Sefton : Our Lives Our Health
Sefton Strategic Needs Assessment 2012: Consultation Report
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**Annex 2** – Planning for Real ® exercise – Freehand responses
Feedback from the Consultation and Engagement on the Sefton Strategic Needs Assessment 2012

1. Summary Report

This report provides a summary of the findings from the consultation and engagement process undertaken on the Sefton Strategic Needs Assessment 2012. The consultation and engagement process took place over a twelve week period from August until October 2012, and included a wide range of methods including events in parks, workshops, meetings, focus groups; a telephone survey and a web based on-line survey. In total, in excess of 1000 people engaged with the process. Regardless of whether people are old, young, disabled, living in the north or south of the Borough, there were some common themes that repeatedly emerged during the consultation and engagement process:

- The communities of Sefton agreed that the emerging priorities were the right ones for Sefton
- The majority of people agreed that their needs would be met within these priorities
- The majority of people expressed how difficult the task was to identify and agree priorities
- People and communities found the processes engaging and inclusive

Messages from the consultation and engagement process for the Shadow Health and Wellbeing Board

The overall feedback with regard to the priorities for health and wellbeing can be summarised as follows:

- People of all ages wanted *choice and control over their lives*, they wanted to be listened to in order to improve services, including end of life services, and they want support to remain in their own homes
• **Maintaining independence** by supporting people to remain well, with care close to home, improvement for primary care through virtual wards, good access to public transport and early intervention, prevention and diagnosis for those with limiting long term illness and / or disabilities

• **Combat social isolation** through access to local services, accessible information and support networks

• Access to **work, training and volunteering** for all ages and abilities, training that leads to real jobs

• Access to **affordable, good quality housing** with support for care leavers and young parents

• Services provided from children’s centres which **support vulnerable families and children, in particular those in the poorest neighbourhoods**, affordable childcare and promote friendships and relationships

• **Primary health services need to be local and accessible**, reduce waiting times for GP appointments, accessible walk in centres, focus on early diagnosis to prevent cancer, heart disease and stroke and improve falls prevention services

• **Equity in drug treatment and mental health services**

• **Protect children and adults from harm**, increased police foot patrols, tackle anti-social behaviour and hate crime

• **Accessible community information and support** is needed for people leaving prison and their families, families on benefits and the impact of Welfare Reform, carers, people with disabilities, for people for whom English is not their first language and to support people to manage their own conditions
Key findings from the on-line survey

A total number of 220 people completed the on-line survey. The top priorities for people completing the on-line survey are as follows:

- Find different ways to support people early to avoid them needing expensive acute services and surgical procedures
- Focus services on ensuring all children have a positive start in life
- Promote services and lifestyles that allow older people to remain in their homes and the community longer
- Support local people to improve their skills, participate in training, undertake volunteering and gain employment
- Diagnose illness earlier to prevent cancer, heart disease and stroke and treat these conditions sooner

Key findings from specific groups:

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<th>Organisation</th>
<th>Key Findings</th>
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<tr>
<td>People with learning disabilities</td>
<td>• <strong>Avoiding social isolation</strong> - value the services used and the opportunities to socialise and meet up with friends. Would like more opportunities to socialise on evenings and weekends</td>
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<td>• <strong>Enjoying independence</strong> - transport and travel is important to have independence. Having a bus pass is essential for this. More travel planning is needed</td>
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<td>• <strong>Support with some daily tasks</strong> – help to understand bills, bills from service providers, more support for people with complex needs</td>
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<td>• <strong>Accessing health services</strong> – value health checks, but consistent standards of service are needed. Waiting times for appointments and to see practitioners could be improved</td>
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| People with learning disabilities                | - **Value opportunities to do work experience and voluntary work** – would like to do more  
- **Value emergency services** - particularly Fire Service for fire checks, but mostly Police for hate crime awareness and E-cards  
- **Choice and control** – able to make some decisions and choices, but would like to do this more                                                                                                                                                                                                                         |
| Children in care and care leavers                | - **Housing** - good quality affordable housing is important as young people move into accommodation at a young age. Keeping tenancies is not always possible without support. Experience of poor quality housing which was damp  
- **Work and training** – lack of appropriate training for the jobs that are available. People are being trained for jobs that are not there  
- **Wellbeing and health** – the importance of healthy food and vegetables, but healthy food is not cheap. Free fruit and vegetables would help. More walk-in centres are needed – they are more likely to be used than GP surgeries as the hours are more flexible. Found it difficult to access the existing walk-in centres from Southport as transport was poor  
- **Choice and control** - young people are being listened to but this needs to happen consistently. Services need to signpost young people to the correct services straight away… not ‘passed from pillar to post’  
- **Community information and support** - support financially for first-time/young parents with rent and childcare costs for young parents that are living alone or to enable young people to get their own home |
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<th>Organisation</th>
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| Equalities Standing Group            | • **Community information and support** - access to information and services for people with disabilities and for those for whom English is not their first language  
• **Support for people who are lesbian, gay, bisexual and transgender** – for adults and young people, including hate crime  
• **Childcare** – needs to be accessible and affordable  
• **Wellbeing and health** - services that are provided from within children’s centres are valued  
• **Older people** – access to services and information, networks, social isolation |
| Parents and carers                    | **South Sefton Parents/Carers:**  
• **Crime and safety** - police foot patrols are critical in the areas where there has been recent gun crime. Families are scared and are reluctant to let their children play out. Police foot patrols can act as a deterrent  
• **Leisure** - parks provide safe places for families  
• **Wellbeing and health** – services in children’s centres support vulnerable families. They are often a lifeline providing a safe supportive environment, working with a range of services  
**Central Sefton Parents/Carers:**  
• **Leisure** - parks provide safe place for families, but there are concerns over dog fouling  
• **Wellbeing and health** – services in children’s centres support parents, providing affordable childcare  
• **Crime and safety** - police foot patrols are needed to deter anti-social behaviour. Concerns about recent gun crime and drinking on the street |
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<td><strong>North Sefton Parents/Carers:</strong></td>
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<td>- <strong>Wellbeing and health</strong> – children’s centres are important for friendships and relationships</td>
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<td>- <strong>Housing</strong> – concerns over private landlords</td>
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<td><strong>Drug action team service users</strong></td>
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<tr>
<td>- <strong>Wellbeing and health</strong> – there are not enough drug treatment services for people in recovery. They are important for wellbeing. Relationships with workers are key. There are more adults and young people drinking, with people often moving from street drugs to alcohol dependency. People are expected to recover from drug and alcohol issues in a drug hostel – this makes them vulnerable</td>
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<tr>
<td>- <strong>Better support and access to services</strong> - earlier diagnosis and support, when treating drug addiction, for example discuss stopping smoking marijuana then discuss stopping smoking cigarettes as well; don’t just ignore, look at wider health issues not just those relating to drink and drugs. Care closer to home is important. Whilst walk-in centres are great for homeless people and people on the move, people should be able to access the GP where people have no fixed address</td>
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<td>- <strong>Mental health services</strong> – lack of mental health services. There is an inequity in services in north and south of the borough (more needed in Southport). Waiting times are too long to get an appointment and in between appointments. Commissioning – very important for services required in the future, young people are using very different drugs and these will result in more mental health issues and the need for more services in the future</td>
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| Drug action team service users | - **Support for carers and older people** – early identification of support is needed for carers. Young carers are caring for adults who are dependent on alcohol and/or drugs. Some people who are dependent on alcohol/drugs need a carer. Older people should be supported to live at home longer  
- **Work and training** – more local jobs for local people, particularly young people. There is more training, guidance and voluntary work needed for people in recovery to help develop life skills and work experience – a wider acceptance is needed. More support for parents to go back to work  
- **Community information and support** – more welfare rights advice should be available, especially with the proposed cuts and reductions in benefits  
- **Housing** – concern that people will be asked to move away from family and friends and the support mechanisms as they will be required to down-size. Housing for young people is also needed. Concern that there are too many empty homes and that more properties are needed for the homeless  
- **Crime and safety police** – more foot patrols are needed (South) as more police patrols on the streets will help people feel safe. Perception that the PCSO’s are not respected by young people |
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<td><strong>Young people</strong></td>
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<tr>
<td>Leisure</td>
<td>- more youth facilities are needed across the borough. They would like the skate park in Southport to be improved and young people in Southport value the Coast. Across the borough young people value parks</td>
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<td>Community information and support</td>
<td>- young people would like to do more active things, but often don’t know about facilities, e.g. bikes/skating/swimming/football. The cost of hiring sports complexes, i.e. football pitches is also a barrier</td>
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<td>Work and training (and education)</td>
<td>– young people need experience to get a job but it is difficult to get experience. Young people think that support in education is very important for all young people</td>
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<td><strong>Prisoners</strong></td>
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<tr>
<td>Community information and support</td>
<td>– support is needed when leaving prison, particularly on benefits. Credit Unions are an important service for offenders. Welfare Reform and financial issues affecting all people, but particularly vulnerable people. There is a need for clear advice and help</td>
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<tr>
<td>Work and training</td>
<td>– jobs are important for ex-offenders but it is difficult to get a job due to criminal record, which means that there is a chance that they revert back to crime. Training for young people is important</td>
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<tr>
<td>Leisure</td>
<td>– activities for young people are important to act as a deterrent</td>
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<tr>
<td>Wellbeing and health</td>
<td>– services in children’s centres are important because they provide support to families and of people in prison. Mental health support is needed both in and outside prison</td>
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<td>Older people</td>
<td>• <strong>Transport</strong> – older people use public transport to access services and to socialise. In some areas of the borough (Maghull), services finish at 6.00pm, which means it is difficult to get back from social events or doctors’ appointments. Bus passes are also very important to enable people to travel to socialise, shop and attend services.</td>
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<td>• <strong>Wellbeing and health</strong> – walk-in centres are valued, but there is a need for one in Southport and Maghull. It is difficult to get out of hours appointments and public transport to Litherland is very poor.</td>
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<td>• <strong>Carers</strong> – there are ‘hidden carers’. Practitioners need to be more aware of carers and their status in order to offer support/signpost if required.</td>
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<td>• <strong>Prevention services</strong> – early identification and interventions to help increase life expectancy and quality of life - not just clinical – five steps to wellbeing – start early.</td>
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<td>• <strong>Duplication of services</strong> – services should be provided in the community but better coordination of services is needed to avoid duplication.</td>
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<td>• <strong>Access to services</strong> – getting a GP appointment is hard. The cost of dental services for older people is too high. There also needs to be more communication and consultation about relocating services. People are being sent to Aintree for hospital appointments, but public transport is poor.</td>
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|                   | • **Community information and support** – need to cater for older people who are socially isolated and facing financial hardship, but also continue to provide opportunities for those that are active and well. Men are more likely to be socially isolated. Essential support mechanisms are befriending and signposting.
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<tr>
<td>Older people</td>
<td>• <strong>Access to information</strong> – some older people do not have access to a computer. Concerns about how they will find out information and get involved</td>
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<td>• <strong>Work and training</strong> – if jobs are provided for young people of the area, it would help to bring more money into the area. There should be more employment opportunities for people aged 50 – 65 years.</td>
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<td>• <strong>Housing</strong> – some older people want to downsize their properties to release equity or to help family members, but difficult to get appropriate properties</td>
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<td>Sefton Carers Centre users</td>
<td>• <strong>Wellbeing and health</strong> – concerns were raised by carers that if they ‘stopped working’ (i.e. went on strike), who would pick up this work/service?</td>
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<td></td>
<td>• <strong>Numbers of carers</strong> – There are considerably more carers in the borough aged over 65 years than shown in the 2001 Census data (6,600). The 2001 Census revealed that there may be as many as 32,000 unpaid carers in Sefton.</td>
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<td>• <strong>Carers support</strong> - carers assessments don’t always mean people will get identified support, including support for carers who are isolated or lacking in the support mechanisms</td>
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<td>• <strong>Mental health services</strong> – differing levels of support for mental health services – perceived north/south divide, with the north not experiencing the same level of service</td>
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<td>• <strong>Access to services</strong> – important for carers to see the same GP – one who understands carers’ concerns and knows what their caring responsibilities are</td>
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<td>• <strong>Choice and control</strong> - in end of life services</td>
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<td>• <strong>Work and training</strong> – young people should be able to have jobs in Sefton, rather than be exported to Merseyside or other regions. The development of the ‘Super-Port’ will be a great asset</td>
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| Sefton Carers Centre users | - **Housing** – feel that too much of the area is designated ‘green space’, inhibiting housing developments, although current housing stock could be upgraded, instead of new housing being built. Housing conditions need to be more habitable  
- **Community information and support** – Welfare Reform and financial issues affecting all people, but particularly vulnerable people. There is a need for clear advice and help |
| LINks | - **Wellbeing and health** – need to ensure adequate help and engagement for carers of all ages. Support for parents and vulnerable people is also important. End of life care is really important as it has an effect on psychological care. There is a need for more support for 16 – 40 year old individuals  
- **Commissioning** - concerns around budget cuts – especially for those who have equipment supplied to their homes, and the risk/impact assessments undertaken on all services cut, or threatened with cuts. The importance of risk assessments being undertaken when reducing resources  
- **Transport** – bus routes are not always accessible and concern was raised about people having to make choices in difficult economic times - people may no longer have cars and would rely on public transport. Bus passes were valued, but bus fares for parents and their children can be high, so they miss appointments. Consideration should be given to transport when planning services  
- **Work and training** – jobs for young people are needed to help keep them occupied and because there will be a need for tradespeople in the future  
- **Community information and support** – there are opportunities for people to have their say about things, but more awareness is needed to let people know how. |
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| Health & Social Care Forum       | • **Community information and support** – Welfare Reform and financial issues affecting all people, but particularly vulnerable people. There is a need for clear advice and help  
                                | • **Transport** – better transport links are needed as waiting times between buses can be too long (often an hour). Some bus services end at 6.00pm which results in people not going out at night. Good public transport is needed to enable people to get to work, to income generate  
                                | • **Wellbeing and health** – the north of the borough has less mental health support services than the south. Concern expressed around the capacity of hospitals when they become Foundation Trusts – particular concern about aftercare and whether commissioners will go for the cheapest care?  
                                | • **Youth clubs** - are often full and there are no new places so this results in children getting into ‘trouble’ on the streets |
| Every Child Matters Forum        | • **Wellbeing and health** - that facilities for older people in Sefton were much better than those for young people.  
                                | • **Mental health** - issues for young people  
                                | • **Levels of obesity** - and young people not exercising  
                                | • **The safety of children** - living in Sefton and the services offered to this group  
                                | • **Work and training** - the gap that needed filling in relation to areas of poverty in Sefton  
                                | • **Better jobs** - in order to attract new graduates  
<pre><code>                            | • **The impact of poverty** - on young people |
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| Sefton Borough Partnership Operations Board            | **Resilience** – need to understand what deprivation means, as some of what may be thought to be our most deprived communities are more resilient  
  **Social value** - importance of social value in commissioning  
  **Learning from the past** – important to learn lessons from the use of Neighbourhood Renewal funding, whether what was spent was on the right things and if it made a difference. Need to learn from the past to ensure in times of reduced resources we focus on the right things  
  **Satisfaction levels** – people in Sefton are generally satisfied as evidenced in the Strategic Needs Assessment. Need to understand the link between low aspiration and satisfaction, and whether high aspiration leads to lower satisfaction if not met |
| Staff and partners through visioning events            | **1. Priority**  
  - Make the shift to early support and prevention whilst balancing immediate demands  
  - Community involvement/responsibility  
  **Goals**  
  a) Better use of existing resources  
  b) Engaged/inclusive community – community responsibility  
  c) Reduce energy use and minimise waste to create a low carbon future  
  d) To educate, encourage and enable environmental sustainability  
  e) Reduce the impacts of climate change |
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| Staff and partners through visioning events | **2. Priority**  
- How to attract business, given Sefton’s infrastructure and land  
- Employment and skills gaps  
- How to create the right environment (housing, jobs, amenities, transport) to attract and keep young families  
**Goals**  
a) To invest in the City Region growth sectors  
b) To upskill the local workforce  
c) To support local people to innovate and promote new business and enterprise  
d) To ‘create’ and promote local jobs for local people  
e) To create conditions for economic growth  
f) Improve the standards and safety of our transport network and infrastructure  

