefferies	Glyndyfrdwy Good Companions
Iona Compton	Glyndwr Womens Aid
Gwen Jones	Ysgol Feithrin
Cari-Sioux Hodgkinson	Denbighshire Youth Service

## Appendix Three

### **Evaluation of Corwen Healthy Living Centre HIA**

**Date: 20<sup>th</sup> January 2007**

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

- To identify strengths and gaps and a basis for shared vision for future funding bids (10)
- Review/evaluate Healthy Living Centre and identify implications for sustaining and developing this and other linked local services. Interested in participating in HIA process . Very useful session, both in terms of HLC services and experience of HIA. Very well facilitated – thank you(9)
- To connect with other partners working at Corwen HLC and to hear issues concerning the future continuation of the centre (9)
- To focus on what we have achieved, what areas we have gaps and how we can move forward. It has been enlightening (9)
- Well organised. Outcomes have been achieved ie produce a useful document and consolidate action to date and future direction. (9)
- A very interesting and useful session. I hope it helps the centre get more funding for the future (9)
- Expectations vague but hoping for some optimism about future of Centre. A good 'scientific' process identifying strengths and weaknesses of Partnership – will provide a wonderful document to support any future funding bids. Generated a lot of ideas. Brilliant facilitation. Look forward to results (9)
- To enable partners to voice their fears/expectations for the future of the HLC. This it has done! Thanks!! (9)
- Good and useful information for future funding gained (8)
- That we would have a useful document to use when we are accessing funds in the future for the Partnership which highlighted our achievements (8)
- Very successful meeting. All aspects of funding was discussed. Advantages and disadvantages of the running of the Healthy Living Centre at Corwen. A lot of useful comments (8)
- The workshop went very well and I felt that the LHC may have a chance in future (8)
- Interesting and eye opening. There are so many organisations (Partners) who have greatly benefited and it would be wonderful if they could continue to do so (8)

## Appendix Four

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.)

<b>Health and well-being determinants checklist</b> <b>Please note that this list is a guide and is not exhaustive.</b>	
<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>

## **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.

## **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:**

**Liz Green**  
**Health Impact Assessment Development Officer**  
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**Website for the Welsh Health Impact Assessment Support Unit –**  
**[www.whiasu.wales.nhs.uk](http://www.whiasu.wales.nhs.uk)**