



Blackpool Far North Health and Wellbeing Inquiry

A Citizens Inquiry 2017



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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Contents

Summary	3
1. Introduction	4
Why Blackpool Far North?	6
2. The Citizens Jury sessions	8
Sharing experiences and ideas: sessions one and two.....	8
Commentator sessions: deliberation in action.....	11
Recommendation writing	15
3. Recommendations	16
4. Launch Event.....	19
Appendix 1: Commentator sessions.....	21
Appendix 2: Evaluation	25

Summary

Between October and December 2017 eighteen residents from Blackpool Far North were invited to take part in nine sessions of deliberation to try and produce a set of recommendations that attempted to answer the question:

‘for people living in Blackpool Far North 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

Blackpool Far North 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.

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 October to December 2017. 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 project steering group met on a number of occasions to identify a strategy for reaching people in the target area.

The image shows two overlapping recruitment forms for the Blackpool Council Health and Wellbeing Inquiry. The forms are titled 'The Anchorsholme and Cleveleys Health and Wellbeing Inquiry' and 'Blackpool Council'. They include sections for personal details, contact information, and a declaration of interest. The forms are filled out with handwritten information, including names, addresses, and dates. The forms also include a section for 'Do you require any special requirements?' and a section for 'Do you require any childcare for the meetings?'. The forms are signed by participants and dated. The forms are also stamped with 'your care our priority' and 'Shared Future'.

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.

As a result of the recruitment process 34 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 adjacent to and surrounding Victoria Road West).

A total of **26 people** were invited to the first session. A total of **18 people** attended at least one session with an average attendance over the 9 sessions of **15 people**.

The main group of 18 people had the following demographics:

- Seven males and eleven females.
- Three 16 to 19 year olds
- One 20 to 35-year-olds.
- Four 36 to 45-year-olds.
- Five 46 to 60-year-olds.
- Five people older than 60.

Why did I take part?

'I came to the group because I wanted to make a difference for young people in Blackpool as I think that if you believe something is wrong you should stand up and do something about it. I feel that it has given people of all ages a voice and my confidence has also grown a lot I have come from being the shy girl in the corner of the classroom to someone who is proud to have a voice. From taking part, myself and a few other members are starting some courses ran by one of organisations that attended the Inquiry. The Inquiry was very interesting and a useful experience and I am glad I took part'.

None of the applicants required childcare and some of the participants brought children with them to many of the sessions.

Blackpool Council's community engagement team and Shared Future facilitators worked hard to identify a suitable venue in the area. However, this proved difficult. It is essential to use a venue that is comfortable, central, easily accessible and at the same time is viewed in a favourable light for those considering joining the Inquiry. The Star Cafe on Victoria Road West was chosen after the owner agreed to open up the cafe for our exclusive use in the evenings. This proved to be an excellent choice as many of the participants noted.

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

The Inquiry answered the following question:

'For people living in Blackpool Far North what are the main things that affect people's health and wellbeing and what can be done about them?'

Why Blackpool Far North?

Discussions between Blackpool Clinical Commissioning Group and Blackpool Council's Public Health Department decided to focus the work of the Inquiry within the immediate locality of the GP Practices in Cleveleys to try and capture a mixture of housing types. Whilst this decision meant that the recruitment area went beyond the boundaries of Blackpool Council it was felt important that residents had an opportunity to raise issues relevant to the way people live, their social connections and where they may access services and from whom, rather than restricting to Council



boundaries.

The boundaries of the target area in Blackpool Far North

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.

Why did I take part?

'I used to spend my working life travelling to Manchester working hard, coming home, raising a couple of kids, didn't have much time to link into the community then....I live on my own in a bungalow in Blackpool Far North. There are lots of lonely people. I appreciate and use a lot of the council services and the NHS I saw this as a lovely opportunity to find other people's experiences and also to put something positive into what we do in this area.'