3. **Priority**  
- Health and wellbeing for everyone  
**Goals**  
a) To enable all people, including people with disabilities and those with limiting long-term conditions, to live well and maintain independence  
b) Cleaner, safer, greener spaces to live, work and play  
c) To safeguard the wellbeing of children, young people and vulnerable adults  
d) Develop high quality and affordable housing |
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| The Public Health Team also provided a collective response:  
- More of a balance is required between ‘people’ and ‘place’ issues, and particularly a greater focus on the underlying factors for needs concerning the ‘place’ of Sefton  
- The Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS) must ensure they address vulnerable groups. These groups will be different according to the subject matter – for example, vulnerable groups for older people’s issues will be different to those for children / families  
- When prioritising issues (the process between JSNA and JHWS) it will be essential that potential inequalities are factored in  
- A life course approach to prioritisation for the JHWS could mitigate against the potential to miss any vulnerable groups |
| Formby Locality Meeting | - The group felt that a lot of issues are generic across Sefton and felt that alcohol might be a problem in one area and long-term conditions in another |
| Maghull CCG Locality Meeting | - A day care centre based in Maghull is needed  
- Carers for the elderly are stretched  
- Public transport links are poor  
- Access to GP surgeries in Maghull via public transport is inadequate. i.e. a large elderly population who use public transport, but cannot access GP surgery till after 9.30a.m. as bus passes cannot be used before this time. Increased pressure on surgeries and reduces choice for patients  
- Pacemaker checking service needed within Sefton |
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<tr>
<td>Maghull CCG Locality Meeting</td>
<td>• Nearest service is in Broadgreen Hospital</td>
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<td>• Sporting facilities to be reviewed in Maghull</td>
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<td></td>
<td>• Waiting time for Active Sefton is too long</td>
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<td>• Weight loss service inadequate in Sefton</td>
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<td>Bootle Locality Group</td>
<td>The group felt that the themes within the JSNA were very relevant for the Bootle area but the following areas were of great concern:</td>
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<td>• A big issue regarding alcohol users, practices seem to come across more alcohol cases now than drug misuse</td>
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<td>• Mental health is a real issue for Bootle</td>
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<td>• More people with personality disorders, often linked with alcohol abuse; there are no services available in Sefton for people with a diagnosis of personality disorder</td>
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<td>• Services are limited to the IAPT programme and not much at secondary care</td>
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<td>• Services should be tailored to the needs of each locality</td>
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<td>Health Management Board Neurological Centre - Walton</td>
<td>• How rehab services back in the community will be delivered in times of budget cuts</td>
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<td>• Coordination of a health improvement strategy</td>
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<td>• Research and patient conditions</td>
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<td>• Engaging with the Health and Wellbeing Board in the future</td>
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<td>Southport and Formby Clinical Commissioning Group (SFCCG) Big Chat Event</td>
<td>Overall of those who attended the event...</td>
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<td>- 80% felt the event gave them a good understanding of what the changes to the NHS will mean for Southport and Formby</td>
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<td>- Around two-thirds of people agreed with what SFCCG is aiming to do to</td>
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<td>- Nearly 80% of people thought the event was good or very good</td>
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<td>- Over two-thirds of people felt their views had been listened to</td>
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<td>- Over-two thirds of people wanted to get involved in their local NHS</td>
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<td>Things that people felt would further improve health in Southport and Formby included...</td>
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<td>- For the many different health services to work better together, to make people’s care and treatment easier</td>
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<td>- For patients to be better informed by those services involved in their care, about their care and their treatment choices</td>
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<td>- For Southport and Formby residents to be kept updated about the work of SFCCG, and for SFCCG to be open and honest about the way it works</td>
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<td>- To continue to invest in programmes to prevent poor health to keep people out of hospital</td>
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<td>- For more services – like diabetes clinics, children’s immunisations and physiotherapy - to be provided closer to home rather than in hospital, with better use made of existing community facilities like Ainsdale Centre for Health and Wellbeing</td>
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| Southport and Formby Clinical Commissioning Group (SFCCG) Big Chat Event | • For Southport and Formby residents to have ‘real’ involvement in shaping future services and priorities, especially when there are difficult decisions to be made - through more Big Chat style events, talking directly to people who use services, web-based feedback (like email and social media) and more traditional methods (such as leaflets, newsletters and local newspapers)  
• For SFCCG to support those who find it difficult to voice their views, so they too are able to have their say about their health and health service |
| South Sefton Clinical Commissioning Group (SSCCG) Big Chat Event | Overall of those who attended...  
• Over three-quarters felt the event gave them a good understanding of what the changes to the NHS will mean for South Sefton  
• Around two-thirds agreed with what SSCCG is aiming to do  
• Nearly 90% thought the event was good or very good  
• Nearly three-quarters felt their views had been listened to  
• Over two-thirds wanted to get involved or be kept updated about their local NHS  
Things that people felt would further improve health in south Sefton included...  
• For the many different health services to work better together, to make people’s care and treatment easier  
• For patients to be better informed by those services involved in their care, about their care and their treatment choices  
• For south Sefton residents to be kept updated about the work of SSCCG, and for SSCCG to be open and honest about the way it works |
<table>
<thead>
<tr>
<th>Organisation</th>
<th>Key Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Sefton Clinical Commissioning Group (SSCCG) Big Chat Event</td>
<td>• To continue to invest in programmes to prevent poor health, to keep people out of hospital, including campaigns encouraging people to use the right service for their health condition at the right time</td>
</tr>
<tr>
<td></td>
<td>• For more services to be provided closer to home rather than in hospital, in friendlier and more environmentally sensitive clinics and centres</td>
</tr>
<tr>
<td></td>
<td>• For south Sefton residents to have ‘real’ involvement in shaping future services and priorities, especially when there are difficult decisions to be made - through more Big Chat style events, talking directly to people who use services, working with partner organisations to reach their clients, web-based feedback (like email and social media) and more traditional methods (such as leaflets, newsletters and local newspapers)</td>
</tr>
<tr>
<td></td>
<td>For SSCCG to support those who find it difficult to voice their views, so they too are able to have their say about their health and health services</td>
</tr>
</tbody>
</table>
Perceived gaps in the Sefton Strategic Needs Assessment as identified by our partners and our communities

Our partners and communities identified the following “gaps” in the Sefton Strategic Needs Assessment. This does not mean that these services do not exist – it means that the communities of Sefton did not perceive that the Strategic Needs Assessment had given sufficient importance to them and they need to be highlighted to the Shadow Health and Wellbeing Board:

- **Physical and Environmental Preventative Services** - including, affordable warmth and housing conditions (link between poor health and housing in poor physical condition and winter deaths in relation to fuel poverty)

The quality of housing is an issue for young people in care and care leavers as this can and does impact on their wellbeing e.g. damp in properties.

My mate lives in a place that is damp…. He washed his kecks and puts them in a drawer. When he took them out a few days later they were covered in mould

- **Lesbian, Gay, Bisexual and Transgender (LGBT) youth and adult support services**

Need borough-wide help, advice and hate crime services for Lesbian, Gay, Bisexual and Transgender people
**Mental Health Treatment Services**

There is a perceived inequity in services between north and south of the borough, including support for carers (worse in the north). More drop-in type services for males. Mental health support is important both in and outside prison.

Mental health services are extremely poor in Southport, especially if you have a history of alcohol or drug use. Mental health services say that you have alcohol dependency syndrome and do not look to see if this a mental health issue. Also appointments are not very frequent.

**Drug and Alcohol Treatment Services**

Better support and access to services, earlier diagnosis and support, when treating drug addiction for example, discuss stopping smoking marijuana then discuss stopping smoking cigarettes as well – don’t just ignore – look at wider health issues, not just those relating to drink and drugs.
End of Life Services

I want to be able to die at home with the support and care my family and I need
2. The Community Engagement Process

This report brings together and summarises the results of the community engagement process that Sefton’s public and voluntary community agencies have undertaken around the Sefton Strategic Needs Assessment 2012 (which we call Sefton: Our Lives, Our Health).

What were the aims of the engagement process?

