



Blackpool Central East (Layton) Health and Wellbeing Inquiry A Citizens Inquiry 2018



Acknowledgements

Thank you to the members of the Citizens Inquiry, who placed their trust in the process and us as facilitators. This diverse, inspiring group of local people came together week after week to share their opinions and experiences with each other and us in the hope that their efforts, openness and commitment might make a difference to their own communities.

About the author

The recommendations produced by the members of the Citizens Inquiry are reproduced here in their own words. The remaining content was written by Peter Bryant and Nick Beddow of Shared Future. No legal responsibility can be accepted for any loss or damage resultant from the contents of this document. It does not necessarily represent the view of Shared Future in relation to particular policy or projects.

About Shared Future

We are a community interest company primarily serving the North West of England, and with associates based across the UK. Our aim is to provide an excellent service that makes a difference to communities and individuals and works towards a fairer, more equal society.

Through our commitment to creating a fairer and more sustainable world, we decided to set up Shared Future in 2009. We've built a team of experienced consultants and practitioners with a diverse range of skills. We work together on worthwhile and stimulating projects that reflect our personal values.



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Summary

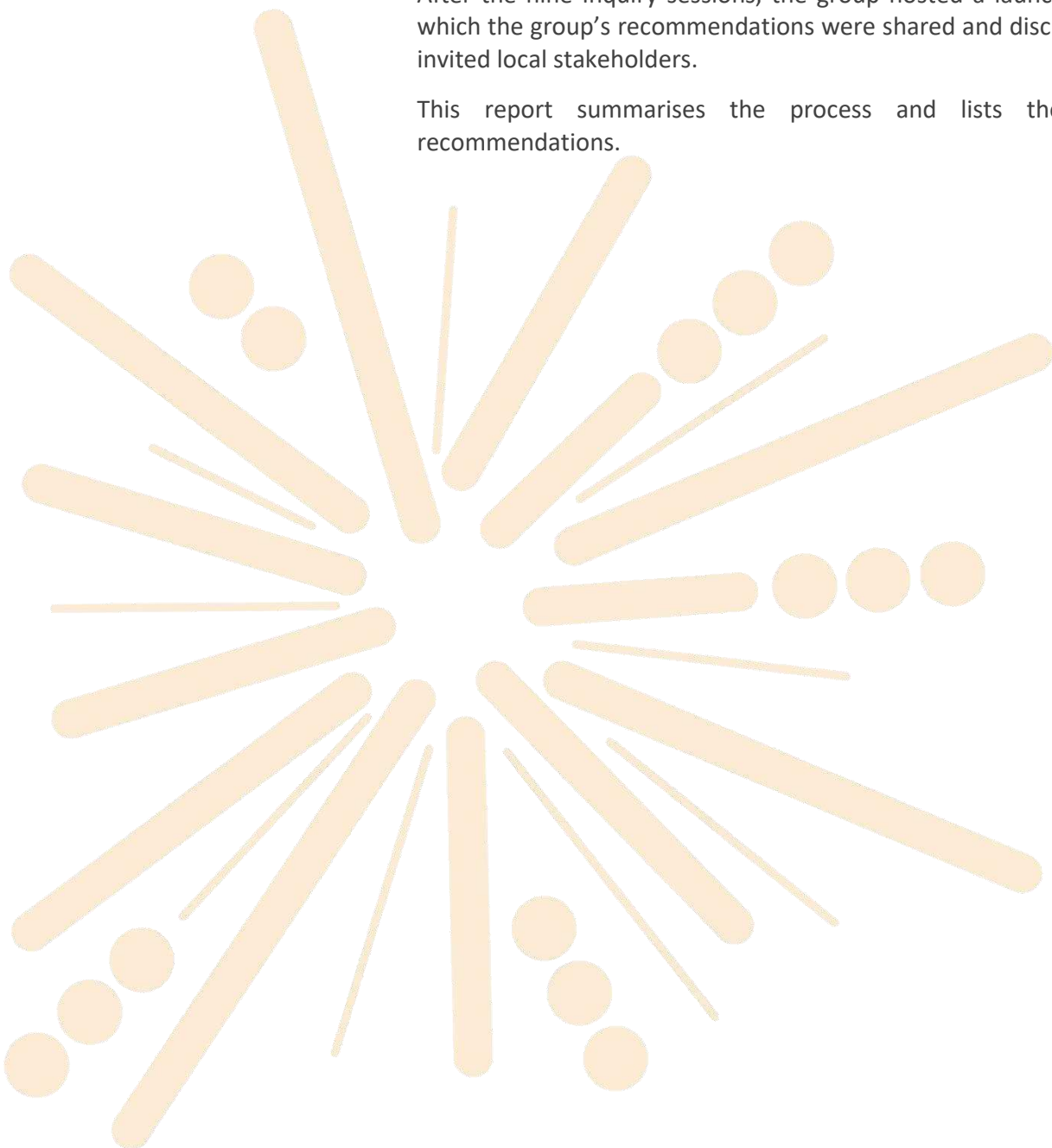
Between February and April 2018 twenty three residents from Blackpool Central East took part in nine sessions of deliberation to produce a set of recommendations that attempted to answer the question:

‘for people living in Blackpool Central East what are the main things that affect people’s health and well-being and what can be done about them?’

Members of the Citizens Inquiry shared their experiences and opinions in a highly participatory process.

After the nine Inquiry sessions, the group hosted a launch event at which the group’s recommendations were shared and discussed with invited local stakeholders.

This report summarises the process and lists the group’s recommendations.



1. Introduction

The Blackpool Central East Health and Well-Being Inquiry brought together a group of local residents to discuss the main things that affect people's health and wellbeing and what can be done to address them. A Citizens Inquiry is an example of a mini public, in which a diverse group of local people are given the opportunity to share opinions and experiences with each other and to hear from others before producing a set of recommendations. This Inquiry was the fourth Inquiry to explore Health and Wellbeing in different neighbourhoods in Blackpool.

Community orientated primary care

Part of the aim of the Citizens Inquiry process is to attempt to encourage a move from a largely medical model (which encourages services which respond to people's health to focus mainly on diagnosis and treatment) to one which recognises the social and other determinants of health and well-being.

In order to achieve this it is essential to enable citizens and stakeholders to work closely together so that they are able to jointly examine what the reality is now (what is working and what isn't) and to chart a course forward together.