'When the letter arrived.....I couldn't pass up the opportunity to get in there and have my say quite frankly.....I kind of came along because I had an issue and I wanted to get that addressed. The beautiful thing that happened over the course of the sessions - I've listened to these other people's stories I've had the opportunity to get an insight into other people's lives as well and made me realise that it's easy for us all to live in our little bubbles and worry about our own things but this was a fabulous opportunity really to look outside that to see what else is going on for other people and for us all to work together to come up with these recommendations'

Far North is the least disadvantaged part of Blackpool with less than 10% of the population living in England's most disadvantaged areas. Almost 60% of the population live outside Blackpool's local authority boundary.

Far North is the most stable neighbourhood with low levels of transience; it has the highest proportion of older people and fewer young people when compared to Blackpool. Almost a third of the population is aged over 65.

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 Far North neighbourhood is estimated

to be approximately 77.3 years for males and 81.8 years for females.

Over two thirds of the population in Far North report having a long standing health condition. Though not significantly higher than the Blackpool average of 62%, it is the highest of all the neighbourhoods. The proportion of people in paid work/full time education or who are unemployed is significantly lower than the Blackpool and England average, reflecting the older retired population living in the area.

Overall, Far North, with relatively low levels of deprivation, unemployment and the highest life expectancy is the least disadvantaged of all Blackpool neighbourhoods, though the ageing population does increase the burden of disease in this area.

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. While there are an estimated 3,200 smokers in Far North; rates are significantly lower than the Blackpool average and more in line with national figures. Ex-smoking prevalence is also higher than the national average.

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 18% of adults who binge drink in the neighbourhood and though hospital admissions for alcohol related harm are lower than across Blackpool, they are still 20% 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. Far North generally has significantly higher rates of diagnosed illness than the Blackpool average, especially circulatory diseases and long term conditions more related to old age.

Diagnosed mental health problems are generally lower in Far North than across Blackpool, apart from dementia which is linked to the older population.

Like all neighbourhoods in Blackpool, mortality is significantly higher than the national average. However, rates in Far North are significantly lower than the Blackpool average.

One in 3 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 25% of deaths in Far North were aged under 75 years compared to 36% across Blackpool and 33% nationally. Premature mortality rates are significantly lower than the Blackpool average in Far North for both males and females.

Although poverty affects one in three children in Blackpool today, in Far North the situation is improving with 1 in 6 children in a low income family. Child development outcomes are better than average. Almost two thirds (63%) of children have a good level of development at the age of 5 years and 60% achieved 5 A*-C GCSE results.

Data from the National Child Measurement Programme shows that approximately 28% of Reception children are overweight or obese whilst in year 6 the figure increases to 33%. 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.

Far North has lower teenage pregnancy rates than the Blackpool average and is similar to national averages.

Blackpool Council's neighbourhood profile for Far North can be downloaded at

<http://www.blackpooljsna.org.uk/Documents/Blackpool-Profile/Far-North.pdf>

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 yellow post its ‘what makes it easier to have high levels of health and wellbeing’ and on red post its ‘what makes it difficult to have high levels of health and wellbeing’.



The group also attempted to look at some of the root causes of the problems identified during the previous activity. They did this through a **'problem tree'**. A large tree drawn on a series of flipcharts was stuck on the wall. On the trunk of the tree was written the problem under consideration i.e. not very good health and well-being.

The group was then encouraged to share with each other what they felt are the root causes of the problem. These were then written on post-its and stuck on the roots of the tree. The facilitator repeatedly asked the question 'why is that?' in an effort to identify the root causes of each problem.



'Problem tree produced by the group exploring the 'root causes' of possible 'poor health and wellbeing in Blackpool Far North)



During the second session the group talked in depth with each other before identifying the 28 key issues which they felt were **'the things that make it difficult for people to have high levels of health and wellbeing'**?

To show which issues they felt were the most important each person was then given 7 anonymous votes. The results helped decide which topics needed to be explored in greater depth with the commentators over the next 5 sessions.