The aim of the consultation and engagement process was to engage the public, key stakeholders, elected members and the diverse communities of Sefton to have a say on what their priorities were. The process also engaged key groups whose voices are often not heard such as children and young people, care leavers, people with drug or alcohol problems, prisoners and those who face discrimination. The outcome of the process is to develop a Health and Wellbeing Strategy for Sefton to inform the future planning, commissioning and delivery of services in Sefton.

Objectives

- To ensure that as many people as possible were aware of the process and how they could get involved, ensuring inclusivity for all
- To confirm that our understanding of needs in Sefton are right
- To find out whether there were any gaps in our understanding and identify what these are
- To support the communities of Sefton to fully participate, comment and influence
- To use this process as the foundation for continuous dialogue and involvement in the future
- To inform the future planning, commissioning and delivery of services in Sefton
Was it successful?

We believe the community engagement has been successful and would like to thank everyone who has shown their commitment and support during this stage of the engagement process. In excess of 1000 people were engaged during this process. Many people we engaged with told us that taking part in this consultation has helped them to understand how hard it is to make choices and now have more understanding of how hard it is for commissioners to make decisions about which services to provide.

The success of a community engagement process is not always immediate to see. Over time we will know whether the aims of the engagement process have been achieved. The approach shows the importance of ongoing dialogue between our organisations and the communities of Sefton. The one hundred and thirty seven people who expressed an interest in joining Sefton Council’s e-panel and staying involved will be contacted as part of the on-going dialogue.

Did people agree with the emerging priorities?

The methods used during the engagement process helped communities to identify their priorities and services that they value. During the engagement process we received feedback that highlighted some gaps and additional priorities and these are detailed below. However, overall most people we spoke to felt assured that their needs would be met within the priorities and that the priorities were comprehensive. It must be noted that in some cases, people may have chosen their preferences due to events happening in their local communities at the time. Whilst some people showed preferences for activities/services related to their interest group, many also showed consideration for more holistic health and wellbeing issues that impact on the wider community.

What gaps did the process identify?

The communities of Sefton identified the following “gaps” in the Sefton Strategic Needs Assessment. This does not mean that these services do not exist – it means that the communities of Sefton did not perceive that the Strategic Needs Assessment had given sufficient importance to them and they need to be highlighted to the Shadow Health and Wellbeing Board:
• Physical and Environmental Preventative Services
• Lesbian, Gay, Bisexual and Transgender (LGBT) Youth and Adult Support Services
• Mental Health Treatment Services
• Drug and Alcohol Treatment Services
• End of Life Services
3. Context

The community engagement process for Sefton’s Strategic Needs Assessment: Sefton: Our Lives, Our Health has drawn to its conclusion.

For the third Sefton Strategic Needs Assessment, the Shadow Health and Wellbeing Board identified draft priorities and an emergent vision and sought to engage with a range of people in the development of a draft vision and outcomes framework for the borough.

Sefton Council, Sefton Clinical Commissioning Groups (CCG’s), Sefton Council for Voluntary Services and Merseyside Commissioning Group have worked together, to ensure that as many people as possible and those particular groups most affected have had the opportunity to comment and to have an input into the way that health and wellbeing services are delivered in Sefton.

This report brings together the feedback from the communities of Sefton and lays out the key points and recommendations that have emerged through our conversation with the public and stakeholders over the recent months.

Engaging Sefton’s communities; what we did and why

The process of planning for Integrated Commissioning started with data analysis: we looked at the data, information, service mapping and previous consultations and drew up a list of priorities based on what we know about life in Sefton. It was important that we recognised that we “didn’t know what we didn’t know” and that no one in Sefton was left out when we set our priorities for spending. The aim of the community engagement process was to firstly establish whether the people of Sefton felt that their needs were addressed by the emerging priority areas and if they felt that they were not met then what had we missed, what were the gaps?
4. How did we engage?

In order to find out what the community’s response to the Sefton: Our Lives, Our Health document and the priorities detailed in the Sefton Strategic Needs Assessment were, we used:

- Interactive Planning For Real engagement sessions with the general public, offenders, service users, young people and through existing networks, forums and groups
- Focus groups
- Engagement events
- Table discussions/workshops
- ‘Heads Up’ presentations
- Questionnaire – both hard copy and on-line
- Easy read workbooks for people with learning disabilities
- Information on the website
- Telephone survey for people with visual impairments

Rationale

The Shadow Health and Wellbeing Board agreed that the main method for consultation would be “Planning for Real”. Planning For Real ® is an interactive planning process that enables local people to use their knowledge of living in an area and receiving services to make suggestions on what they believe is needed in their area. The tool, which is usually used at a local neighbourhood level to identify local issues, was adapted to a borough wide level by keeping the general themes and making some suggestion cards that showed the services that had emerged from the draft priorities. Three forms were developed and used depending on the audience (a full map version, a “parks” version and a table top questionnaire version).
The Focus Groups were arranged following some Planning For Real ® engagement with parents and carers at children’s centre events. This enabled us to gain further insight into the reasons for their preferences and understand any concerns they may have.

The Engagement Events enabled us to gave us the opportunity to bring like minded people together in order to receive a presentation on the Sefton: Our Lives, Our Health process and then to break off into groups of particular interest to discuss the issues further and provide us with direct feedback.

The Table Discussions/Workshops enabled us to engage with stakeholders as part of their existing meetings where, following a presentation, they would work in small groups to discuss the issues further and provide us with direct feedback.

The ‘Heads Up’ Presentation was developed to enable us to deliver a consistent message to stakeholders about the current context in Sefton, what the Strategic Needs Assessment was, the consultation and engagement process and how people can get involved.

The General Questionnaire enabled us to get the message to the wider public and provided people with the opportunity to tell us whether they agree with the emerging priorities. They could also freely comment on what affects their health and wellbeing. The spontaneous nature of people’s response has provided us with an invaluable insight into what the communities of Sefton feel is affecting their wellbeing. The Telephone Survey was offered to members of the Visual Impairment Group who wanted to take part.

The Easy Read Workbooks were developed to support people with learning disabilities to engage, in preparation for them attending an Engagement Event. They provided people with the opportunity to tell us what services they use, what was good about them and what could be improved.

The Website and On-line Questionnaire enabled the questionnaire to be completed on line if people had internet access. The information they might need to inform their comments was also available on-line. This made use of our eConsult technology which processed the responses and provided us with a report of the results.
5. Feedback from Planning For Real ®

**Method:** Preliminary discussion or ‘Heads-Up ‘presentation

The full map version, a “parks” version and a table top questionnaire version depending on the audience or availability of time

**What we did:**

Planning for Real® offered participants an opportunity to rank a range of ‘services’ provided and commissioned by the Local Authority, the CCG’s and other partners, in terms of importance, timing and location. The services – eighty one in total and listed at Annex A - were divided into seven distinct areas (Community Information and Support Services; Leisure, Culture and Tourism; Wellbeing; Traffic and Transport; Community Safety; Training and Work; Housing)

Thirty interactive Planning For Real ® engagement sessions were delivered to:

- Council organised “Fun Day” Park days in Maghull, Bootle, Birkdale, and Crosby, and a separate event in Formby
- Children’s Centres of Linaker, All Saints, Seaforth and Netherton
- Every Child Matters Forum
- LINKS Membership
- Sefton Partnership for Older Citizens and its Older People’s Forums
- Carers Conference
- Equalities Standing Group meeting;
- Parents/Carers;
- Children in Care and Care Leavers;
- Young People at Youth Settings;
- Mental Health Service User Forums;
- Feel Good Factory AGM;
- Affordable Warmth Group;
- Sefton NHS AGM;
- Health & Social Care Forum;
- Prisoners; and
- People who use Drug Treatment Services

Key Findings:

The meetings and events undertaken offer a rich and wide spectrum of views from people; covering each geographical area, either as “drop in” or in formal engagement with specific audiences, across all age groups. Conservative estimates suggest face-to-face engagement has taken place to date with over 700 people. It was undertaken in adopted specific forms dependant on audience and the results have been captured in different forms – by category, by event and geographically (by postal area). This analysis breaks down the information into these forms.
Prioritisation

During each Planning for Real exercise, participants were asked to choose up to a maximum of six services from the suggested, following which a further priority process was undertaken – where up to two of the suggestions were classified as NOW (the most important subject/service for them, within a time limit of one year); SOON (the second most important service, with a time limit of within three years) and LATER (with a time limit of within five years). The following information shows the breakdown of priority subjects by event, category, prioritisation (NOW/SOON/LATER), and geography (postal sector).

By Event

The following is a list of events at which Planning for Real method was used, showing date and place of event, together with the top two/three subjects highlighted as the most important for the event:-

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Priority 1</th>
<th>Priority 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>3rd August</td>
<td>“Fun Day” Glenn Park, Maghull</td>
<td>Provision of youth centre</td>
<td>Parks</td>
</tr>
<tr>
<td>6th August</td>
<td>“Fun Day” Derby Park, Bootle</td>
<td>Police foot patrols</td>
<td>Speeding/dangerous driving and parks</td>
</tr>
<tr>
<td>14th August</td>
<td>“Fun Day” Bedford Park, Birkdale</td>
<td>Parks</td>
<td>Children’s centres</td>
</tr>
<tr>
<td>14th August</td>
<td>Children’s Centre, Canning Road, Southport</td>
<td>Children’s centres</td>
<td>Parks</td>
</tr>
<tr>
<td>Date</td>
<td>Event</td>
<td>Priority 1</td>
<td>Priority 2</td>
</tr>
<tr>
<td>--------------</td>
<td>--------------------------------------------</td>
<td>------------------------------------------------</td>
<td>------------------------------------------------------</td>
</tr>
<tr>
<td>17th August</td>
<td>“Fun Day” Moorside Park, Crosby</td>
<td>Improve bus services</td>
<td>Children’s centres and jobs for young people</td>
</tr>
<tr>
<td>21st August</td>
<td>Linaker, Children’s Centre, Southport</td>
<td>Children’s centres</td>
<td>Police foot patrols and parks</td>
</tr>
<tr>
<td>22nd August</td>
<td>Carers Conference</td>
<td>Police foot patrols</td>
<td>Children’s centres and parks</td>
</tr>
<tr>
<td>28th August</td>
<td>Children’s Centre, All Saints, Seaforth</td>
<td>Police foot patrols</td>
<td>Children’s centres and training and guidance to get a job</td>
</tr>
<tr>
<td>31st August</td>
<td>Children’s Centre, Netherton</td>
<td>Police foot patrols</td>
<td>Housing for young people</td>
</tr>
<tr>
<td>3rd September</td>
<td>Equalities Standing Group</td>
<td>People afraid to go out at night</td>
<td>Improve existing bus service</td>
</tr>
<tr>
<td>6th September</td>
<td>Youth Workers Training Event</td>
<td>Training and employment for young people</td>
<td>Promote physical activity</td>
</tr>
<tr>
<td>10th September</td>
<td>“Fun Day” Formby Pool</td>
<td>Police foot patrols</td>
<td>Early support for dementia</td>
</tr>
<tr>
<td>11th September</td>
<td>LINKS Engagement</td>
<td>People having a voice</td>
<td>Support for carers and police foot patrols</td>
</tr>
<tr>
<td>17th September</td>
<td>LINKS (Southport and Formby)</td>
<td>Early support for dementia</td>
<td>Walk-in centre</td>
</tr>
<tr>
<td>18th September</td>
<td>Every Child Matters Forum</td>
<td>Training and employment for young people</td>
<td>Lifelong homes</td>
</tr>
<tr>
<td>18th September</td>
<td>Maghull Older People’s Forum</td>
<td>Walk-in centre</td>
<td>Improving existing bus service</td>
</tr>
<tr>
<td>19th September</td>
<td>Alchemy</td>
<td>Support for vulnerable people</td>
<td>Drinking in young people</td>
</tr>
<tr>
<td>Date</td>
<td>Event</td>
<td>Priority 1</td>
<td>Priority 2</td>
</tr>
<tr>
<td>------------</td>
<td>------------------------------------------------</td>
<td>-------------------------------------------</td>
<td>------------------------------------------------</td>
</tr>
<tr>
<td>25th Sept</td>
<td>Drugs Action Team User Group</td>
<td>Mental health support</td>
<td>Training and guidance on getting a job</td>
</tr>
<tr>
<td>25th Sept</td>
<td>Feelgood Factory AGM</td>
<td>Mental health support</td>
<td>Support for vulnerable people</td>
</tr>
<tr>
<td>26th Sept</td>
<td>Southport Older People’s Forum</td>
<td>Older people living at home</td>
<td>Walk In Centre</td>
</tr>
<tr>
<td>26th Sept</td>
<td>HMP Kennet</td>
<td>Credit union</td>
<td>Jobs for young people and Children’s centres</td>
</tr>
<tr>
<td>27th Sept</td>
<td>Health &amp; Social Care Forum</td>
<td>Welfare rights and advice</td>
<td>Mental health support</td>
</tr>
<tr>
<td>27th Sept</td>
<td>Affordable Warmth Group</td>
<td>Jobs for young people</td>
<td>Welfare advice</td>
</tr>
<tr>
<td>27th Sept</td>
<td>Sefton NHS AGM</td>
<td>Jobs for young people</td>
<td>Housing for young people</td>
</tr>
<tr>
<td>28th Sept</td>
<td>Drugs Action Team Users Forum II</td>
<td>Jobs for local people</td>
<td>Police foot patrols</td>
</tr>
<tr>
<td>28th Sept</td>
<td>HMP Liverpool</td>
<td>Training and guidance to get a job</td>
<td>Sports complex</td>
</tr>
<tr>
<td>4th Oct</td>
<td>Drugs Action Team Users Forum III</td>
<td>Housing for young people</td>
<td>People afraid to go out at night</td>
</tr>
</tbody>
</table>

Sefton MBC’s Children’s Services held three separate events in each of the three designated areas - **north, middle and south of the borough**. The following priorities are an amalgam of the responses from these events.