Process

The Inquiry took place on Thursdays from February to April 2018. Each of the sessions lasted some two and a half hours. During these informal and relaxed sessions a diverse group of local residents were encouraged to think and talk about well-being and health in their neighbourhood. A number of experts ('commentators') were invited to come and speak at some of the sessions to add knowledge and to help them explore how things could be changed.

Elements of the inquiry process are based upon the model of the citizens jury. Deliberative processes such as Citizens' Juries have been praised for their ability to allow citizens to question the 'expertise' of others, to appreciate the knowledge and opinions of others and after intense deliberation to strive towards producing agreed conclusions which are for the public good. Similar citizens juries have been organised across the world on a variety of topics; some at a local neighbourhood level, some at a regional level and on occasion at a national or on an international scale.

Recruitment

Central to a citizens jury process is the recruitment of participants. A large amount of effort was put into making sure that a diverse group of local residents were able to take part. The aim was to recruit people who are usually excluded from participatory processes.

The image shows two overlapping application forms for the Blackpool Council Clinical Commissioning Group. The top form is titled 'APPLICATION FORM' and 'I am interested in taking part in The Central East Blackpool Health and Wellbeing Inquiry.' The bottom form is titled 'The Central East Blackpool Health and Wellbeing Inquiry' and contains a letter to residents asking them to participate. Both forms include contact information for Peter Bryant and Liz Petch.

Following on from successful practice used in previous Inquiries a recruitment letter was written outlining the aims of the Inquiry and explaining that in recognition of the time commitment required, payments in the form of vouchers and expenses were available.

To incentivise consistent attendance, participants received shopping vouchers at the end of the Inquiry process (equivalent to £20 per session). There was also a budget for participant support costs (including child care).

In the letter, residents were invited to complete a very simple one page form to register their interest in taking part, and express their preference for afternoon or evening sessions. They also had the option of filling in the form over the telephone to receive additional support. Freepost envelopes were included within the letter.

Volunteers from the Streetlife Trust posted letters through as many letterboxes as possible within the catchment area, to ensure a large reach (2,000 letters). Streetlife is a Blackpool-based youth work charity whose aim is to assist vulnerable young people in the area <http://www.wearestreetlife.org/>. The volunteers from Streetlife were given vouchers to deliver the letters and to further assist with recruitment. Blackpool's Clinical Commissioning Group (CCG) encouraged all local GP practice managers to promote the opportunity and letters were also distributed via local agencies.

As a result of the recruitment process 52 applications were received. The majority of the applicants were available during the evening rather than in the day and some of the applicants were from outside of the target area. This gave us a short list of applicants. In an attempt to ensure we had a diverse group of participants some additional outreach work was carried out (walking the streets in the target area).

A total of 26 people were invited to the first session and **23 people** attended at least one session

Why did I take part?

You made us feel welcome - otherwise it would have been daunting to come along on my own when I didn't know the other people. Now I see them and where before I might nod at some people now we stop for a conversation"

The main group of 23 people had the following demographics:

- 8 males and 15 females.
- Two 16 to 19-year olds
- Six 20 to 35-year-olds.
- Four 36 to 45-year-olds.
- Seven 46 to 60-year-olds.
- Four people older than 60

One of the applicants required childcare

Why did I take part?

'I decided to take part because I was curious and also because I wanted to meet other people from Layton'.

The Shared Future team (with input from Blackpool Council) identified the Layton Institute, a social club and pub on Westcliffe Drive, as a suitable venue due to its central nature, reputation, access for wheelchair users and large meeting space.



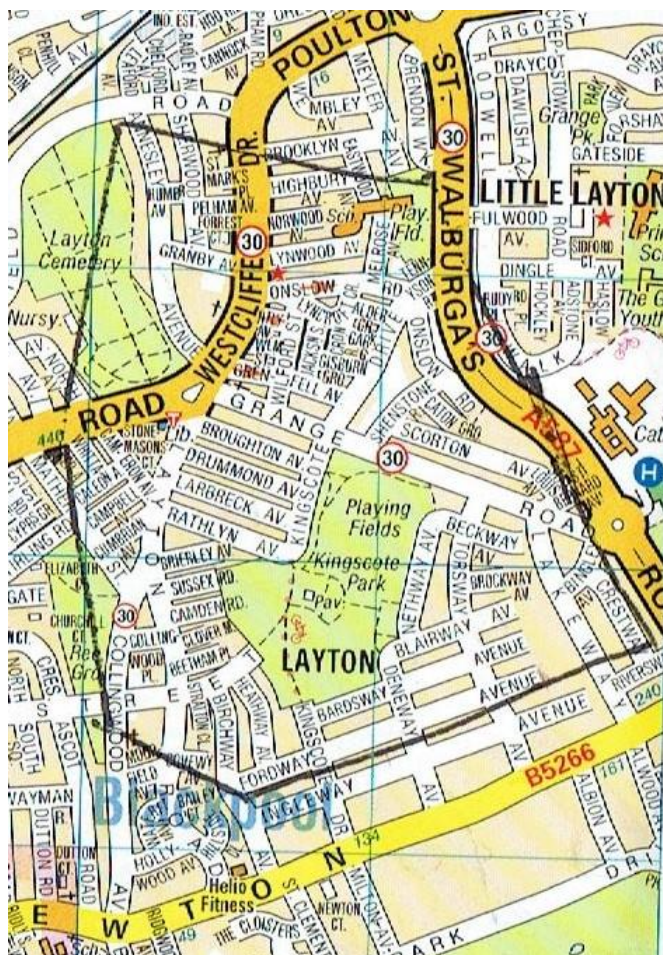
All participants were spoken to on the phone prior to the first session. This is important in establishing a relationship and checking that everybody's support needs were being met.

The Inquiry answered the following question:

'for people living in Blackpool Central East what are the main things that affect people's health and wellbeing and what can be done about them?'

Why Blackpool Central East?

Discussions between Blackpool Clinical Commissioning Group and Blackpool Council's Public Health Department decided to focus the work of the Inquiry within a catchment area around Layton Medical Centre.



The boundaries of the target area in Blackpool Central East

Blackpool experiences significant levels of disadvantage; the 2015 IMD ranks Blackpool as the most deprived local authority area in the country based on a number of indicators including health, income, employment, and education and skills.

Central East is mainly covered by the Layton and Park wards and has similar levels of deprivation to the Blackpool average. Approximately 44% of the population live in areas in the most disadvantaged quintile in England, however there is a higher proportion living in the least deprived quintiles than generally across Blackpool. There is a significantly higher proportion of younger people, 30% are aged

Why did I take part?