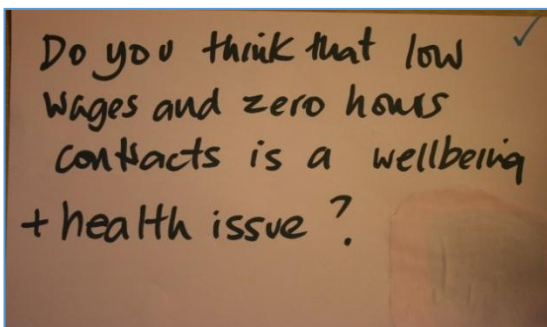
The group identify the key issues

Order	Barrier (that makes it difficult for people to have high levels of health and well-being)	votes
Joint 1st	Isolation and loneliness	7
Joint 1st	Libraries are closing	7
Joint 1st	Too many charity shops in Cleveleys (doesn't attract visitors / Cleveleys is out of date	7
Joint 2nd	Healthy Food: needs to be cheaper, people don't have the skills to eat healthily and there is a need for cooking lessons in schools	6
Joint 2nd	Bad parking e.g. pavements/schools/double parking	6
Joint 2nd	It's dangerous that there is no road crossing on Amounderness Way	6
Joint 3 rd	Not enough for young people to do - more/events/entertainment needed for teenagers. The image of Cleveleys is not cool	5
Joint 3 rd	Not enough for people to do (that is affordable)	5
Joint 3 rd	Road safety – speeding in quite a few areas	5
Joint 4th	Unemployment (especially young people), loss of local jobs ICI etc	4
Joint 4th	Low wages (for young people (e.g. zero hours contracts)	4
Joint 5 th	No visible police locally	3
Joint 5 th	Make the place look happier so other people will like it	3
Joint 5 th	Support for new mums especially isolated and with parenting and feeding	3
Joint 6th	Too many takeaway's	2
Joint 6th	More equipment needed on the park for older children. Make the park safer	2
Joint 6 th	Reduce the number of exams in a day (stress at school)	2
Joint 6th	Building on flooded areas	2
Joint 6th	The town is too focused on tourists	2
Joint 6th	Large groups of youths can make people feel intimidated	2
Joint 6th	No bus routes to the YMCA and generally around Cleveleys	2
Joint 7th	Why are Balfour Beatty taking so long to replace gas pipes?	1
Joint 7th	Obstacles on pavements in Cleveleys e.g. benches, A boards etc	1
Joint 7th	Fitness and young people (fitness trackers for young people)	1
Joint 8th	No local banks – need a single joint bank outlet	0
Joint 8th	Anxiety about terror attacks	0
Joint 8th	No benches for shoppers to rest	0
Joint 8th	In schools make the homework a bit easier	0

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 is called before the residents to give their testimony: the residents are the Jury who will decide what to accept and what to challenge.

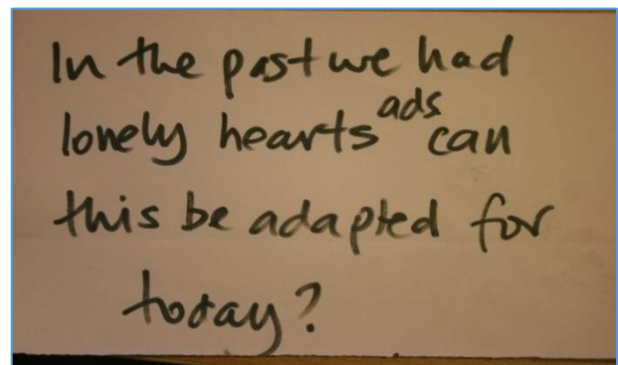


Each commentator was identified based on the issues prioritised by the residents. The commentators were briefed in advance to guide their contributions within the ethos of community-led deliberation:

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. 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 that they feel ownership over any actions that they decide upon.



Anne Oliver, Age UK presents to the group

Commentators

Judith Mills, Consultant in Public Health, Blackpool Council (2nd November)

Anne Oliver, Community Engagement Manager, Age UK Lancashire (9th November)

Nicky Dennison, Senior Public Health Practitioner, Blackpool Council (16th November)

Mandy Clarke, Community Beat Manager, Lancashire Constabulary (16th November)

Nina Beavers, Operations Manager, UR Potential (23rd November)

Chris Williams: Senior Programme Manager: New Economics Foundation (30th November skype)

Patrick Jenkinson, Team Leader, Wyre Libraries, Lancashire County Council and
Helen Boone, Frontline Officer, Home Library Services, Lancashire County Council

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.

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.