<table>
<thead>
<tr>
<th>Area</th>
<th>Priority 1</th>
<th>Priority 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>North</td>
<td>Coast</td>
<td>Youth centre</td>
</tr>
<tr>
<td>Middle</td>
<td>No responses recorded</td>
<td>No responses recorded</td>
</tr>
<tr>
<td>South</td>
<td>Parks</td>
<td>Sports complex</td>
</tr>
</tbody>
</table>
Youth events also offered responses as “Sefton wide”. The following table show the priorities for this category:

<table>
<thead>
<tr>
<th>Area</th>
<th>Priority 1</th>
<th>Priority 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sefton wide</td>
<td>Youth centres</td>
<td>Coast</td>
</tr>
</tbody>
</table>

**By Category**

Taking into account every event which has used Planning For Real®, the following table shows the top twenty services chosen by participants, weighted to show the most immediately important to residents:

<table>
<thead>
<tr>
<th>Rank</th>
<th>Service</th>
<th>Now</th>
<th>Soon</th>
<th>Later</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Children's centres</td>
<td>61</td>
<td>30</td>
<td>7</td>
<td>98</td>
</tr>
<tr>
<td>2</td>
<td>Police foot patrols</td>
<td>45</td>
<td>43</td>
<td>20</td>
<td>108</td>
</tr>
<tr>
<td>3</td>
<td>Jobs for young people</td>
<td>43</td>
<td>21</td>
<td>19</td>
<td>83</td>
</tr>
<tr>
<td>4</td>
<td>Mental health support</td>
<td>30</td>
<td>21</td>
<td>13</td>
<td>64</td>
</tr>
<tr>
<td>5</td>
<td>Training and employment for young people</td>
<td>28</td>
<td>20</td>
<td>7</td>
<td>55</td>
</tr>
<tr>
<td>6</td>
<td>Parks</td>
<td>27</td>
<td>29</td>
<td>30</td>
<td>86</td>
</tr>
<tr>
<td>7</td>
<td>Walk-in centre</td>
<td>22</td>
<td>19</td>
<td>12</td>
<td>53</td>
</tr>
<tr>
<td>8</td>
<td>People afraid to go out at night</td>
<td>22</td>
<td>13</td>
<td>16</td>
<td>51</td>
</tr>
<tr>
<td>9</td>
<td>Vulnerable people</td>
<td>21</td>
<td>23</td>
<td>13</td>
<td>57</td>
</tr>
<tr>
<td>10</td>
<td>Older people living longer at home</td>
<td>20</td>
<td>13</td>
<td>17</td>
<td>50</td>
</tr>
<tr>
<td>11</td>
<td>Welfare rights and advice</td>
<td>20</td>
<td>12</td>
<td>12</td>
<td>44</td>
</tr>
<tr>
<td>12</td>
<td>Local jobs for local people</td>
<td>17</td>
<td>24</td>
<td>10</td>
<td>51</td>
</tr>
<tr>
<td>13</td>
<td>Family housing</td>
<td>17</td>
<td>11</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>14</td>
<td>Early support for dementia</td>
<td>16</td>
<td>29</td>
<td>10</td>
<td>55</td>
</tr>
<tr>
<td></td>
<td>Now</td>
<td>Soon</td>
<td>Later</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------------------------</td>
<td>-----</td>
<td>------</td>
<td>-------</td>
<td>-------</td>
<td></td>
</tr>
<tr>
<td>15. Support for carers</td>
<td>16</td>
<td>21</td>
<td>12</td>
<td>49</td>
<td></td>
</tr>
<tr>
<td>16. People having a voice</td>
<td>16</td>
<td>11</td>
<td>11</td>
<td>38</td>
<td></td>
</tr>
<tr>
<td>17. Improve existing bus service</td>
<td>15</td>
<td>29</td>
<td>20</td>
<td>64</td>
<td></td>
</tr>
<tr>
<td>18. Housing for young people</td>
<td>15</td>
<td>16</td>
<td>9</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>19. Promote physical activity</td>
<td>15</td>
<td>11</td>
<td>24</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>20. Youth centre</td>
<td>14</td>
<td>28</td>
<td>16</td>
<td>58</td>
<td></td>
</tr>
</tbody>
</table>
By Prioritisation

The following are the top three services provided under the three priority choices within Planning for Real®:

- Children’s Centres
- Improve Existing Bus Services
- Jobs for Young People
- Police Foot Patrols
- Youth Centre Provision
- Parks
- Libraries

Map showing areas PR9, PR8, L37, L38, L23, L30, L31, L22, L21, L20 with priorities marked green for now, amber for soon, and red for later. Bold text indicates the postcode with priorities.
By Geography

Each Planning for Real ® exercise also recorded on a specifically designed form, the priorities that individuals chose, as well as asking for some general information on the individual’s postcode. In the majority of cases this was provided, and the following map show the priorities of individuals against the listed Sefton Postal sectors.
Sefton is broken down into nineteen postal districts, some of which are “specialist” postal sectors (L68, L69, L70, L71, L72, and L75) for such organisations as the Girobank, Civil Service buildings along Stanley Street, installations of public utilities, etc. As there have been no responses from these, these details are not included in this return. Further there were no formal responses received from residents within the L29 postal sector, a semi-agricultural area, containing few residences. However, the residents were invited to take part through either membership of a specific group/forum or by attendance at drop in / “fun day” events.

Further analysis of postal sector data shows that Planning for Real received over 2,200 different answers, of which 35% came from the PR8 and PR9 postal sectors, 16% from L20 and 10% from L21.

**Freehand responses**

Where those who took part in the Planning for Real exercise could not find a service which was important to them, they were invited to note this or any other thought, down and these too would be added to the weight of evidence. The following is a table which lists those responses by postal sector, with a further category of “unassigned” – where the resident did not include their postcode. (No comments were received from L9, L10 and L29 sectors) These can be found as Annex 2.
6. Feedback from Specific User Groups

**Feedback People with Learning Disabilities**

**Method:**
- Meetings with service users
- Completion of workbooks
- Workshop with small group work

**Key partners:**
- Lites
- ABILITY
- Sefton Access Forum
- Merseyside Partner
- Sandbrook Day Centre
- Sefton Advocacy
- People First Sefton
- 2gether Activities
- Imagine
- New Directions
- Freindz

**What we did:**

The consultation with people with learning disabilities took place in stages. Preliminary meetings took place with service users to explain the consultation and the themes. The information was given in Easy Read and service users agreed to complete a workbook prior to their attendance at the workshop event. They brought this workbook with them to the event to help guide their feedback at the workshop. At the workshop, participants worked in small groups to discuss further what services they use, what was good about them and what could be improved. Some people couldn’t attend the event but still completed the workbook.

In total, sixty four workbooks were completed and thirty three people attended the workshop.
Key findings

- **Avoiding social isolation** - value the services used and the opportunities to socialise and meet up with friends. Would like more opportunities to socialise on evenings and weekends.

- **Enjoying independence** - transport and travel is important to have independence. Having a bus pass is essential for this. More travel planning is needed.

- **Support with some daily tasks** – help to understand bills, regular bills from service providers, more support for people with complex needs.

- **Accessing health services** – value health checks, but consistent standards of service are needed. Waiting times for appointments and to see practitioners could be improved.

- **Value opportunities to do work experience and voluntary work** – would like to do more.

- **Value emergency services** - particularly Fire Service for fire checks, but mostly Police for hate crime awareness and E-cards.

- **Choice and control** – able to make some decisions and choices, but would like to do this more.

**Summary of findings emerging from each of the themes from people with learning disabilities:**

**Leisure**

A wide range of advocacy, social and fitness services and activities are used, including day centres, social clubs, pubs, leisure centres and support clubs. Most people we spoke to use more than one activity a week. Overwhelmingly the main reason people use these activities is so that they can meet up with their friends and socialise. They also think the staff are friendly and they can develop new skills. The following recommendations are made to improve:
• Would like more opportunities to socialise including at evenings and weekends

• Would like access to leisure centres in school holidays and need more staff to enable this to happen

• Do not want to have to ring the leisure centre up in advance to make sure the hoist is available

**Wellbeing and Health**

The people we spoke to use a range of services including GP’s, dentists, opticians, chiropody and pharmacists. They were generally quite happy with the services they received, particularly happy with the annual health checks and felt that in the main the staff were friendly. They did however, make the following recommendations that they feel, if implemented, would make a genuine impact on improving their health and wellbeing:

• Ensure that reception staff is friendly at all health access points. Improve waiting times for appointments for doctors and dentists and then reduce the time waiting to see the doctor or dentist on the day of their appointment

• During the appointment, the practitioner should discuss and talk things through with the patient rather than with the carer and speak clearly and slowly

• Provide more information in Easy Read and more information in Braille

• Improve the parking at Aintree Hospital

• Improve the diagnosis of mental health for people with learning disabilities

**Friendships and Relationships**

The people we spoke to use day centres, support groups and social activities to socialise and meet friends. They help them to feel happy and safe. To help things improve they would:
like more chance to socialise in the evenings and weekends
like their bills for services to be provided on a regular basis. This causes both stress and anxiety
like more support for people with complex needs to meet their friends

Transport

Most people use a range of transport including taxi, buses, trains and day centre buses. They feel that this gives them independence and makes them feel safe. Those that use day centre buses and taxis feel in the main that staff are friendly and helpful and like to be picked up. They really value the bus pass as it gives them the opportunity to socialise and travel independently. They did however, recommend some things for improvement:

- There needs to be a consistent standard of service, so that all staff are friendly and helpful
- Drivers should not drive off too soon
- All transport needs to be accessible - wheelchair friendly buses and trains
- Travel training is valued, but should be available more
- A review of the bus numbers, i.e. 53/53a – different routes – can confuse people who are not good with numbers

Crime and Safety

The people we spoke to use a range of emergency services and these are valued highly. The work on hate crime is valued highly – most have an E-card and are aware of SIGMA and appreciate the police attending day centres to discuss issues and engage with service users. Some users don’t feel safe outside of the house and at night, unless with their support worker. To help things improve, recommend:
• more police patrols
• more awareness and reporting of hate crime
• considering how dimming street lighting can affect people with disabilities

Work and Training

Generally participants access courses and training at access points (day centres and advocacy) and some outside providers, including Feel Good Factory and Hugh Baird. They also value the opportunity to do voluntary work. People we spoke to feel that accessing volunteer work and training helps to provide independence, develop new skills, confidence and interaction:

• Would like more opportunities to do training, volunteer work and work experience

Housing

People live at home with their family or in supported housing. They value the support from family and friends and the independence gained from living in supported housing and the support from staff. They do however:

• need more help to understand bills
• want more choice and involvement in decisions about housing
• need adaptations

Choice and Control

People we spoke to, in the main, felt that they were able to make decisions and choices about services, daily tasks and activities at service provisions. However, would like:
• to be able to make more decisions about activities and location of activities
• more choices at home
• help with bills

Community Information and Support

People used the service and activity provisions to help them with community information and support. These service and activity provisions helped them feel safe and comfortable. They help with independence and socialising with friends. To help things improve:

• they would like more chances to speak out
• acknowledgement that not everyone has or can use the internet
• more awareness of where they can get community information
Feedback from Children in Care and Care Leavers (Making a Difference Group)

Method: Planning For Real® Park Version

What we did:

The consultation took place with children in care and care leavers in two stages. At a meeting in August 2012, the Chief Executive of Sefton Council explained to the group what the Sefton Strategic Needs Assessment was and asked the group if they would take part in a more in-depth discussion at a future meeting. This discussion took place in September 2012, with nine people. Group members were asked for their views on leisure, wellbeing and health, friendships and relationships, transport, crime and safety, housing, choice and control and community information and support. They were then asked to identify their own priorities by identifying two for ‘now’, two for ‘soon’ and two for ‘later’. A group discussion followed.