'I took part because I wanted to make a difference in my community for my children, so they could be proud of where they live and proud of me for helping to make those changes a reality'

under 25, and the over 65 population is significantly lower than the Blackpool average. Central East is a settled community with similar levels of transience to the national average and is generally made up of families with limited resources who have to budget to make ends meet, mature homeowners of affordable homes with a stable lifestyle and single people privately renting for the short term.

Life expectancy is one of the key indicators of health in a population and Blackpool has the lowest life expectancy in the country for men (74.2 years) and the second lowest for women (79.5 years). Life expectancy in Central East neighbourhood is estimated to be approximately 75.2 years for males and 79.8 years for females.

Over half the population in Central East report having a long standing health condition, though this is significantly lower than the Blackpool average of 62% and is the lowest of all the neighbourhoods. This is due to the younger population who will have fewer age related health conditions. The proportion of people in paid work/full time education and unemployed are, respectively higher and lower than the Blackpool average. Central East has the highest proportion of people in paid work/full time education of all the neighbourhoods, again reflecting the younger, working age population settled in the area, though jobs are more likely to be of the routine/lower supervisory type.

Smoking is the most important cause of preventable ill health and premature mortality in the UK. It is a major risk factor for many diseases, such as lung cancer, chronic obstructive pulmonary disease and heart disease and is a modifiable lifestyle risk factor. There are an estimated 5,600 smokers in Central East and rates are similar to the Blackpool average and significantly higher than the national figure. However, ex-smoking prevalence is significantly

higher than the national average, suggesting that people do want to give up.

Blackpool has some of the highest levels of alcohol related harm in the country; this not only directly contributes to health effects such as premature death and chronic liver disease but also carries other consequences such as disorder and violence. There are an estimated 24% of adults who binge drink in the neighbourhood and while hospital admissions for alcohol related harm are similar to Blackpool averages, they are significantly higher than the national average.

People are living longer but spending more years in ill-health and for several conditions; although death rates have declined, the overall health burden is increasing. Sickness and chronic disability are causing a much greater proportion of the burden of disease as people are living longer with several illnesses. However, Central East has significantly lower rates of most diagnosed illness than the Blackpool average, especially circulatory diseases and long term conditions more related to old age. However, mental ill-health is an issue in the neighbourhood with rates of depression and anxiety significantly higher than the Blackpool average.

Like all neighbourhoods in Blackpool, mortality is significantly higher than the national average. However, rates in Central East are generally lower than the Blackpool average. One in three deaths in England occur among people who are under the age of 75 and around two-thirds of deaths among the under 75s are caused by diseases and illnesses that are largely avoidable, including cancer, heart disease, stroke, respiratory and liver disease. Approximately 43% of deaths in Central East were aged under 75 years compared to 36% across Blackpool and 33% nationally. Premature mortality rates are slightly lower than the Blackpool average in Central East for both males and females.

Poverty affects one in three children in Blackpool today and in Central East there are children in approximately 30% of households, the highest proportion of households with children of all the neighbourhoods. Household income is <£20,000 in a third of homes in Central East.

Child development outcomes varies across Central East with child development at age 5 and GCSE achievement being similar to national averages in Layton but being significantly worse in Park ward.

Data from the National Child Measurement Programme shows that approximately 25% of Reception children are overweight or obese whilst in year 6 the figure increases to 37%. High levels of sugar consumption are widely recognised as a key driver of obesity levels, however it also contributes to poor levels of dental health in children. While teenage pregnancy rates are significantly higher in Park, they are similar to national averages in Layton.

Blackpool Council's neighbourhood profile for Central East can be downloaded [here](#)

Why did I take part?

The best thing about the Inquiry was that someone cares enough about our area to do something. I enjoyed meeting people and everyone genuinely focussed on Layton.



2. The Citizens Jury sessions

Sharing experiences and ideas: sessions one and two

The first two sessions of a Citizens Inquiry process are crucial. For those (like most of us) who are anxious in new situations the first session should answer many questions. For example; will I feel welcomed and valued? What will the other people there be like? Will this process make any difference to where I live? Who are the organisers? etc.

In session one and two the facilitators attempt to answer these questions and create a relaxed and informal atmosphere where people will feel comfortable contributing. Transparency is also key with a full explanation of why the process has been commissioned.

After a human bingo icebreaker, designed to allow participants to find out some more about each other, the group took part in a mapping activity.

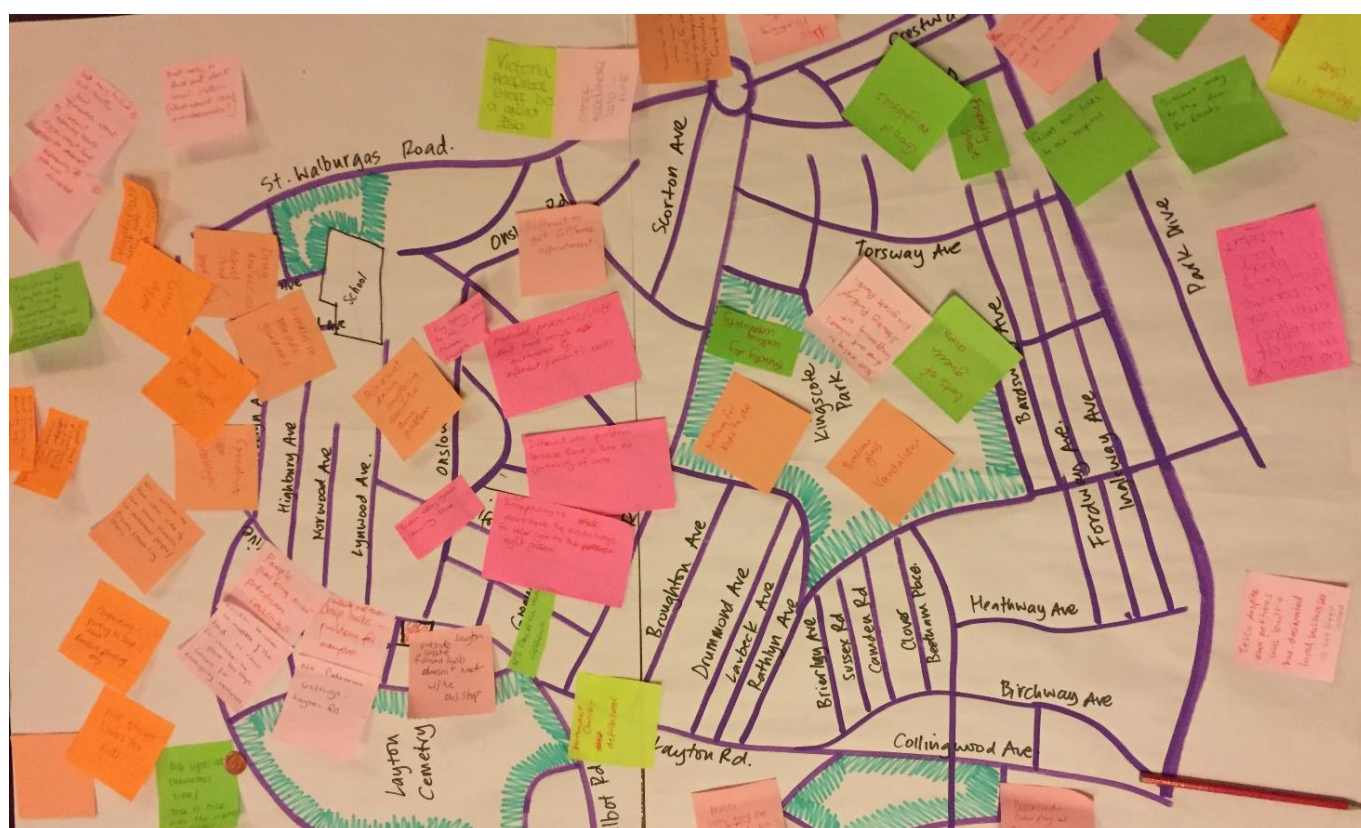
Everybody was divided into two groups and each group looked at a large hand drawn map of their neighbourhood. Using the map each group was asked to identify firstly:

‘what are things that make it easier for people to have good health and well-being?’

And secondly:

‘what are the things that make it difficult for people to have good health and well-being?’

The answers to these questions were spoken and then written on post-it notes and stuck in the appropriate place. This activity stimulated a great deal of conversation with people sharing their opinions and personal experiences.



‘Mapping activity from session 1. Participants were asked to record on green post its ‘what makes it easier to have high levels of health and wellbeing’ and on orange and pink post its ‘what makes it difficult

Order	Barrier (that makes it difficult for people to have high levels of health and well-being)	Number of votes
1st	Blackpool Council, health providers, MPs, emergency services and others don't communicate very well with residents or consult or listen properly. We don't know how money is spent, we should have the chance to vote on important issues.	16
2nd	Kingscote Park and other parks. The grass needs cutting. There should be more space to play and there is too much dog dirt. Also, there is not enough events on the local park.	15
3rd	Not enough or no police regularly on the streets to keep an eye on things. Not enough community policing or neighbourhood watch.	14
4th	Not enough things for young people/children to do including safe play parks, youth clubs for teenagers. As a result, some young people are using drugs and alcohol	13
Joint 5th	Bullying is a big problem for young people, some people feel suicidal and self-harm. It needs to be dealt with more appropriately and young people need help and support. Teenagers are being bullied or wearing on branded clothes and for the race religion and sexuality (hate crime).	12
Joint 5th	Dog dirt and dog behaviour. There is too much dog dirt on pavements and in other public areas. Dog owners don't pick it up and it doesn't get cleaned up quickly enough if at all. Some dog owners let their dogs off the lead which can be threatening for some people. On Collingwood Avenue you can't get to the dog poo bins as they are behind a fence.	12
Joint 6th	Not enough information is available about what is happening in the local area (activities, services)	11
Joint 6th	Not enough community led groups and projects and activities for adults and children	11
7th	GP receptionists are unhelpful, sometimes rude, have lack of knowledge.	10
Joint 8th	The police should work closer with people who live here to tackle problems with local drug dealers (we and the taxi drivers know who they are).	8
Joint 8th	It takes too long to get an appointment at the doctors. Difficult to get an appointment with the same GP.	8
Joint 8th	Blocked drains; to be maintained and cleansed regularly. Is this why Devonshire Road is always closed after rain??	8
Joint 8th	Benches in the middle of the road on West Cliff Drive.	8
Joint 9th	Too many people are alone/lonely.	7
Joint 9th	Problems with roads and pavements for disabled people and parents with prams e.g. drop curbs, raised bus stops, access to shops.	7
Joint 9th	Council needs to focus more on people that live here not visitors.	7
Joint 9th	Not enough pride in the community which means that people accept littering and petty vandalism as the norm. e.g. an incentive program for community spirit volunteers	7
Joint 10 th	Obesity. It needs to be tackled by making it cheaper to use leisure centres.	6
Joint 10th	Pot holes are an issue. Costing the owner hundreds in wear and tear	6
Joint 11 th	Not enough bins on the streets	5
Joint 11th	Too many cyclists on the pavement and police not doing anything about it.	5
Joint 11th	Drugs and alcohol.	5
Joint 12th	New mums can often feel isolated and depressed. There needs to be more support for them. Existing baby/toddler groups are few and far between and poor quality	4
Joint 12th	Vandalism e.g. cars getting smashed up for fun.	4
Joint 12th	Medical facilities not fully accessible for disabled people	4
Joint 13 th	Community gyms and sports centres are not accessible for disabled people (e.g. staff need training, exercise machines are not suitable)	3
Joint 13 th	Lack of money for health visitors to do routine checks any more	3
Joint 13th	Car park charges at hospital and parking at doctors	3
Joint 13th	Zebra crossing needed near shops	3
Joint 13th	6% increase in council tax. Where is the money going? Roughly £30 extra a month!	3
Joint 13th	Why wasn't there a public vote on the railway development (tramline) it will affect local shops when roads are closed.	3
Joint 14th	Difficult to cross the train track at Layton train station	2
Joint 14th	Being charged for green bins.	2
Joint 14th	Wrong diagnosis from GPs and receptionists. e.g. get antidepressants rather than being assessed	2
15th	Difficult to eat healthy. Too many fast food places, difficult to understand labelling, lack of greengrocers	1

Commentator sessions: deliberation in action

The Inquiry now moved into the Commentator phase: Commentators are an essential part of the Inquiry process and are invited to speak on the issues that the participants prioritised in week two in order to further their understanding. Commentators can offer new opinions to the participants and help them to reach their own conclusions. The Inquiry presents commentators with a rare opportunity to engage directly with local people in order to understand their realities and to share ideas about solutions that will have real benefit. Commentators have found that this exposure benefits them in their own work.