Mandy Clarke, Community Beat Manager, Lancashire Constabulary, answers questions from the group

In week three Inquiry members also considered their vision of life in Blackpool Far North in ten years' time. A summary of their thoughts is recorded in the next two photographs.

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.



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.

- GPs / health support
- Mental health / loneliness and isolation
- Learning
- Community facilities (libraries, hotels, parks)
- Young people
- Traffic / parking
- Food

The group was asked for volunteers to act as convenors of discussions on each of the five 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 and Shelley Birch, (Partnerships Co-Ordinator from Wyre Council), were available to the participants as 'resource people' under strict instructions to only join a group if anyone had a specific question that needed their 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.



Participants consider some of the draft recommendations before voting

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



3. Recommendations

The participants were asked the question **‘for people living in Blackpool Far North 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. They had seven votes each. Their votes were anonymous. The following table shows the results:

Theme	Rank	Votes	Recommendation
Mental health, loneliness and isolation	1st	8	Mental health, more help is needed and there must be stronger interventions for people who are stressed.
Mental health, loneliness and isolation	=2	7	Loneliness is a big problem and there are many people living alone. This should be addressed by 1) recognising that all of us (including retired people) have skills and experiences that can be shared. Volunteers could use a questionnaire to find out what lonely people would like to do, e.g. walking, reading etc. and to set up new groups for help people to join existing groups. Some of the group are interested in doing this 2) making sure information is available on what opportunities exist for people. The FYI directory must be regularly updated with such opportunities including a printed copy (delivered by volunteers) delivered to all homes especially where people live alone and places where people gather.
Young people. Community facilities	=2	7	Young people; a) gambling online, today is too easily accessible for young people. Specifically through ‘loot boxes’ in videogames b) this in-grains gambling in children at a young age and spends parents money c) it is disguised in such a way by game companies that loopholes are found for them to say it is not gambling d) government/gambling body should be petitioned to investigate the predatory practice and make it illegal for games not aged 18+ to allow ‘loot box’ gambling.
Young people. Community facilities	=3	6	More employment opportunities for young people, because it’s difficult to get employment without previous work experience.
Young people. Community facilities	=3	6	People don’t know how to care for themselves when they leave school as they are not taught any life skills. This impacts local people as they don’t know how to apply for a job, a decent meal or pay a bill. This results in lots of unemployment in Blackpool and people with health and weight problems as they don’t know how to create something tasty yet healthy. This could be fixed by teaching life skills in schools so when the students leave they can lead a healthy and happy lifestyle. This could be supplemented by more advertisement of healthier meal options and education in life skills.
Young people. Community facilities	=3	6	Parks are not safe at night due to inadequate lighting. Some smaller streets also lack good lighting. The council should find a way to ensure parks and small streets are well lit.
GPs and health support	=4	5	Having more trained nurses in hospitals as they are running low and waiting lists for patients are growing larger
Employment, training and learning	=4	5	There needs to be more opportunities for people to learn new skills, this helps with personal development, confidence and isolation. This can be done through putting on classes or helping people to share skills with each other.

