

Community Action on Health

Annual Report 2002 - 2003

Co-ordinator's report

The past year has probably been the most important in terms of the history of Community Action on Health, and has certainly seen the most change. The most obvious changes are the visible ones – we have said farewell to some staff members and Trustees, welcomed new ones, and moved from staff being based in three separate offices across the city to having our own office base in Sandyford. We have strengthened our identity as a citywide organisation, with strong local links in the North, East and West of Newcastle.

But there have also been some less visible changes that have had a big impact on CAH. When we were first set up, we were about the only organisation in Newcastle focusing on involving communities in discussions about health; now there is a wide range of new initiatives set up to do this. We welcome the introduction of Patient and Public Involvement Forums, Patient Advice and Liaison Services, Independent Advocacy Services and Overview and Scrutiny Committees, as well as the establishment of Healthworks and the Community Empowerment Fund.

There is now a huge amount of work going on to involve communities in health issues, and we are using this as an opportunity to review and refocus our contribution on supporting and developing strong community networks. We will be doing this in partnership with all of the above initiatives and projects in the coming year, making sure that we compliment rather than duplicate each other's work. We

are particularly grateful for the continued financial support of Newcastle Primary Care Trust, who provide the majority of our funding.

This Annual Report gives an idea of the work that Community Action on Health has been involved in since last year's community conferences. I hope you enjoy reading it – we welcome your comment and feedback, and if you want to find out more, please contact us or visit our new website – www.caoh.org.uk

Nick Forbes CAH Co-ordinator

Community Action on Health – our work

We do exactly what our name says

Community

There are many communities in Newcastle – for example, people who live in a particular area, people who have the same faith or people involved in community projects. We try to focus our work around community groups who are most marginalised or disadvantaged in society – for example, people from black and ethnic minority communities, or people in areas with high levels of deprivation.

Action on

Often people with poor health are seen as part of the problem. We see them as part of the solution – our job is to get communities working together to tackle health inequalities. We want to see solutions to health problems that are developed "bottom up". After all, local people are the best experts in their own health!

Health

Good health is about more than just good health services – it is influenced by all sorts of things such as the environment, diet, transport and how safe people feel. We take a broad ‘social’ view of health – so all of these things are important if health is to be improved.

How does Community Action on Health fit in?

There are a number of new initiatives around which encourage people to participate in discussions about health. Nick Forbes explains why Community Action on Health is still important.

Tackling health inequalities is a fundamental part of the Government's agenda. The links between poverty and ill-health are well researched and documented; this is why Primary Care Trusts have a new statutory duty to improve health (as distinct from merely treating people who are ill). Similarly, Local Authorities have a new duty to promote the social, economic and environmental well-being of their citizens.

Statutory services, however, are unable to achieve these goals by themselves. Local communities are very much part of the solutions to such complex issues, rather than being part of the problem. Involving communities, therefore, in working together to tackle health inequalities is an essential component in improving health within the City.

Many communities in Newcastle are marginalised from being involved in such activities or discussions. This is because they experience specific forms of discrimination or disadvantage (e.g. racism, homophobia), because they need additional support to be able to be heard (e.g. interpreters or sign language) or because they are not as vocal or forward as other groups. Community Action on Health works with people from these communities to ensure that they have a strong voice around health issues.

In previous years, Community Action on Health has held local 'community conferences' in the North, East and West of

Newcastle. These have been opportunities for people in those areas to get together, discuss health issues relevant to them, and agree how to work together to tackle health inequalities. People who attend Community Action on Health conferences say that the events help them to be more confident about themselves, more assertive about their health needs and make them more likely to participate in community activities.

This year, to reflect the way in which the citywide policy context has changed and the development of Community Action on Health as a citywide (as well as locally rooted) organisation, we are holding one citywide community conference. This event will be an opportunity for people involved in a wide range of community and voluntary groups from all areas of Newcastle to come together.

The aim is to give people involved in community groups in Newcastle the opportunity to make contacts and network with people from other community groups across the city, jointly plan how communities can tackle health inequalities and speak directly to key decision-makers in local organisations (e.g. the NHS and Newcastle City Council) about issues affecting them.

The conference will be the start of a new citywide community network about health issues – one which Community Action on Health will be supporting and developing throughout the coming year. We'll be working on the issues raised by people at this year's conference, as well as helping communities with lots of opportunities to meet and discuss health issues. Why not get involved and have your say? – just contact us and we'll let you know what is happening in your area.

Health inequalities are

"Differences in health between different groups in society

**which are unfair and avoidable"
(World Health Organisation).**

**This definition means that
'health inequalities' cannot be ignored by society.**

Improving Diabetes Services

Community Action on Health has been supporting a group of people with diabetes to meet and discuss diabetes services. The group, which meets every six weeks or so, has recently designed a questionnaire to ask other service users about their experiences. If you are interested in joining the group, or would like a copy of the questionnaire, please contact Nick at the CAH Office.