Key points:

- **Housing** - good quality affordable housing is important as young people move into accommodation at a young age. Keeping tenancies is not always possible without support. Experience of poor quality housing which was damp.

- **Work and training** – lack of appropriate training for the jobs that are available. People are being trained for jobs that are not there.
• **Wellbeing and health** – the importance of healthy food and vegetables, but healthy food is not cheap. Free fruit and vegetables would help. More walk-in centres are needed – they are more likely to be used than GP surgeries as the hours are more flexible. Found it difficult to access the existing walk-in centres from Southport as transport was poor

• **Choice and control** - young People are being listened to but this needs to happen consistently. Services need to signpost young people to the correct services straight away... not ‘passed from pillar to post’

• **Community information and support** - support financially for first-time/young parents with rent and childcare costs for young parents that are living alone or to enable young people to get their own home

• **Advice facilities for young people** – more facilities focusing on services that people want to attend...when they need to

(Full notes available)
Feedback from the Equalities Standing Group

Method: Planning For Real Map® Version

What we did:
In September 2012, group members were given the presentation and then took part in the map version of Planning For Real.

Key findings:

- **Community information and support** - access to information and services for people with disabilities and those for whom English is not their first language
  
  **Support for people who are lesbian, gay, bisexual and transgender** – for adults and young people, including hate crime

- **Childcare** – needs to be accessible and affordable

- **Wellbeing and health** - services that are provided from within children’s centres are valued

- **Older people** – access to services and information, networks, social isolation
Feedback from Parents/Carers

Method: Planning For Real® Park Version
Focus groups

What we did:

During August and September 2012, parents and carers were engaged at six Children’s Centres (two in the north, two central and two in the south of the borough) at family events taking place at the Centres. The results of the Planning For Real exercise have been included in the overall results for the Planning For Real® exercises (see page 31 of report). Some parents and carers expressed an interest in taking part in more in-depth discussions and were invited to take place in a focus group. Six focus groups took place.

Key findings:

South Sefton Parents/Carers:

- **Crime and safety** - police foot patrols are critical in the areas where there has been recent gun crime. Families are scared and are reluctant to let their children play out. Police foot patrols can act as a deterrent

- **Leisure** - parks provide safe places for families

- **Wellbeing and health** – services in children’s centres support vulnerable families. They are often a lifeline providing a safe supportive environment, working with a range of services
Central Sefton Parents/Carers:

- **Leisure** - parks provide a safe place for families, but there are concerns over dog fouling

- **Wellbeing and health** – services in children’s centres support parents, providing affordable childcare

- **Crime and safety** - police foot patrols are needed to deter anti-social behaviour. Concerns about recent gun crime and drinking on the street

North Sefton Parents/Carers:

- **Wellbeing and health** - children’s centres are important for friendships and relationships

- **Housing** – concerns over private landlords
Feedback Drug Action Team Service Users

Method: Planning For Real Park® Version

What we did:

Three sessions for people who used drug treatment services held; one in the north of the borough and two in the south of the borough. Twenty nine people took part in the Planning For Real® Park version and these results have been included in the overall results (as detailed above on page 31 of the report). During each of the three sessions, a discussion took place to help gain insight into their choices.

Key findings:

- **Wellbeing and health** – there are not enough drug treatment services for people in recovery. They are important for wellbeing. Relationships with workers are key. There are more adults and young people drinking, with people often moving from street drugs to alcohol dependency. People are expected to recover from drug and alcohol issues in a drug hostel – this makes them vulnerable.

- **Better support and access to services** - earlier diagnosis and support, when treating drug addiction; for example discuss stopping smoking marijuana then discuss stopping smoking cigarettes as well, don’t just ignore, look at wider health issues not just those relating to drink and drugs. Care closer to home is important.
• Whilst walk-in centres are great for homeless people and people on the move, people should be able to access the GP where people have no fixed address.

• **Mental health services** – lack of mental health services. There is an inequity in services in north and south of the borough (more needed in Southport). Waiting times are too long to get an appointment and in between appointments. Commissioning – very important for services required in the future, young people are using very different drugs and these will result in more mental health issues and the need for more services in the future

• **Support for carers and older people** – early identification of support is needed for carers. Young carers are caring for adults who are dependent on alcohol and/or drugs. Some people who are dependent on alcohol/drugs need a carer. Older people should be supported to live at home longer

• **Work and training** – more local jobs for local people, particularly young people. There is more training, guidance and voluntary work needed for people in recovery to help develop life skills and work experience – a wider acceptance is needed. More support for parents to go back to work

• **Community information and support** – more welfare rights advice should be available, especially with the proposed cuts and reductions in benefits

• **Housing** – concern that people will be asked to move away from family and friends and the support mechanisms as they will be required to down-size. Housing for young people is also needed. Concern that there are too many empty homes and that more properties are needed for the homeless

• **Crime and safety police** – More foot patrols are needed (south) as more police patrols on the streets will help people feel safe. Perception that the PCSO’s are not respected by young people
Feedback from Young People

Method: Planning For Real® Map Version

Partners: Sefton Youth Service
Parenting 2000
Southport Youth Centre
Brunswick Youth Centre

What we did:

Young people and children with learning difficulties and/or difficulties were engaged during nine youth sessions; two each in the north, central and south of the borough. Ninety two young people took part in the Planning For Real® Map version and these results have been included in the overall results (as detailed above on page 31 of the report). During each of these sessions, a discussion took place to gain insight into their choices.

Key findings:

- **Leisure** - more youth facilities are needed across the borough. They would like the skate park in Southport to be improved and young people in Southport value the Coast. Across the borough young people value parks

- **Community information and support** - young people would like to do more active things, but often don’t know about facilities, e.g. bikes/skating/swimming/football. The cost of hiring sports complexes, i.e. football pitches is also a barrier

- **Work and training (and education)** – young people need experience to get a job but it is difficult to get experience. Young people think that support in education is very important for all young people.

Between 20th August and 12th October 2012, Sefton Council facilitated involvement in the National UKYP Make Your Mark Campaign to help the Members of Youth Parliament debate the top issues affecting young people nationally. Two hundred and twenty young people from Sefton took part in the campaign. The five most popular issues chosen by young people in Sefton during the campaign were:
• making public transport cheaper
• equal marriage for all
• better 16 – 19 bursary funds
• strengthening relations between young people and the police
• a curriculum to prepare us for life (i.e. financial and relationship education)
Feedback from Prisoners

Method: Focus groups using Planning For Real® (list version and Map version)

Partners: Prisoner Health Improvement Group

What we did:

Two group sessions were organised; one at HMP Kennett and HMP Liverpool, with a total of 24 inmates. A focus group took place at each location and these results have been included in the overall results (as detailed above on page 31 of the report). During each of these sessions, a discussion took place to help gain insight into their choices.

- **Community information and support** – support is needed when leaving prison, particularly on benefits. Credit unions are an important service for offenders. Welfare Reform and financial issues affecting all people, but particularly vulnerable people. There is a need for clear advice and help

- **Work and training** – jobs are important for ex-offenders but it is difficult to get a job due to criminal record, which means that there is a chance that they revert back to crime. Training for young people is important

- **Leisure** – activities for young people are important to act as a deterrent

- **Wellbeing and health** – children’s centres are important because they provide support to families of people in prison. Mental health support is needed both in and outside prison
Feedback from Older People

Method: Planning for Real Map Version
Presentation
Table discussions

Partners: Sefton Partnership for Older Citizens (SPOC)
Sefton Pensioners Advocacy Centre (SPAC)
Bootle, Maghull & Southport Older People’s Forums

What we did:

A presentation was first given to the members of SPOC and SPAC outlining the context, the emerging priorities in the draft Strategic Needs Assessment, the purpose of the consultation and next steps. A table discussion was also held at the SPOC meeting to start the conversation about the emerging priorities. With the assistance of these organisations three further engagement sessions were held with the Older People’s Forums using the Planning For Real Map® Version. The results have been included in the overall results (as detailed above on page 31 of the report); however, during the sessions, a discussion took place to help develop insight to their choices.

Key findings:

- **Transport** – older people use public transport to access services and to socialise. In some areas of the borough (Maghull), services finish at 6.00pm, which means it is difficult to get back from social events or doctors’ appointments. Bus passes are also very important to enable people to travel to socialise, shop and attend services

- **Wellbeing and health** – walk-in centres are valued, but there is a need for one in Southport and Maghull. It is difficult to get out of hours appointments and public transport to Litherland is very poor
• **Carers** – there are ‘hidden carers’. Practitioners need to be more aware of carers and their status in order to offer support/signpost if required

• **Prevention services** – early identification and interventions to help increase life expectancy and quality of life - not just clinical – five steps to wellbeing – start early

• **Duplication of services** – services should be provided in the community but better coordination of services is needed to avoid duplication

• **Access to services** – getting a GP appointment is hard. The cost of dental services for older people is too high. There also needs to be more communication and consultation about relocating services. People are being sent to Aintree for hospital appointments, but public transport is poor

• **Community information and support** – need to cater for older people who are socially isolated and facing financial hardship, but also continue to provide opportunities for those that are active and well. Men are more likely to be socially isolated. Essential support mechanisms are befriending and signposting.

• **Access to information** – some older people do not have access to a computer. Concerns about how they will find out information and get involved

• **Work and training** – if jobs are provided for young people of the area, it would help to bring more money into the area. There should be more employment opportunities for people aged 50 – 65 years.

• **Housing** – some older people want to downsize their properties to release equity or to help family members, but difficult to get appropriate properties
Feedback from Sefton Carers Centre users

Method: Planning For Real® Table Top Questionnaire version Presentation

Partners: Sefton Carers Centre

What we did:

The Sefton Carers Centre carried out some specific consultation in relation to the Strategic Needs Assessment. An engagement event was held in the south of the borough by the Carers’ Centre which saw more than 20 carers attend. To complement this, an engagement event was organised in the north of the borough using the Planning For Real® Table Top Questionnaire version. 20 carers participated in this event. The results have been included in the overall results (as detailed above on page 31 of the report).

- **Wellbeing and health** – concerns were raised by carers that if they ‘stopped working’ (i.e. went on strike), who would pick up this work/service?

- **Numbers of carers** – There are considerably more carers in the borough aged over 65 years than shown in the 2001 Census data (6,600). The 2001 Census revealed that there may be as many as 32,000 unpaid carers in Sefton.