Police, traffic and parking		=4	5	Pavement parking and pavement furniture are dangerous to pedestrians (particularly people with sight loss/prams/wheelchairs/extra children) and near schools it is particularly dangerous at school drop-off and pickup times. There should be stricter laws on pavement parking so more of the pavement is available for pedestrians. The government should be petitioned on this.
Employment, training and learning		=5	4	Employers need to provide a living wage and work contracts that give you security and employee benefits (sick pay, holiday pay, pension) and not just seasonal or temporary contracts. The impact of this is unemployment, poverty, lack of life quality, health problems, lack of security, inequality and crime. This has come about because of austerity, lack of investment, the erosion of workers rights, a target driven culture, privatisation and a failure to value workers.
Young people. Community facilities		=5	4	Supermarkets should give food that is near its sell by date to schools, so that children can learn how to cook and the food be given to homeless people.
GPs and health support		=5	4	Often it's not possible to book a GP appointment within the week that you ring; the danger is that you might not recognise how serious your condition is and also you might self diagnose which could have very serious implications.
GPs and health support		=5	4	GP appointments are too short for people to explain in full their problems/anxieties and ask for advice.
GPs and health support	the way services are delivered	=5	4	All health professionals need to understand the importance of assistance dogs for people with sight loss and how vital it is that they are able to be present during consultations.
Police, traffic, parking		=5	4	Victoria Road East down to the promenade is unhealthy for residents due to traffic; older people are at risk of being run over and traffic fumes affect everyone. To solve these problems the existing road should be turned into a walkway.
Police, traffic, parking		=5	4	The Millfield school children who live on the Cleveleys side of Amounderness Way are in danger of being run over in attempting to cross a hazardous road. There should be a crossing from the school across Amounderness Way.
Young people. Community facilities		=5	4	Young people stay out very late at night and are intimidating. This makes local people including other teenagers feel uncomfortable and intimidated, this behaviour is often caused through boredom and a weak support network. This could be prevented by more mental health support and more activities for young people in the area.
Police, traffic, parking		=5	4	Council parking: consider a redesign of double yellow, single yellow lines - main roads E.g. Devonshire / Fleetwood Road. The focus is on visitors not residents e.g. we can often not use our drives on and off safely.
GPs and health support		=6	3	All GP surgeries should have Patient Participation Groups (PPGs). They are needed to ensure that GP surgeries serve the needs of their communities. Writing your opinions online is not good enough

GPs and health support		=6	3	Setting up diabetes awareness groups for all ages to discuss how they are dealing with it and how they could give each other tips and ideas on how to do better. (Not just for diabetics but also relatives or partners and friends).
GPs and health support		=7	2	GPs and receptionists all too often don't show good people skills and acknowledge each individual patient. This leaves people feeling like they are treated as numbers not human beings this can be hurtful and upsetting. This can be addressed by GPs and receptionists receiving regular training and awareness and by the Patient Participation Group (PPG) having people with a variety of experiences (e.g. people with impairments), explaining their needs.
GPs and health support		=7	2	Blackpool has no breastfeeding support i.e. mother to mother support to help with feeding in the early days. The impact of this is increased risk of postnatal depression and increased risk of cancer and osteoporosis later in life for mum. It also leads to increased risk of infections and stomach bugs in the baby as well as increased risk of tooth decay and obesity as they grow. Funded breastfeeding support would reduce these risks and provide cost savings overall.
Employment, training and learning		=7	2	Shortage of mobile phone courses for beginners. Access to information limited with little knowledge of how to use them correctly. Technology is moving too quickly therefore we need courses in using mobile phones to be run locally (maybe in library settings)
Young people. Community facilities		=7	2	There is too much educational stress on young people which can result in physical and mental health issues. There are too many exams in one day for the mocks. There should be more support in place for the students as they don't get a rest from schoolwork. Schools should show the students more coping mechanisms for the stress.
GPs and health support		=7	2	Waiting for scan results for more than two months is unacceptable.
GPs and health support		=7	2	There needs to be a night-time number for people that receive national health continuing care (nursing care) for emergency situations at night time. This would ensure that when health reaches a crisis point help is available.
GPs and health support		=8	1	There are too many takeaways in our area. We should limit the number of takeaways in the future.
GPs and health support		=8	1	All children at school should have eye tests.
The way services are delivered	Young people. Community facilities	=9	-	Councils should not give away libraries to other organisations.
The way services are delivered	Police, traffic, parking	=9	-	Encourage more walk to schools to stop/reduce mayhem at drop-off and pickup times, encourage healthy behaviours (exercise) and reduce CO2 through car fumes.