The Commentators are, in effect, the 'expert witness' who are called before the residents to give their testimony: the residents are the Jury who will decide what to accept and what to challenge.

Each commentator was identified based on the issues prioritised by the residents.

The commentators were briefed in advance to guide their contributions within the ethos of community-led deliberation:

All commentators were invited to talk for up to 15 minutes on one or more of the issues prioritised by the citizens in session two. In their presentations they were encouraged to include:

- Details of who they are (and their organisation)
- An explanation what they feel the problem or issues are
- An explanation of what they feel are some of the solutions.

Essential to the success of the process is the use of clear, simple, easy to understand language.



Commentator, Alan Cavill, Director of Place, Blackpool Council,



Commentators

Kate Jackson: Commissioner: NHS Blackpool Clinical Commissioning Group

Sam Wainwright: Set Up Specialist Support Worker: UR Potential

John Hawkin, Head of Leisure, Catering Services and Illuminations: Blackpool Council

Chief Inspector Lee Wilson: Lancashire Constabulary

Alan Cavill, Director of Place, Blackpool Council

Bren Cook: Senior Lecturer in Youth and Community, Bolton University

A red card system was used where people are encouraged to show the red card if they are having difficulty understanding what is being said.

After each presentation, commentators are asked to leave the room to allow participants the space to talk with each other about their learning and to write any questions they may have. These questions are then shared with the facilitator. Finally, in the absence of the commentator, participants are asked to reflect on their learning and deliberate with each other. This helps to ensure that the conclusions reached are their own and feel ownership over any actions that they decide upon.

This was achieved through creating lots of small group spaces for people to talk in. Sometimes the participants chose which groups they would join and on other occasions they were allocated to groups to ensure that everybody spent time with each other. On one occasion a 'speed dating activity' was used in an effort to get participants talking to each other about what had interested them so far in the discussions and secondly to give them an opportunity to share with others anything they felt hadn't been talked about yet but was of great importance.

During week six the group were asked to take part in a short evaluation activity, reflecting upon the process so far. Their thoughts are recorded in Appendix 2.



Group members take part in a 'speed dating' activity

All the questions written by participants for the commentators are listed in full in Appendix 1.

In addition to the commentator sessions participants were given the opportunity to spend lots of time talking to each other, sharing opinions, challenging each other, arguing, talking through relevant experiences and so gaining a better understanding of each person's needs and perspectives.

Why did I take part?

You made us feel important because you wanted to find out our views. I couldn't wait to come to the meetings - I like it when groups come together, and enjoyed how people started coming up with more each time as people began talking more freely over time.

3.Recommendations

Recommendation writing

In the last two sessions the group prepared their set of recommendations. Participants were asked to reflect on the process so far and to think about some of the draft recommendations they would like to share with others.

These draft recommendations gave the facilitators a set of themes under which all the recommendations so far could be grouped.

- Being able to influence council and other agencies
- Young people
- Parks, open spaces
- Litter and dog mess
- Knowing what's on and what's available
- GPs and Health services
- Disability access

The group was asked for volunteers to act as convenors of discussions on each of the themes, and all the participants chose to join a themed group to tighten up the format of the recommendation and make new ones.

The facilitators circulated to ask probing questions, to help the group create specific statements which would be comprehensible to all. Liz Petch (Public Health,Blackpool Council), was available to the participants as a 'resource person under strict instructions to only join a group if anyone had a

Why did I take part?

I felt it matters what we say, putting Layton to rights.

specific question that needed her specialist knowledge.

All the draft recommendations were then displayed on the wall. The facilitators read out all the recommendations so that participants could check their understanding in preparation for voting.

It is at this point that some participants seek clarification and some of the recommendations may be edited in the light of the discussions.

It was stressed to all the participants that every single recommendation is recorded irrespective of how many votes it gets. Every participant was then given an individual alphabetised voting sheet to confidentially choose their top seven recommendations.

All recommendations irrespective of the number of votes received are listed in the following section.

The participants were asked the question

'for people living in Blackpool Central East what are the main things that affect people's health and wellbeing and what can be done about them?'

They decided upon recommendations and prioritised them using a voting system. Each participant had seven anonymous votes. The following table shows the results:

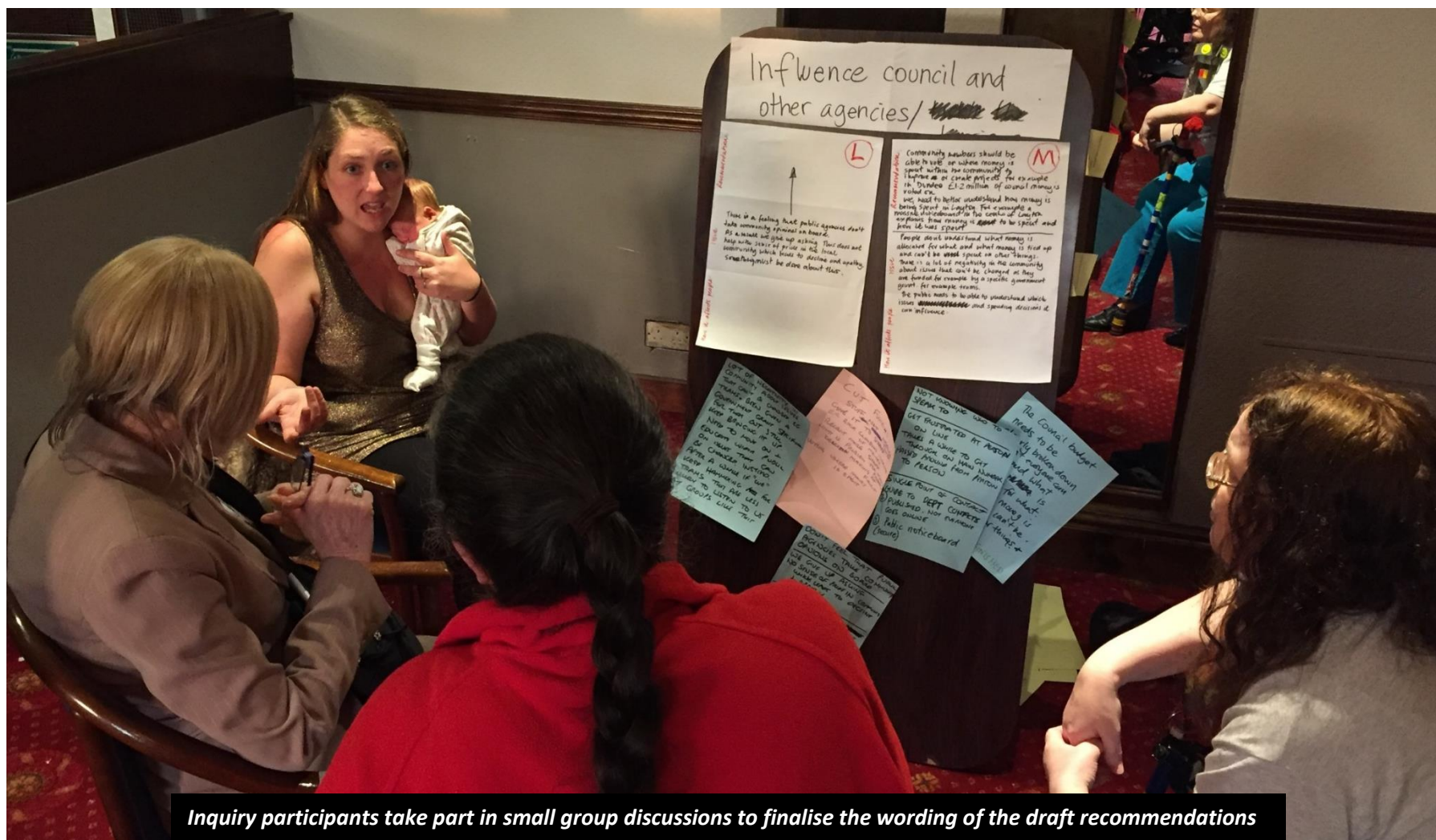


Theme	Recommendation	What is the issue and how does it affect people?	Vote
Litter and dog mess	Tackle the problem of dog mess by: a) providing more bins everywhere and dog poo bag points. b) Impose a £200 fine for dog mess and use the income from these fines to fund environmental and Park improvements. c) More 'no dog fouling' signs and volunteer patrols. d) Investigate ways to shame dog owners that don't pick up their mess. A. Investigate idea of reintroducing dog licenses.	Issue: Dog owners are not taking responsibility for clearing up their dog mess. We need to influence all generations to care for the streets and green spaces. How does it affect people? Dog mess puts residents off going to the park. It looks awful and gives a bad impression of the area. It spreads diseases and leads to apathy and neglect.	20 (1 st)
GPs and Health services	Improve the service we get from GPs by: a. making sure that patients get to see the <u>same</u> doctor b. repair the connection between the GP and the patient, don't treat them like a robot. c. shorten waiting times. d. Make GP surgeries 'out of hours' available.	Issue: patients get tired of seeing different doctors and repeating themselves with ongoing medical problems. If you keep patients with the same doctor friendships can develop. How does it affect people? If people can't get appointments they feel disappointed, the patient becomes drained and then mistrusts.	17 (2 nd)
Litter and dog mess	More regularly emptied bins are needed in the park. We need more regular litter picks. Some Inquiry members are interested in starting a monthly litter pick if the council can provide equipment and collect the full litter bags	Issue: not enough bins on the park, many are full. Broken glass which is dangerous for children. How does it affect people? It puts residents off going to the park. It looks awful and gives a bad impression of the area	15 (equal 3 rd)
Parks, open spaces,	Update and fix outdoor play equipment in the play park and resurface the ground. (Investigate the possibility of moving adult gym equipment from Boundary Park to Kingscote Park).	Issue: /poor quality equipment in the play park How does it affect people? Residents don't want to take their children to the play park. Injuries could occur to children, children don't have any activity in the park.	15 (equal 3 rd)
Young people	A local youth group, activities and support for teenagers. 'Adults have the pub as their space, so why don't we have a place, it should be equal'. Young people should also be given free access to sports and leisure facilities as well as a creative area to create their own graffiti.	Issue: 'in my opinion I think a youth group for teenagers should be created to give us a bit of our own space, something that is cheap and keeps us occupied, off the streets and out of trouble. Teenagers nowadays smash cars, fight, smoke weed or are taking drugs, they do this because	14 (4 th)

		<p>there isn't anything for us to do so they see it as a resource from being bored. But, if a youth group was created and activities, young people would not be in danger on the streets or doing ridiculous stuff like taking drugs and getting involved with the police'.</p> <p>How it affects people? The lack of activities and support leads to poor self-esteem, problems with mental health, resilience. Children are at increased risk of roaming the streets.</p>	
Being able to influence council and other agencies	There is a feeling that public agencies don't take community opinions on board. As a result, we give up asking. This does not help with a sense of pride in the local community which leads to decline and apathy. Something must be done about this.		13 (equal 5 th)
Being able to influence council and other agencies	Community members should be able to vote on where money is spent within the community to improve or create projects, for example in Dundee £1.2 million of council money is voted on. We need to better understand how money is being spent in Layton. For example, a massive noticeboard in the centre of Layton, which explains how money is to be spent and how it was spent.	Issue: people don't understand what money is allocated for what and what money is tied up and can't be spent on other things. There is a lot of negativity in the community about issues that can't be changed as they are funded for example by a specific government grant, for example trams. The public needs to be able to understand which issues and spending decisions it can influence.	12 (equal 5 th)
Parks, open spaces,	Set aside some of the park for growing vegetables for the community	Issue: the Inquiry group needs permission to start some kind of scheme, to start some vegetable/fruit growing. How does it affect people? Good community spirit, local shops and residents could purchase fruit and vegetables. Great confidence boost for individuals.	11 (equal 5 th)
Parks, open spaces,	Grass cutting in parks and open spaces needs to be more regular. Volunteers could be trained up to do this. With some assistance from the Council with machinery and protective clothing.	How does it affect people? Children can't play ball games, prams can't be pushed through the park. There are unseen dangerous objects in the long grass (including dog mess and used needles). If the	11 (equal 5 th)