- **Carers’ Support** – carers’ assessments don’t always mean people will get identified support, including support for carers who are isolated or lacking in the support mechanisms

- **Mental health services** – differing levels of support for mental health services – perceived north/south divide, with the north not experiencing the same level of service

- **Access to services** – important for carers to see the same GP – one who understands carers’ concerns and knows what their caring responsibilities are

- **Choice and control** - in end of life services
• **Work and training** – young people should be able to have jobs in Sefton, rather than be exported to Merseyside or other regions. The development of the ‘Super Port’ will be a great asset

• **Housing** – feel that too much of the area is designated ‘green space’, inhibiting housing developments, although current housing stock could be upgraded, instead of new housing being built. Housing conditions need to be more habitable

• **Community information and support** – Welfare Reform and financial issues affecting all people, but particularly vulnerable people. There is a need for clear advice and help
**Feedback from Local Involvement Networks (LINks)**

**Method:** ‘Head’s Up’ Presentation  
Planning For Real® Map Version

**What we did:**

A presentation was given to LINks Champions at the meeting. The same presentation was also given to the LINks Executive Members outlining the context, the emerging priorities in the draft Strategic Needs Assessment, the purpose of the consultation and next steps. Two open sessions were held for the wider membership of the LINks (one in the northend south of the borough). At these open sessions the presentation was given and attendees took part in engagement sessions using the Planning For Real® Map Version. The results have been included in the overall results (as detailed above on page 31 of the report). During the sessions, a discussion took place to help gain insight into their choices.

**Key findings:**

- **Wellbeing and health** – need to ensure adequate help and engagement for carers of all ages. Support for parents and vulnerable people is also important. End of life care is really important as it has an effect on psychological care. There is a need for more support for 16 – 40 year old individuals

- **Commissioning** - concerns around budget cuts – especially for those who have equipment supplied to their homes, and the risk/impact assessments undertaken on all services cut, or threatened with cuts.
The importance of carrying out risk assessments when reducing resources

- **Transport** – bus routes are not always accessible and concern was raised about people having to make choices in difficult economic times - people may no longer have cars and would rely on public transport. Bus passes were valued, but bus fares for parents and their children can be high, so they miss appointments. Consideration should be given to transport when planning services.

- **Work and training** – jobs for young people are needed to help keep them occupied and because there will be a need for tradespeople in the future.

- **Community information and support** – there are opportunities for people to have their say about things, but more awareness is needed to let people know how.
Feedback from Networks and Forums

Method: ‘Heads Up’ Presentation
Table Discussion/Workshop
Planning For Real® Map Version

Partners: Health and Social Care Forum
Every Child Matters Forum
Faith Network
Community Centre Champions

What we did:

During the engagement period, engagement took place with the above networks and forums using methods appropriate to the size of the group and time available. All were given the ‘Heads Up’ presentation outlining the context, the emerging priorities in the draft Strategic Needs Assessment, the purpose of the consultation and next steps. A Table Discussion/Workshop took place with the Every Child Matters Forum and the Health and Social Care Forum both of which engaged in the Planning For Real® Map Version. The results have been included in the overall results (as detailed above on page 31 of the report). During the engagement with the Networks and Forums, feedback was given.

Key Findings:

Health and Social Care Forum

- **Community information and Support** – Welfare Reform and financial issues affecting all people, but particularly vulnerable people. There is a need for clear advice and help

- **Transport** – better transport links are needed as waiting times between buses can be too long (often an hour). Some bus services end at 6.00pm which results in people not going out at night. Good public transport is needed to enable people to get to work, to income generate
- **Wellbeing and health** – The north of the borough has less mental health support services than the south. Concern expressed around the capacity of hospitals when they become Foundation Trusts – particular concern about aftercare and whether commissioners will go for the cheapest care?

- **Youth clubs** - are often full and there are no new places so this results in children getting into ‘trouble’ on the streets

*Every Child Matters Forum*

Overall the Network made the point that it was important for the Council and the Clinical Commissioning Groups to seek the views of Voluntary, Community and Faith (VCF) Sector organisations in relation to the needs of people who live in Sefton. They felt that the VCF sector had great wealth of knowledge of the needs of Sefton residents as a consequence of their work with marginalised groups, such as families living in poverty, young people with mental health issues and those who are isolated or excluded.

- **Wellbeing and health** - that facilities for older people in Sefton were much better than those for young people

- **Mental health** - issues for young people

- **Levels of obesity** - and young people not exercising

- **The safety of children** - living in Sefton and the services offered to this group

- **Work and training** - the gap that needed filling in relation to areas of poverty in Sefton

- **Better jobs** - in order to attract new graduates

- **The impact of poverty** - on young people
7. Feedback from staff and partners

Method: Visioning Workshops
Partners: Sefton Council
Sefton PCT
Sefton Operations Board
Sefton Shadow Health and Wellbeing Board

What we did:

To start the process five Visioning Workshops were held with the Sefton Operations Board and managers from the Council and Public Health to help us determine what type of organisation we need/must become to meet the considerable challenges we face, what should be the Vision going forward, what priorities we will/need to focus our time on, what the underpinning actions are we need take to achieve the priorities and what outcomes/goals we are trying to achieve. A draft Vision document was developed as a result of this engagement, which was taken to the Sefton Borough Partnership Operations Board for them to consider in the form of a workshop; the results, along with an amended draft Vision document were presented to the Shadow Health and Wellbeing Board. The Workshops had the following outcomes:

- Participants have had an opportunity to meet and work with colleagues from across their own organisation, and with others from other agencies delivering services in the borough
- Awareness has been raised about the challenges and pressures facing public services, and consensus reached about how we may address these
- Awareness as to what we need to focus our time on in the next 5 years
- Agreement on a draft vision for Sefton and a set of outcomes/goals which will focus action
- Collective ownership and greater appreciation that we are all in this together

Key findings from the Sefton Borough Partnership Operations Board:
- **Resilience** – need to understand what deprivation means, as some of what may be thought to be our most deprived communities are more resilient

- **Social Value** - importance of social value in commissioning

- **Learning from the past** – important to learn lessons from the use of Neighbourhood Renewal funding, whether what was spent was on the right things and if it made a difference. Need to learn from the past to ensure in times of reduced resources we focus on the right things

- **Satisfaction levels** – people in Sefton are generally satisfied as evidenced in the Strategic Needs Assessment. Need to understand the link between low aspiration and satisfaction, and whether high aspiration leads to lower satisfaction if not met

Key findings from staff and partners through visioning events:

**Priorities/Goals/Outcomes**

1. **Priority**
   - Make the shift to early support and prevention whilst balancing immediate demands
   - Community involvement/responsibility

**Goals**

a) Better use of existing resources
b) Engaged/inclusive community – community responsibility
c) Reduce energy use and minimise waste to create a low carbon future
d) To educate, encourage and enable environmental sustainability
e) Reduce the impacts of climate change
2. **Priority**

- How to attract business, given Sefton’s infrastructure and land
- Employment and skills gaps
- How to create the right environment (housing, jobs, amenities, transport) to attract and keep young families

**Goals**

a) To invest in the City Region growth sectors
b) To upskill the local workforce
c) To support local people to innovate and promote new business and enterprise
d) To ‘create’ and promote local jobs for local people
e) To create conditions for economic growth
f) Improve the standards and safety of our transport network and infrastructure

3. **Priority**

- Health and wellbeing for everyone

**Goals**

a) To enable all people, including people with disabilities and those with limiting long-term conditions, to live well and maintain independence
b) Cleaner, safer, greener spaces to live, work and play
c) To safeguard the wellbeing of children, young people and vulnerable adults
d) Develop high quality and affordable housing
The Public Health Team also provided a collective response:

- More of a balance is required between ‘people’ and ‘place’ issues, and particularly a greater focus on the underlying factors for needs concerning the ‘place’ of Sefton

- The Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS) must ensure they address vulnerable groups. These groups will be different according to the subject matter – for example, vulnerable groups for older people’s issues will be different to those for children / families

- When prioritising issues (the process between JSNA and JHWS) it will be essential that potential inequalities are factored in

- A life course approach to prioritisation for the JHWS could mitigate against the potential to miss any vulnerable groups

Information on the JSNA was presented at the North Southport and Formby Clinical Commissioning Group (CCG) Locality Meetings on the 12th July 2012 and 11th October 2012 and at the CCG Crosby Locality Meeting on the 3rd October. It was discussed at the Maghull Locality Meeting held on the 3rd October 2012, the Bootle Locality Meeting on the 31st October 2012 and at the Health Management Board Walton Neurological Centre on the 4th October 2012.

**Formby Locality Meeting:**

The group was given copies of the SSNA and asked for feedback. The group was informed that the SSNA gives a wide picture of the issues within Sefton and would help localities focus on issues within their own area. The group discussed and thought a lot of the issues were generic throughout Sefton but maybe alcohol is a bigger issue in one area and long term conditions in another.

**Maghull Locality Meeting:**

Locality members were asked to provide what they believe are the key issues that affect both themselves and their patients on a day to day basis.
• A day care centre based in Maghull is needed

• Carers for the elderly are stretched

• Public transport links are poor

• Access to GP surgeries in Maghull via public transport is inadequate. i.e. a large elderly population who use public transport, but cannot access GP surgery till after 9.30am as bus passes cannot be used before this time. Increased pressure on surgeries and reduced choice for patients.

• Pacemaker checking service needed within Sefton. Nearest service is in Broadgreen Hospital

• Sporting facilities to be reviewed in Maghull

• Waiting time for Active Sefton is too long

• Weight loss service inadequate in Sefton

**Bootle Locality Group:**

The group felt that the themes within the SSNA were very relevant for the Bootle area but the following areas were of great concern:

• A big issue regarding alcohol users, practices seem to come across more alcohol cases now than drug misuse

• Mental health is a real issue for BootleMore people with personality disorders, often linked with alcohol abuse; there are no services available in Sefton for people with a diagnosis of personality disorder

• Services are limited to the IAPT programme and not much at secondary care

• Services should be tailored to the needs of each locality.
Health Management Board – Walton:

- How rehab services back in the community will be delivered in times of budget cuts
- Coordination of a health improvement strategy
- Research and patient conditions
- Engaging with the Health and Wellbeing Board in the future
8. Questionnaire

The questionnaire was available on-line (via e-Consult) and as a hard copy. It was available for people to complete over a 12 week period from 7th August to 18th October 2012.

Accompanying the questionnaire was a draft report which provided people with a summary of what we have found. The questionnaire provided people with the opportunity to tell us what they thought about this and to tell us if they thought we had missed anything. We also wanted to know what services they valued most so that we able to prioritise the right services.

A total of two hundred and twenty five people completed the questionnaire. One hundred and fifty seven people have fully completed the questionnaire and sixty eight people have partially completed the questionnaire (i.e. they have not answered one or more questions in the consultation; this may include monitoring questions).

The important points to take from these responses were whether people agreed with our priorities, what their priority services were, if they wanted to stay involved with the engagement process and what they felt they needed to share with us in the open comments section.

It is important to note that these results are not representative of the Sefton population. The results of the questionnaire will support the feedback from the other engagement methods used.
**The results**

Who took part in the survey?