4. Launch event: January 25th 2018



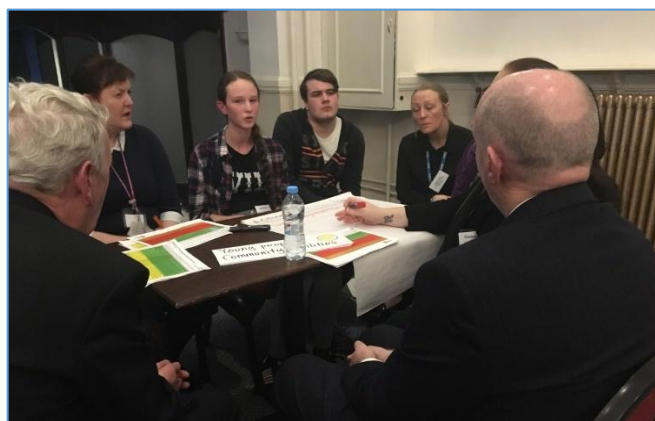
The launch event brought together agencies and Inquiry participants to hear about the ideas and recommendations which the Inquiry group believe can improve health and well-being and to begin to identify agency response, future community action by residents and greater resident's influence in policy-making. Some 60 people took part in the event in the Winter Gardens.

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:

1. GPs and health support.
2. Mental health, loneliness and isolation.
3. The way services are delivered.
4. Young people. Community facilities.
5. Employment, training and learning.
6. Police, traffic and parking.



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



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.



The Inquiry members and any agencies interested in attending will meet again in April 2018.



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

For example:

- A commitment from the CCG to 'speak to CCG Commissioners and GPs to review the capacity of health and well-being support workers'.
- A commitment from Blackpool Council's Public health to continue to work on 'putting together the case for limiting the number of takeaways by stopping new ones from opening'.
- The CCG to investigate the possibility of Inquiry members working with the CCG on a training video for GPs and receptionists.
- Inquiry participants to work with Blackpool Council (Public Health) to look at how they can best 'contact lonely residents'

Appendix 1: Commentator sessions

Questions put to commentators

**Judith Mills, Consultant in Public Health,
Blackpool Council (2nd November)**

1. Do you think that low wages and zero hours contracts is a health and well-being issue?
2. What is the relationship between the Council and the Police? You said crime has decreased. What is the uptake for neighbourhood watch areas? Does anyone encourage them? (My car was ransacked two weeks ago when it was on my drive).
3. Why is nothing done about people cycling to fast on narrow pavements? People ignore the roads or use them at night without lights. Just because we have some cycle paths it doesn't mean you can cycle on pavements and across zebra crossings.
4. Why do we have to pay for CAMHS (Children and Adolescents Mental Health Service) after so many sessions?
5. Crossings - how can you put a price on people's lives?
6. What are your plans for supporting breastfeeding and in particular the public image of it?
7. What more can be done to make Amounderness Way safer to cross? (Morrison's roundabout crossing by Anchorsholme exit)
8. A directory or leaflet relating to finding local tradesmen for small jobs?
9. Can old (closed) libraries be turned into youth/senior/baby groups?
10. How can we get more sensory enhancements in primary schools?
11. Do you still fund smoking cessation?
12. How are you advertising 'For Your Information' (FYI)?
13. Why can't we have Patient Participation Groups (PPGs) in this area (Cleveleys group practice)?

14. Why don't councils work together, Wyre and Fylde on public health issues – rubbish, recycling school holidays, local discount card?
15. Can the charity shops be limited to shops that employ people (not volunteers) unemployment, makes Cleveleys nicer.

**Anne Oliver: Community Engagement
Manager, Age UK Lancashire (9th November)**

1. How old does the client have to be to receive the befriending service?
2. What can we do to encourage people to join clubs and activities?
3. Do you promote to people under 50 who are lonely to partake in befriending so that it helps two people?
4. Do you get expenses/transport support for volunteers?
5. Do they offer help to the under 50s?
6. In the past we had lonely hearts advertisements; can this be adapted for today?
7. How and where do you usually advertise your services?
8. How do you find out someone is lonely?
9. Where does Age UK get their money?
10. Fundraising: adverts on TV; isolated and lonely what are the options available?
11. Can you work on loneliness effectively if you haven't felt it yourself?
12. Do you find older people are using the Internet?
13. Why does it always have to be about money?
14. Do you think the name Age UK makes it sound like it's for the elders only?
15. How do people gain access to services offered i.e. after hospital and how are they promoted?
16. Besides money, what would you like to do in Cleveleys?
17. How would people go about finding out how to volunteer for schemes?
18. Is there a phone line for people feeling lonely?