		grass was cut more often we would be able to see these things.	
Knowing what's on and what's available	The council and other agencies need to find better ways of advertising what is going on locally. e.g. a big noticeboard in a secure community location.	Issue: not enough people are aware of what is going on, there is not enough advertising. How does it affect people? People are missing out on opportunities.	10 (6 th)
GPs and Health services / disability access	There needs to be specifically adapted fully accessible GP surgeries that are accessible for every disability	Issue: there are no fully accessible GP surgeries i.e. no hoists/beds/dentist chairs. How does it affect people? Different disabilities are not catered for.	7 (7 th)
Young people	The council budget spent on vandalism should instead be redirected to spend on youth provision.		6 (equal 8 th)
Parks, open spaces,	There is a drainage problem in Kingscote Park when it rains heavily. Improve the drainage or turn it into a pond to attract wildlife.		6 (equal 8 th)
Disability access	<p>All people in charge of health and well-being related services must make sure that they are complying with their legal duties to make services fully accessible to all communities and individuals.</p> <p>To ensure that the needs of disabled people are taken into account, in terms of the design and delivery of services, representatives of people with disabilities should be appointed to all of the following: Blackpool Health and Well-being Board, Hospital Trust Board, local Care Trust, Blackpool Healthwatch, Blackpool NW Alliance Trust Board.</p> <p>The above meetings should address:</p> <ol style="list-style-type: none"> 1. Making sure that third-party organisations who are being commissioned to provide services are complying with accessibility standards and legislation and contracts are <u>not</u> awarded to those who will not comply. 2. How to provide fully accessible information in a range of communication methods. e.g. on medication, websites, on signage, on reading material, hearing loop systems should be provided. 3. Fully accessible public transport. 		4 (equal 9 th)

	Staff training in helping people in buildings.		
All themes	In Layton, follow the Grange Park example by having a points scheme (a loyalty scheme) which rewards people that spend time volunteering. Sponsors are needed to make sure this happens.		4 (equal 9 th)



Inquiry participants take part in small group discussions to finalise the wording of the draft recommendations

4. Inquiry Launch Event: May 8th 2018

The launch event brought together agencies and inquiry participants to hear about the ideas and recommendations which the Inquiry group believe can improve health and well-being and to begin to identify agency response, future community action by residents and greater resident's influence in policy-making. Some thirty-five people took part in the event in the community centre @The Grange at Grange Park.

The members of the Central East inquiry met in advance for two sessions during which they agreed a format for the event, decided roles and responsibilities, and practiced their presentations.

The inquiry members used a PowerPoint slideshow to describe why they decided to get involved, how they had worked together and to outline their recommendations.

The recommendations were grouped into six key themes:

- Being able to influence council and other agencies
- Young people
- Parks, open spaces
- Litter and dog mess
- Knowing what's on and what's available
- GPs and Health services
- Disability access

After the slideshow, participants were invited to pick a theme they felt they could influence and were

interested in. Each theme was allocated a meeting space, with pre-agreed residents hosting each small group and recording ideas for action. After 30 minutes participants were invited to rotate to other discussions.

During these discussions a range of commitments were made by both agencies and Inquiry members. For example:

- A commitment from Inquiry members to 'research evidence of where participatory budgeting has worked elsewhere, especially if linked to council priorities of improving communities. Director of Public Health to then take to a corporate leadership team meeting at Blackpool Council.
- A commitment from some Inquiry members to continue to meet and become known to local public agencies
- A commitment from the CCG to investigate opportunities to advertise on wheelie bins and toilet doors.

The Inquiry members will continue to meet to push for change



Appendix 1: Commentator sessions

Questions put to commentators

Kate Jackson: Commissioner: NHS Blackpool Clinical Commissioning Group

1. What is an occupational therapist?
2. In accident and emergency, the waiting time is too long sometimes 16 hours.
3. Social services not communicating with service users?
4. Tell us more about the COPD project.
5. What services are there for mental health and well-being programs in Layton?
6. What services are commissioned to cover tourists and do you get extra money?
7. For referrals from primary to secondary care could the patient proactively make appointments, which can be quicker rather than putting pressure on the GP?
8. The poor quality of care services what are you doing to change it?
9. What is a locum doctor and how long are they staying at a practice?
10. What percentage of money is going on projects in Layton and what are they? E.g. Health and well-being counsellor, drop in counsellors, experienced receptionists.
11. Why is there a lack of teenage help with mental health issues: self-harming, drugs, alcohol. Why is there no place for them?
12. If the council members and officials are joining the CCG board. Will non-medical people be voting on specialised medical condition and services?
13. We have high mortality rates why is this? is it anything to do with the difficulty of getting GPs?
14. What are you doing to promote continuity and quality of service?

Sam Wainwright: Set Up Specialist Support Worker: UR Potential

1. Is there a sort of incentive for taking part in groups?
2. Is it possible to have a more local location?
3. Do these projects just target problem kids?
4. Giving free suits etc. is this abused at all?
5. Education for parents better on communication with young people?
6. I'm still not clear what services/activities for young people actually happen in Layton?
7. Where are your groups advertised?
8. There is a concern that naughty kids are being prioritised is this fair?
9. Why isn't there more education on bullying with children wanting to take part in community projects?
10. Instead of trying to find funding to create more groups can't you point the children in the direction of an already existing group?
11. Do you link with the Council and their groups for young people?
12. What happens when the EU funding is no longer available? Especially if this is one of the main sources of income for support?
13. Why isn't the big rock climbing wall used as you come into Blackpool it's just a waste?
14. How do you assess eligibility i.e. referrals for bikes, bus passes, laptops, suits?
15. Are the information technology courses just for the able-bodied people or is there assistant/support for those either with a disability and if so what/who funds equipment needed to support those less able?
16. Kids these days want more variety in these projects i.e. rock climbing, football, active/keep fit.

17. How do you determine which activities are chosen for these groups? Are the young people asked what they want to do and how often? How did they put suggestions forward?
18. Why aren't parents/guardians informed about these projects? We get the same story on school holidays: I'm bored!!
19. Who decides where the funding is spent?
20. Have you got a public committee to decide where the money goes?



21. Funding needs to be more fair so everyone has a chance at activities.
22. Seems to be a bias towards certain groups?
23. What youth activities do you offer in Layton?

John Hawkin, Head of Leisure, Catering Services and Illuminations: Blackpool Council

1. Why isn't there any devices for disabled people to use in sports centres being e.g. special equipment to accommodate wheelchairs and move limbs for people?
2. You seem to be in charge of a lot of departments do you physically oversee them all or just allocate budgets?
3. Who polices the investments in the park and public places etc? How much revenue was generated from dog littering and waste?

4. Is anything being done to make access to gyms, sports centres, swimming pools affordable? How can families on low incomes/benefits get equal access? What is available for disabled people?
5. How can it be that parents aren't giving their children breakfast?
6. What is being done to keep parks safe and accessible for children and families? i.e. graffiti, broken glass and broken play equipment? Fire setting drug paraphernalia, needles?
7. Is there any way we can help cut the grass?
8. Can we better utilise community payback offenders or job seeker allowance recipients to cut the grass, tidy up, mark pitches etc?
9. What are you doing to get more volunteers to support the maintenance of local green spaces and sponsorship?