### % of Respondents

Based on 224 Respondents (*who may not have completed every question*)

- **95%**  
  - Member of the public
- **1%**  
  - A Clinician
- **2%**  
  - A representative of a community group
- **2%**  
  - A representative of a voluntary, community or faith group
- **1%**  
  - A representative of a partner organisation

### Those who completed the monitoring information

<table>
<thead>
<tr>
<th>Post Code</th>
<th>Completed by 150 people</th>
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<tbody>
<tr>
<td>L9 – 1</td>
<td>1%</td>
</tr>
<tr>
<td>L10 – 4</td>
<td>3%</td>
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<tr>
<td>L16 – 1</td>
<td>1%</td>
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<td>L20 – 15</td>
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<td>L21 – 10</td>
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<td>L22 – 10</td>
<td>7%</td>
</tr>
<tr>
<td>L23 – 21</td>
<td>14%</td>
</tr>
<tr>
<td>L30 – 7</td>
<td>5%</td>
</tr>
<tr>
<td>L31 – 15</td>
<td>10%</td>
</tr>
<tr>
<td>L37 – 9</td>
<td>6%</td>
</tr>
<tr>
<td>L38 – 1</td>
<td>1%</td>
</tr>
<tr>
<td>PR8 – 35</td>
<td>23%</td>
</tr>
<tr>
<td>PR9 – 21</td>
<td>14%</td>
</tr>
</tbody>
</table>
| Gender | Completed by 140 people | 65 Male (46%)  
75 Female (54%) |
| --- | --- | --- |
| Disability | Indicated a disability completed by 71 people  
Consider themselves disabled completed by 109 people | 17 (24%) Have a physical impairment  
8 (11%) Have a visual impairment  
7 (10%) Have a learning difficulty  
7 (10%) Have hearing impairment  
12 (17%) Have mental health / mental distress  
20 (28%) Have a long term illness  
24 (22%) consider themselves to have a disability |
| Ethnicity | Completed by 133 people | 88 (65%) White British  
37 (27%) White English  
4 (3%) Other White  
2 (1%) Welsh,  
1 (1%) Black African & White  
1 (1%) Chinese |
<table>
<thead>
<tr>
<th>Religion</th>
<th>Have a religion completed by 132</th>
<th>77 (58%) Have a Religion</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Indicated a religion completed by 74</td>
<td>73 (99%) are Christian</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 (1%) are Muslim</td>
</tr>
<tr>
<td>Sexual Orientation</td>
<td>Completed by 125 people</td>
<td>121 (96%) Heterosexual</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2 (2%) Gay</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 (1%) Lesbian</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 (1%) Bisexual</td>
</tr>
<tr>
<td>Gender</td>
<td>Completed by 130 people</td>
<td>129 (99%) Live in the gender assigned at birth</td>
</tr>
</tbody>
</table>
Living in Sefton

Respondents were asked whether they agreed or disagreed with three statements and then to tell us what their top priority was.
• Completed by 182 people – 169 (93%) of respondents agreed we should support and sustain local businesses to provide jobs and **72 (44%)** identified this as their top priority

• Completed by 182 people – 163 (90%) of respondents agreed we should find different ways to support people early to avoid them needing expensive acute services and surgical procedures and **76 (46%)** identified this as their top priority

• Completed by 196 people - 119 (61%) of respondents agreed we should seek to free up land to build family housing and provide opportunities for businesses to locate here and **16 (10%)** identified this as their top priority
Children and Young People Results

Respondents were asked whether they agreed or disagreed with eight statements and then to tell us what their top priority was.

- Completed by 163 people - 143 (88%) of respondents agree we should focus services on ensuring all children have a positive start in life and 39 (22%) identified this as their Top Priority
- Completed by 163 people – 145 (89%) of respondents agree we should provide early and better support so that our children and young people can stay with their families and 29 (16%) identified this as their Top Priority
- Completed by 166 people - 148 (89%) of respondents agree we should bring down the numbers of young people accessing hospital services for drink and smoking related issues and 29 (16%) identified this as their Top Priority
- Completed by 168 people – 147 (88%) of respondents agree we should increase the amount of physical activity that children and young people take part in each week and 27 (15%) identified this as their Top Priority
- Completed by 165 people – 134 (81%) of respondents agree we should make it easier for children and young people to get hold of affordable healthy food and to understand how to eat healthily and 16 (9%) identified this as their Top Priority
- Completed by 167 people – 142 (85%) of respondents agree we should think about what the change in population may mean for the number of schools we will need in the future and where and 14 (12%) identified this as their Top Priority
- Completed by 172 people – 130 (76%) of respondents agree we should provide more and better information for people eating healthily and keeping physically active and 9 (5%) identified this as their Top Priority
- Completed by 169 people – 126 (75%) of respondents agree we should support mothers to breastfeed and promote healthy eating and physical exercise for children, young people and families and 6 (3%) identified this as their Top Priority
Older Citizens Results

Respondents were asked whether they agreed or disagreed with seven statements and then to tell us what their top priority was.

- Completed by 157 people – 147 (94%) of respondents agree that we should look at promoting services and life styles that allow our older people to remain in their homes and the community longer and 48 (27%) identified it as their Top Priority
- Completed by 154 people – 143 (93%) of respondents agree that we should support older people to remain healthier for longer by early diagnosis of dementia, heart conditions, high blood pressure and cancer, and treat these conditions earlier and 40 (23%) identified it as their Top Priority
- Completed by 164 people – 143 (87%) of respondents agree we should plan for the expected rise in population numbers by tackling the main health issues affecting our people and 24 (14%) identified it as their Top Priority
- Completed by 163 people – 143 (88%) of respondents agree we should find out more about how best to support carers to ensure they can continue to care for their families and 22 (12%) identified it as their Top Priority
- Completed by 165 people – 154 (93%) of respondents agree we should help more adults and older people to remain physically active and 19 (11%) identified it as their Top Priority
- Completed by 160 people – 132 (83%) of respondents agree we should refocus some health services to focus attention on older people’s health issues (such as dementia, heart conditions, high blood pressure and cancer) and 19 (11%) identified it as their Top Priority
- Completed by 166 people – 144 (87%) of respondents agree we should improve the falls prevention services to reduce the number of older citizens who are injured through falls and 5 (3%) identified it as their Top Priority
Health Inequalities Results

Respondents were asked whether they agreed or disagreed with five statements and then to tell us what their top priority was.

- Completed by 159 people - 141 (89%) of respondents agree that we should support local people improve their skills, participate in training, undertake volunteering and gain employment and 45 (29%) identified it as their Top Priority

- Completed by 159 people – 134 (84%) of respondents agree we should improve early access to health and wellbeing services for all people and in particular those living in the poorest areas and 134 (24%) identified it as their Top Priority

- Completed by 154 people - 121 (79%) of respondents agree that we should improve health and quality of life for people in the poorest parts of Sefton – offering jobs skills, reducing worklessness and 79 (22%) identified it as their Top Priority

- Completed by 159 people - 110 (69%) of respondents agree that we should improve the quality of life and health of people living in the poorest parts of Sefton by encouraging people to stop smoking, reduce the amount of alcohol they drink, eat healthy food and take physical exercise and 20 (13%) identified it as their Top Priority

- Completed by 156 people - 140 (90%) of respondents agree that we should improve the mental health of people, encouraging people to take part in their local community and 21 (13%) identified it as their Top Priority
Long Term Conditions Results

Respondents were asked whether they agreed or disagreed with six statements and then to tell us what their top priority was.

- Completed by 149 people – 140 (94%) of respondents agree that we should diagnose illness earlier to prevent cancer, heart disease and stroke and treat these conditions sooner and **46 (27%) identified this as their Top Priority**

- Completed by 146 people – 134 (90%) of respondents agree that we should find out what services people want provided in their local communities and to make sure that people can easily access services and **36 (21%) identified this as their Top Priority**

- Completed by 156 people – 147 (94%) of respondents agree that we should identify people with long term conditions earlier so they can receive better treatment, avoiding complications and stay in their home and the community longer and **27 (25%) identified it as their Top Priority.**

- Completed by 157 people – 146 (93%) of respondents agree that we should provide people with information and support to enable them to manage their own conditions wherever possible and **18 (11%) identified it as their Top Priority**

- Completed by 148 people – 118 (80%) of respondents agree that we should improve primary care through the development of virtual wards, care closer to home and listen to people to improve services and **17 (10%) identified it as their Top Priority**

- Completed by 154 people – 94 (61%) of respondents agree that we should promote messages to include the benefits of breastfeeding, eating sensibly, drinking less alcohol and easier access to regular physical activity especially in the poorest areas and **10 (6%) identified it as their Top Priority**
Being Informed, Being Involved Results

We wanted to understand a bit more about the population’s lifestyle at the moment and what they needed to live healthily, well and independently.

<table>
<thead>
<tr>
<th>Question</th>
<th>Number of Responses</th>
<th>As a % of the number of people who have responded to the questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>I meet and socialise regularly with family, friends, colleagues or neighbours?</td>
<td>162</td>
<td>72%</td>
</tr>
<tr>
<td>I feel I am able to enjoy activities that suit my feeling of mobility and fitness?</td>
<td>161</td>
<td>71.5%</td>
</tr>
<tr>
<td>I am aware of the outside world and how it affects me?</td>
<td>160</td>
<td>71%</td>
</tr>
<tr>
<td>I have the opportunity to learn new things?</td>
<td>158</td>
<td>70%</td>
</tr>
<tr>
<td>I often do something positive for my community?</td>
<td>160</td>
<td>71%</td>
</tr>
</tbody>
</table>
### Number of respondents who agree or strongly agree with the asset mapping questions

<table>
<thead>
<tr>
<th>Question</th>
<th>% of respondents who agree or strongly agree with the statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>I meet and socialise regularly with family, friends, colleagues or neighbours?</td>
<td>68%</td>
</tr>
<tr>
<td>I feel I am able to enjoy activities that suit my feeling of mobility and fitness?</td>
<td>74%</td>
</tr>
<tr>
<td>I am aware of the outside world and how it affects me?</td>
<td>93%</td>
</tr>
<tr>
<td>I have the opportunity to learn new things?</td>
<td>68%</td>
</tr>
<tr>
<td>I often do something positive for my community?</td>
<td>52%</td>
</tr>
</tbody>
</table>

- Over half of all respondents agree or strongly agree with all of the asset mapping questions.
- The highest agreement is for the question “I am aware of the outside world and how it affects me” with 93% agree or strongly agree.
- The lowest agreement is for the question “I often do something positive for my community” with 52% agree or strongly agree.
<table>
<thead>
<tr>
<th>Question</th>
<th>% of respondents who disagree or strongly disagree with the statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>I meet and socialise regularly with family, friends, colleagues or neighbours?</td>
<td>12%</td>
</tr>
<tr>
<td>I feel I am able to enjoy activities that suit my feeling of mobility and fitness?</td>
<td>16%</td>
</tr>
<tr>
<td>I am aware of the outside world and how it affects me?</td>
<td>4%</td>
</tr>
<tr>
<td>I have the opportunity to learn new things?</td>
<td>19%</td>
</tr>
<tr>
<td>I often do something positive for my community?</td>
<td>19%</td>
</tr>
</tbody>
</table>
Access to Services

We were also interested in how the population would like to receive information on local services and if they would like to be more involved in making decisions and choices about their health and services they receive.

![Services should be provided closer to home?](image1)

![I would like to receive information on local services from...](image2)
Respondents were also asked if they wanted to be involved in further consultations in this area, such as focus groups, workshops etc. One hundred and forty one people answered this question, of which forty six people (33%) said that they would like to be involved further. Respondents were also asked if they wanted to join Sefton Council’s e-panel (an on-line consultation tool). One hundred and forty people answered this question, of which forty six people (33%) said that they would like to join. These respondents will be contacted as part of the on-going dialogue that takes place in connection with the engagement for the Health and Wellbeing Strategy.

Open Comments

An interesting component of this general questionnaire is the response that we received in the “Comments” box on the back of the questionnaire. This gives us an insight into the barriers people are experiencing to living healthily, well and independently and how these might be overcome.

An overview of the comments received can be grouped under the following themes:

1. Cost / Increased Cost of Services
2. Changes to Benefits
3. Cost of Healthy Eating
4. Time / Scheduling of Activities
5. Support
6. Transport
7. VCF
8. Cuts

The main concern was how to have and then maintain a healthy lifestyle when the cost of attending sports and leisure facilities/classes and purchasing healthy food is high. This was compounded further by the imminent changes to the benefit system and the concerns people had about reductions in income and the impact on mental and physical health. Some respondents would like to have a healthy lifestyle but find it difficult to access sports and leisure facilities due to work and family commitments and transport. Some respondents also mentioned the difficulty of accessing their GP and health services; not being able to get a GP appointment and reduced opening hours. Some people offered some suggestions for improvement that included voluntary sector organisations providing support to people and families and a more flexible approach to using under-used buildings for providing day care activities.
9. Big Chat Results

In summer 2012, the Southport and Formby Clinical Commissioning Group (SFCCG) and the South Sefton Clinical Commissioning Group (SSCCG) invited people to come along to the first ‘Big Chat’ events to find out more about the changes to their local NHS.

Sefton Council and Sefton LINk (the Local Involvement Network representing patients) joined forces with CCG’s at the events, to talk about the greater role they will soon play in working for better health and health services.

Over 200 people came to the Big Chat and had the opportunity to give their views about plans to make Sefton a healthier place to be for everyone who lives there.

What people said at the ‘Big Chat’

Southport and Formby Clinical Commissioning Group (SFCCG):

Overall of those who attended the event...