19. Why don't you have an Age UK office in Cleveleys for people to call in for face-to-face contact?
20. Would it be possible to have an Age UK presence in existing services e.g. surgeries?
21. What is their expertise in putting together financial support for people? e.g. discount schemes and claiming benefits?
22. Befrienders take the people to where other people are a hub where befrienders meet, they then might eventually go on their own? (*an idea*).
23. How do you support your volunteers and protect and train them?
24. What time commitment do you expect from your volunteers?
25. How do you get referrals, how do people access the service?
10. Why can't we have cooking lessons in Primary schools?
11. Why don't schools make food (*from*) supermarkets and give the food to the homeless?
12. How do we encourage older adults to learn to cook more healthily?
13. Healthy weight in schools - this is sensitive information how do we deal with this?
14. Why don't we have longer to eat school dinners?
15. Why don't they carry on weigh and measure into high schools?
16. Is supporting breastfeeding part of the strategy?
17. How do you assess cafes for the Healthy Choices campaign?

**Nicky Dennison, Senior Public Health Practitioner,
Blackpool Council (16th November)**

1. In the past obesity in children was less of a problem – what can we learn from the past?
2. Pub meals always have chips as the default – why don't they encourage jacket/mashed potatoes/salad more?
3. What's the take-up for 'Cook 'n Eat' - learning how to cook healthily?
4. Why do we need to have so much choice in supermarkets; e.g. in Morrison's I counted 80 types of crisps/snacks, and a whole aisle. Can't we STOP this?
5. If you are shopping for one why are you penalised for shopping in small quantities?
6. Why in a whole lot of cafes, are there so many cakes and so few healthy options?
7. Can you search which cafes have a good Healthy Choices rating?
8. How many have you reached through the Healthy Choices campaign?
9. Why don't they teach cooking every week at high school?

**Mandy Clarke: Community Beat Manager,
Lancashire Constabulary (16th November)**

1. Do you still come out for burglaries?
2. PACT meetings - were about police and communities meeting together – do they still happen – if so when etc?
3. Is there a shoplifting for food problem in Cleveleys, if so how do you treat them?
4. In the past – there are so many more police on the streets: now there's only three in Cleveleys.
5. How can the public work with the police?
6. Are re-offending rates coming down?
7. PCSOs (Police Community Support Officers) what powers do you have?
8. Why do we have one number 999, rather than a separate number for the police/ambulance etc?
9. How do you encourage people to join the police?
10. Cyclists on the road and pavements at night without lights – what do we do about that?
11. Why don't you visit schools?
12. Why is there only two police officers in Cleveleys?
13. Who do we tell about really bad pavement parking?

14. Have you ever had a criminal who has rung you and blamed someone else?
15. How are the Fracking protests affecting the numbers of police on the streets locally?
16. Why have they got rid of CCTV in Cleveleys?

**Nina Beavers, Operations Manager,
UR Potential (23rd November)**

1. How do you train a volunteer?
2. What can be done about exam stress?
3. Why aren't there more electronic games at youth clubs?
4. How do you find out about the clubs?
5. How do you volunteer?
6. Do you have cooking lessons for youths?
7. Is it possible to get funding for old-style youth games?
8. Where does your funding come from? Do you have a long-term contract with the council? Short-term contracts are a problem - no continuity?
9. Any classes on how to use mobile phones?
10. More details please about the choir
11. Will there still be a careers advice service?
12. Who is running the first aid course?
13. Person development projects - what does that consist of?
14. If you do what people want – how do you find out what people want?
15. Tell us some of the things that were bought up by young people in the consultation.
16. How do people find you and your groups?
17. Tell us more about the organisation you represent – UR Potential?
18. When do you want to know our points of view?
19. Support for mental health and young people is not what it should be –
 - a. CAMHS - bad/impractical advice.
 - b. Very specific criteria
 What support do you give in this situation?
20. Are you doing the same youth consultation in Blackpool?