Chief Inspector Lee Wilson: Lancashire Constabulary

1. What is it going to take to bring back a community and what can we do to help?
2. Is there an anonymous phone number for people to ring to tell the police where the drug dealers live? How many calls have to be logged against an address before action is taken?
3. What are you doing to help people get more involved in their own communities?
4. Spice drugs what are you doing about them?
5. We often feel intimidated by big groups of young people on the streets, what is the police's response?
6. What are you doing about drugs and drug dealers?
7. Taxi drivers and neighbours know where the drug dealers live are the police listening to them?
8. If the community is the key to improving Blackpool (Layton) what are the police doing to engage the community? To make Blackpool better? I.e. volunteers,

neighbourhood watch, support groups, youth projects?

9. Is there a policy on going for the bigger drug gangs over small fish?
10. We don't see PCSOs in Layton any more, where are they?
11. What are budgets for policing for visitors versus residents?
12. Are the amount of licensed premises opening till late in town pulling resources away from areas like Layton?
13. Who is paying for the police at the fracking protest, is it Cuadrilla?
14. The fracking demonstrators seem peaceful, why are so many police needed? Who are they protecting?

Alan Cavill, Director of Place, Blackpool Council

1. Is there any chance of getting rid of the dangerous thoroughfare on the Promenade?
2. Can you tell us more about the cold calling stickers scheme?
3. How much more money will the tram line extension bring in?
4. Why don't the council impose fines for antisocial behaviour like other towns and cities?
5. What are the council doing to generate more business (ex tourism) i.e. investment?
6. Why hold a budget consultation in the library? In the library isn't just jobseeker

claimants? Why aren't they held in local schools?

7. Why can't these (Health and Well-Being) Inquiry sessions be held on a monthly basis? If they were held in local schools during evenings? Locals can then interact with councillors and local authorities. It's the best way forward for communities, issues could be aired and resolved.
8. What are the council doing to generate more business investment in Blackpool to supplement tourism? Why aren't we benefiting from the fracking income?
9. We think it's odd that we spend £1 million on advertising and £4 million on tourism?
10. How much is it costing to advertise the drop-ins?
11. What research was carried out for 300 to 400 yards? The vast cost. When the homeless people are struggling to find food kitchens, clothes (the hostels need more now).
12. What is your personal opinion about tourists being a strain on the NHS? Why aren't we charging other councils for the treatment tourists receive?
13. Do you personally think the tram is a good idea?
14. Can we get rid of the dangerous thoroughfare on the Promenade? We don't know what is pavement and what is road.



Bren Cook: Senior Lecturer in Youth and Community, Bolton University

1. Who do we approach for our £134,000? How did they get their money (participatory budgeting)?
2. Some of us wants to carry on meeting to take action. We can maybe meet at the community house and create a question how easy or difficult it be to achieve this do you think?
3. How do we ignite the community's passion for becoming active (if there aren't disasters etc.)?
4. There should be a process in place that means more people can decide how money is spent and everyone should get feedback about what decisions are eventually made so people can see they've been heard. What do you think?
5. How do we give empowerment back to the community?
6. How do find out about available grants?
7. Who would be the right person to talk about growing fruit and veg on spare land? Is there any way of approaching a member of the council to set up a community allotment? Can we just dig up spare green land and start these activities? I'm sure free fruit and veg would help a lot of struggling families without food bank as an option.
8. Who can help us to organise ourselves?
9. Consultations should have a time limit for responses from the powerful – how do we get that?
10. How can we get back the right to be taken seriously by decision-makers?



Appendix 2: Evaluation

During session 6 all participants were asked to talk to others in the group about their experience of the Inquiry through a speed dating activity. In particular they were asked to think about 'Things we've liked', 'Things we have not been keen on' and any suggested 'changes'?

Things we've liked

- ✓ Listening to guest speakers
- ✓ Meeting local people
- ✓ Found the organisation to be very good at getting the best out of everyone
- ✓ Its been run really well and Pete and Nick are great at encouraging us.
- ✓ Police guest speaker was really good
- ✓ Nick and Pete
- ✓ Police excellent
- ✓ Good friendly company we feel like our voices are being heard
- ✓ Pete and Nick will explain everything and answer any questions
- ✓ Things like this group make you see community spirit still exists
- ✓ Council – good presentation
- ✓ Good to meet nice people say hello and socialise
- ✓ Police excellent presentation
- ✓ Ive enjoyed engaging and talking about our community
- ✓ Meeting different characters
- ✓ Enjoyed meeting new people. lovely and friendly. Will miss it when it ends
- ✓ Getting the opportunity to speak with people who have more influence on change
- ✓ Police Inspector was a straight-talking chap
- ✓ Good that groups get mixed up to talk to different people

- ✓ Nick and Pete well organised
- ✓ Opportunity to voice our opinions
- ✓ We are proving a force to be reckoned with.

Things we have not been keen on

- ✓ Tea urn breaking
- ✓ Sometimes stray into discussions about topics outside Layton
- ✓ Some evaluation activities take too long and we are sat around talking afterwards
- ✓ Would have liked more time to cross examine the guests
- ✓ UR Potential presentation was weak – couldn't hear her – not convinced!
- ✓ More educational materials on the issues from the speakers
- ✓ Speakers not given enough time to give full answers
- ✓ UR Potential presentation not good
- ✓ No dislikes I am a happy bunny. Group sessions well run.

Changes?

- ✓ More fun, ice breakers and games please
- ✓ More time with commentators, Q and A too rushed.
- ✓ Time for questions too short
- ✓ Visitors should speak at the beginning as we always run out of time.
- ✓ The venue can be noisy tap tap tap tap tap
- ✓ Longer times with speakers? Lee Wilson especially
- ✓ Please include vouchers with the last three sessions next time

- ✓ The venue (noisy)
- ✓ Disability facilities should be a lot better!
- ✓ The place bit noisy and intimidating
- ✓ Better time management
- ✓ Not enough time to question the speakers
- ✓ More time for presentations
- ✓ Don't have first two speakers again have police inspector as well as fire and ambulance
- ✓ It could be kept not 9 sessions if time was used more effectively- seems to be going ages.
- ✓ Longer sessions
- ✓ A fairer breakdown of the community involvement from minority members



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A Citizens Inquiry 2018



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