- 80% felt the event gave them a good understanding of what the changes to the NHS will mean for Southport and Formby
- Around two thirds of people agreed with what SFCCG is aiming to do to
- Nearly 80% of people thought the event was good or very good
- Over two thirds of people felt their views had been listened to
- Over two thirds of people wanted to get involved in their local NHS

Things that people felt would further improve health in Southport and Formby included...

- For the many different health services to work better together, to make people’s care and treatment easier
- For patients to be better informed by those services involved in their care, about their care and their treatment choices
• For Southport and Formby residents to be kept updated about the work of SFCCG, and for SFCCG to be open and honest about the way it works
• To continue to invest in programmes to prevent poor health to keep people out of hospital
• For more services – like diabetes clinics, children’s immunisations and physiotherapy - to be provided closer to home rather than in hospital, with better use made of existing community facilities like Ainsdale Centre for Health and Wellbeing
• For Southport and Formby residents to have ‘real’ involvement in shaping future services and priorities, especially when there are difficult decisions to be made - through more Big Chat style events, talking directly to people who use services, web-based feedback (like email and social media) and more traditional methods (such as leaflets, newsletters and local newspapers)
• For SFCCG to support those who find it difficult to voice their views, so they too are able to have their say about their health and health services

South Sefton Clinical Commissioning Group (SSCCG):
Overall of those who attended...

• Over three quarters felt the event gave them a good understanding of what the changes to the NHS will mean for South Sefton
• Around two thirds agreed with what SSCCG is aiming to do
• Nearly 90% thought the event was good or very good
• Nearly three quarters felt their views had been listened to
• Over two thirds wanted to get involved or be kept updated about their local NHS
Things that people felt would further improve health in south Sefton included...

- For the many different health services to work better together, to make people’s care and treatment easier
- For patients to be better informed by those services involved in their care, about their care and their treatment choices
- For south Sefton residents to be kept updated about the work of SSCCG, and for SSCCG to be open and honest about the way it works
- To continue to invest in programmes to prevent poor health to keep people out of hospital, including campaigns encouraging people to use the right service for their health condition at the right time
- For more services to be provided closer to home rather than in hospital, in friendlier and more environmentally sensitive clinics and centres
- For south Sefton residents to have ‘real’ involvement in shaping future services and priorities, especially when there are difficult decisions to be made - through more Big Chat style events, talking directly to people who use services, working with partner organisations to reach their clients, web-based feedback (like email and social media) and more traditional methods (such as leaflets, newsletters and local newspapers)
- For SSCCG to support those who find it difficult to voice their views, so they too are able to have their say about their health and health services
10. Contributors

List of Contributors to the Sefton: Our Health, Our Lives Community Engagement Process (No particular order)

This list contains the people and organisations that offered sustained and invaluable support to the process. We would like to thank everyone who was part of the JSNA process and it would be impossible to list and thank everyone as it was a huge piece of work. In particular we would like to thank:

- ABILITY
- Alchemy
- Brunswick Youth Centre
- Children’s Centres
- Every Child Matters Forum
- Faith Network
- Feelgood Factory
- Friendz
- Health & Social Care Forum
- Imagine
- Lites
- Making A Difference (MAD) Group, in particular, Karen Gray and Joanne Lee
- Merseyside Partner
- New Directions
- Parenting 2000
- People First Sefton
- Prisoner Health Improvement Group
- Sandbrook Day Centre
- Sefton Access Forum
- Sefton Advocacy
- Sefton Carers Centre
- Sefton Drug Action Team, in particular Joanne Christensen
- Sefton Equalities Standing Group its networks
- Sefton Local Involvement Network (LINks), in particular, Diane Blair and Wendy Andersen
- Sefton Partnership for Older Citizens
- Sefton Pensioners Advocacy Centre and the Older People’s Forums, in particular Margaret Lambert
• Sefton Visually Impaired Group
• Sefton Youth Service
• Sefton Young Advisors
• Southport Youth Centre
• The Affordable Warmth Network
• 2gether Activities

Facilitated by staff from:

• Sefton Council for Voluntary Services, in particular:
  Betty Boner
  Rachel Bridge
  Dan Copley
  Jenny Friday

• Sefton Council, in particular:
  The Business Intelligence and Performance Team
  Sarah Austin
  Gill Cowley
  Karen Gray
  Michelle Green
  Mel James-Henry
  Michael King

• Sefton Public Health Team, in particular
  Linda Turner
  Becky Williams

• Sefton Clinical Commissioning Groups, in particular:
  Stephen Astles
  Jenny Kristiansen
  Terry Hill

• Merseyside Commissioning Support Unit, in particular:
  Kelly Jones
  Jaqueline Robinson
  Gayle Rooke
Steering Group for the SSNA

Finally we would like to acknowledge and thank all the people of Sefton who contributed to this report.
Annex 1 – Planning For Real ®

List of 81 services divided into 7 distinct areas

Community Information and Support

- Relationships and friendships
- People having a voice
- Children's centres
- Pensioners clubs
- Credit Union
- Food banks
- Community newsletter
- Support for parents
- Childcare facilities
- Youth centre
- Welfare rights and advice
- Community noticeboards

Leisure, Culture and Tourism

- Arts
- Coast
- Tourism
- Sports complex
- Parks
- Libraries
Wellbeing and Health

Mental health support
Early help with diagnosis
Early help when diagnosed
Improved access to services
Support breastfeeding
Information on healthy eating
Healthy eating courses
Promote physical activity
Early support for dementia
Well Man / Well Woman clinic
Older people living longer at home
Reduce smoking
Support for carers
Support network for the elderly
Children’s centres
GP surgeries
Walk-in centre
Care closer to home
Vulnerable people
Changes to public health
Commissioning

Traffic and Transport

Car sharing scheme
Slow traffic down
Bus routes
Improve existing bus service
Disabled access
Crime and Safety

Recycle
People afraid to go out at night
Drinking in young people
Drinking in adults
Speeding/dangerous driving
I don't feel safe here
I feel safe here
Helping local people to keep streets clean
Neighbourhood watch scheme
Police foot patrols

Training and Work
Training and employment for young people
Language barrier
Trainee and guidance support to get a job
No public transport to and from work/college
Jobs for young people
Access to jobs for disabled people
Provide local training
Volunteer centre
Job search club
Job information point
Nothing about me, without me
Young people listened to
Older people listened to
Support for local business
Local jobs for local people
Jobs for people in the Super-Port
Disabled people listened to
Friendships and relationships
Getting involved

Document control: Final Draft
prepared by Sefton Council Business Intelligence & Performance Division, Bootle Town Hall, Oriel Road, Bootle, L20 7AE, tel. 0151 934 3840
Housing

Housing for older people
Housing for young people
Life long homes
Starter homes
Sites to build family housing
Family housing
Volunteers to help with gardens
Set up residents and tenants groups
Regeneration of town centre
Annex 2 Planning for Real ® exercise – Freehand responses

(The comments are provided as written without edit)

<table>
<thead>
<tr>
<th>Postcode</th>
<th>Area</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>L20</td>
<td>Bootle</td>
<td>• Courses for people on benefits</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Continued services for drug users</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Honest interpretation of the facts</td>
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<tr>
<td></td>
<td></td>
<td>• Real prioritisation of changes required</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Support for services in care homes</td>
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<tr>
<td></td>
<td></td>
<td>• Litter collection along routes (Thornton Road)</td>
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<td></td>
<td></td>
<td>• Domestic violence support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• 4 shootings in Bootle, a real worry for families</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Worry that young people cannot access mortgages</td>
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<tr>
<td></td>
<td></td>
<td>• People showing kindness helps me feel good</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• CSA taking too much money from single dads</td>
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<tr>
<td></td>
<td></td>
<td>• Dog fouling an issue (especially in and around Peel Road, Bootle)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Better train services</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Seaforth Road needs to be quieter, mainly during the evening time</td>
</tr>
<tr>
<td>L21</td>
<td>Litherland/</td>
<td>• Community based exercises</td>
</tr>
<tr>
<td></td>
<td>Seaforth</td>
<td>• Home detox services (drugs/drink)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Contact with family members</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Ensure services are built along with new homes (in Litherland)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Maintenance of all green spaces</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• People need to be aware of what is happening and available</td>
</tr>
<tr>
<td>Postcode</td>
<td>Area</td>
<td>Response</td>
</tr>
<tr>
<td>----------</td>
<td>-------------------------------------------</td>
<td>--------------------------------------------------------------------------</td>
</tr>
<tr>
<td>L22</td>
<td>Waterloo</td>
<td>• Meeting the needs of LGB &amp; T people (adult and youth)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Support for victims of hate crime</td>
</tr>
<tr>
<td>L23</td>
<td>Crosby/ Little Crosby/ Blundellsands/</td>
<td>• Promotion of positive messages (&quot;Did You Know...? Leaflets)</td>
</tr>
<tr>
<td></td>
<td>Thornton</td>
<td>• No privatisation of NHS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Better transport links - East to West</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Suspicious of health services run by PCTs, which were likely to be cut</td>
</tr>
<tr>
<td></td>
<td></td>
<td>transferring to Council</td>
</tr>
<tr>
<td>L30</td>
<td>Netherton/ Litherland/ Bootle</td>
<td>• Better access to and support of services to looked after children</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Take art to the public</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Improve the nature reserve in Southport</td>
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<tr>
<td></td>
<td></td>
<td>• Enforce rules and laws around illegal parking in disabled spaces</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Promote more exercise activities (Zumba, walking)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Spruce up shopping area, and have Christmas lights in Southport town</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Build route/link road between Maghull and Southport</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Important to get publicity out on consultation, ensuring as many</td>
</tr>
<tr>
<td></td>
<td></td>
<td>people as possible take part</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Young people taking drugs is an issue</td>
</tr>
<tr>
<td>L31</td>
<td>Maghull/ Lydiate/ Melling</td>
<td>• Better and more consistent roads and pavements maintenance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Better and more consistent maintenance of hedgerows and grass</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Advertise what’s going on and promote positive messages</td>
</tr>
<tr>
<td>Postcode</td>
<td>Area</td>
<td>Response</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| L37      | Formby                      | • Better recycling services from Sefton MBC, especially for cardboard  
• Difficult to make priority choices. Everything equally as important                     |
| L38      | Hightown/Ince Blundell      | • Children's activities in parks; including music, games, story telling, races and a petting/mini zoo                                   |
| PR8      | Southport/Birkdale/Ainsdale | • Promote support services through local press advertisements  
• Important to attract revenue and facilities for leisure  
• Help people where needed; don't become a "Nanny State"  
• Enforce upgrade of older houses and build on brown field sites  
• Information and treatment for drug addiction in young people  
• More taxation on the wealthy - or mitigate impacts of welfare cuts  
• Continued drug treatment services  
• Greater drug and alcohol services  
• Need for a coach park in Southport  
• People don’t know where to go for help with dementia  
• Parents not informed on what their children are up to  
• Traffic calming and needs for more money to enforce speed limits  
• Health Service in Sefton needs improving. Diagnosed with issue, needed to go to Liverpool for action  
• 10 year waiting lists on housing in Sefton  
• Roads with huge potholes being ignored |
<table>
<thead>
<tr>
<th>Postcode</th>
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<tbody>
<tr>
<td>PR9</td>
<td>Southport</td>
<td>• Support for victims of hate crime&lt;br&gt;• Cheaper transport for young people&lt;br&gt;• Compulsory language learning in schools/colleges&lt;br&gt;• LGBT support services for young people&lt;br&gt;• Keep bus passes (a national issue). Important for older people health and wellbeing&lt;br&gt;• Concern about high fees for bowling clubs&lt;br&gt;• Important that street lighting remains on for all during the evening hours&lt;br&gt;• Everybody should pay Poll Tax&lt;br&gt;• Better transport links - East to West</td>
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<td>• Dedicated information channel on local TV supported by advertising&lt;br&gt;• Problem with drugs in parks&lt;br&gt;• One Vision Housing need to be more responsive on repairs&lt;br&gt;• Greater training opportunities for over 25s&lt;br&gt;• Sefton@Work to speak to parents in Children's centres&lt;br&gt;• Need to know plans for Pinfold area of Sefton&lt;br&gt;• Better rail links to Kirkby and Fazakerley&lt;br&gt;• Regeneration of Netherton Shopping Centre</td>
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