**Chris Williams: Senior Programme Manager:
New Economics Foundation**

1. I agree with your idea of linking coastal communities together - but how are you going to do it?
2. We think we need a year long, economy but need indoor facilities
3. How can we ensure that our streets aren't mainly charity shops?
4. Our area has lost the balance between the needs of residents and holidaymakers – how can we redress this?
5. Blackpool airport is shut, is this a good or bad thing?
6. What are we going to do about the amount of litter and pollution in the sea in Blackpool and Cleveleys area, to make the tourist attraction more attractive?
7. Cleveleys needs to improve its beach, how?
8. Are they going to bring dredgers to improve the fishing industry?
9. Is Blackpool on your radar? If it is not how do we make it happen?
10. Who are the community groups who are getting involved?
11. What can we do about palm oil?

**Patrick Jenkinson, Team Leader: Wyre
Libraries, Lancashire County Council and
Helen Boone: Frontline Officer, Home Library
Services, Lancashire County Council**

1. How do we make sure that Cleveleys library has similar programmes to Fleetwood? How do we influence new ideas for Cleveleys?
2. Where are the groups that use the library advertised?
3. What is the offer for young people?
4. Where is Fleetwood library? Where is Cleveleys library?
5. Accessible technology and assistive technology; is this available in Wyre?
6. Would the library be interested in a talking booklet?

7. Are talking adverts available?
8. Will URPotential be part of the library network?
9. Please explain what the arrangements are for the Cleveleys library?
10. Will the Cleveleys library still be owned by the council? Will it always be a library or might they change it to something else?
11. My local libraries are small (Moorpark and Anchorsholme), how can you run community events in small libraries? Describe how you do it in Fleetwood as I've never been to it.
12. Do you plan to loan digital/e-books?
13. Are Cleveleys being punished under privatisation? How will they make a profit or get money to run?
14. I've seen adverts that magazines are free via tablet/laptop by the library. Is this true?
15. How do people who don't want to get out contact you? What if they don't have mobile phones?
16. Do you libraries allow teenagers to play on mobile phones?
17. Depending on the area you live can you attend all of the libraries?
18. Why can't I have access to all libraries in Lancashire and Blackpool?
19. When are they going to open Thornton library?

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

- ✓ Feel like you're making a difference.
- ✓ Great venue.
- ✓ Good to involve all ages.
- ✓ I liked it because it has given me confidence and a voice.
- ✓ All the different representatives who have come in.
- ✓ The people are nice.
- ✓ Coming together from all age groups and forming a positive and interesting relationship.
- ✓ Liked the friendly attitude of all the people concerned.
- ✓ Accommodating all members of the group.
- ✓ Meeting all different people and groups i.e. hearing about what they do.
- ✓ Apple pie and custard!
- ✓ Our ideas matter.
- ✓ Like having a voice and being heard.
- ✓ Great facilitation.
- ✓ I liked the diversity of young and older generation together.
- ✓ I liked the organisers they are very welcoming.
- ✓ Knowledgeable commentators and the opportunity to ask questions.
- ✓ Location, excellent choice.
- ✓ Liked the hosts of the Inquiry and the atmosphere.
- ✓ Very topical speakers.
- ✓ I've liked having a voice and being able to speak from my point of view.
- ✓ Value-added by commentators relevant to our issues raised.
- ✓ Would do it again and recommend to others.
- ✓ Good venue easy access.
- ✓ Confidence has grown.
- ✓ Liked the people in the group.
- ✓ The venue host lovely and venue made me feel comfortable.
- ✓ Liked the fact you feel like you are making a difference.
- ✓ I have liked being invited even as a young person.

Things we have not been keen on

- Would be nice to have seen more of an equal difference in age groups.
- Could be more crossover between Blackpool and the Wyre in the discussions.
- Need more time to think about each subject.
- Not like writing on the walls. But never not felt included.
- Wyre/Lancashire/Blackpool boundary issues make some topics less relevant for some.
- I would enjoy it more if you invited some more younger children so we could share ideas so you don't have to talk to older people and boost our confidence a lot.
- Not always possible to get to all nine meetings.
- It would be nice to have more young people giving their views.

Changes?

- Would change the time of the day.
- An improvement would be inviting more young people to get a wider range of viewpoints.
- To be able to know more information from some of the visitors.



Blackpool Far North Health and Wellbeing Inquiry

A Citizens Inquiry 2017



Shared Future Community Interest Company
28 Cromwell Grove, Manchester, M19 3GB

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