Lesbians, Bisexuals and Gay Men

Working in partnership with Health Promotion and MESMAC North East, Community Action on Health has been raising awareness about some of the difficulties that lesbians, bisexuals and gay men often face in accessing primary health care services (e.g. GP practices). Issues mentioned included fears about confidentiality, worries that health professionals will make critical judgements about peoples lifestyles, and the dangers of staff assuming that people are straight. We raised these points at a number of meetings within Newcastle Primary Care Trust, along with our practical suggestions for improving facilities for LGB patients. For more information, read the full report on our website: www.caoh.org.uk

Promoting Community Involvement

Community Action on Health staff and volunteers have worked with a wide range of organisations to promote greater community and public involvement in decision-making. This work has included:

- Assisting North East Ambulance Service to develop a public involvement strategy**
- Teaching and organising placements for medical students**
- Facilitating at consultation events for people with learning difficulties**
- Supporting community involvement in the Newcastle Health Partnership**
- Attending PCT Board, Professional Executive Committee and Locality Group meetings and working groups**
- Speaking at numerous conferences and workshops about our work**

Community Action on Health Trustees

The Board of Trustees is the group who oversee the work of Community Action on Health, including agreeing work plans, monitoring budgets and managing the staff. The Trustees meet on a monthly basis – if you are interested in becoming a Trustee, please contact Nick on 261 6358 for more details.

Trustees for the year 2002 – 2003 were:

Ruth Abrahams

B Shaheen Rashid

Paul Nayyar

Mary Howarth

Nina Gordon

Alison Blackburn

Doris Curry (to May 2003)

Helen Begum (to May 2003)

Runa Begum (to May 2003)

Peggy Grant (to May 2003)

Reshmin Alam (to May 2003)

Anne Steele (to September 2003)

Peter Kenrick (from July 2003)

Staff changes

We said farewell to:

Rachel Parsons, West Development Worker, who took up a new post at the West End Health Resource Centre

Ross Cowan, North Development Worker, who went to work for VODA in North Tyneside;

Stella Carmichael, Project Development Assistant, who left to complete a study on complementary therapies.

We have welcomed:

Leslie Gibson, West Development Worker, who has previously worked in community projects in South Africa;

Marion Simpson, North Development Worker, who joined us from Newcastle Tenants Federation and Tyneside Women's Health;

Sandy Lambrou, Administration and Finance Officer, who has recently qualified as an Accounting Technician.

Financial report

Newcastle Healthy City Project handled the finances for Community Action on Health during the financial year 2002 – 2003. Income came from the following sources:

| | |
|---|-----------------|
| Newcastle Primary Care Trust (to support staff costs and developmental work) | £194,616 |
| Newcastle University (for training undertaken with medical students) | £1800 |
| Health Action Zone (contribution towards administration costs) | £6000 |
| Miscellaneous income | £1295 |

In particular, we are very grateful to Newcastle PCT for its continued support.

The registered charity Community Action on Health has two separate bank accounts. For 2002 – 2003 these stood as follows:

Current account

| | |
|---|----------------|
| Income | £150 |
| Expenditure | £115 |
| Balance at end of financial year | £896.40 |

Savings account

| | |
|-------------------------------|-----------------|
| Income | £0 |
| Expenditure | £0 |
| Balance at end of year | £3708.89 |

So, at the end of the financial year 2002 – 2003 (i.e. on 31st March 2003) the charity had total reserves of **£4605.29**

Community Action on Health North

CAH North covers the following areas: Fawdon, Blakelaw, Kenton, Castle, Grange, Gosforth, Jesmond, Woolsington. CAH North is supported by Marion Simpson

Montagu Estate - Health Needs Assessment

CAH worker Marion Simpson has been working alongside District Nurse Kelly Keech to carry out a Health Needs Assessment on the Montagu Estate in Kenton.

The work has involved asking local residents about their health concerns. Early in April Marion and Kelly organised an Open Event for local people to come along and discuss what they thought were the health issues and concerns in their area. Following on from the event the information was analysed and then discussed with a small group of residents who had agreed to be part of a focus group.

The main areas for concern were:

- the loss of the GP practice from the estate**
- environmental and transport issues**
- lack of provision for children and young people**

Many people felt they would like a "One Stop Shop" which would offer basic medical care, signposting information and other community based services such as Citizens Advice Bureau, Credit Union, and support services.

" A community drop-in centre on the estate would provide us with information on where to get services as well as some medical provision"

Marion and Kelly held a Public Meeting in June where they presented their findings to local residents, the Primary Care Trust and other service providers. Agencies are now working together to respond to the issues raised by the report.

For copies of the full document, please visit our website (www.caoh.org.uk) or call Marion in the CAH office.

Domestic Violence

Domestic violence accounts for almost a quarter (23%) of all violent crime. Many women in Newcastle will suffer from verbal, physical or emotional abuse at the hands of their partners in the next year.

Marion is a member of the Domestic Violence Health Improvement Programme Group, which is working to plan the development and provision of services to meet the needs of victims/survivors of domestic violence.

Community Action on Health is taking a leading role in developing user and public involvement in this group, which will impact on future developments in policy and practice by incorporating the views of patients and the community.

For more information about domestic violence, please contact DIVA on 272 7233

Drugs & Alcohol Issues

CAH North has been working with initiatives/forums such as the Drug Prevention Initiative, which supports local community projects to raise awareness and address the issues in their community. In particular a new network,

Newbiggin Hall Health Action Group, has been set up which is particularly looking at issues and concerns such as drug and alcohol misuse on Newbiggin Hall Estate.

The New NHS

We have been working with the PCT and other agencies to encourage access and development of services such as facilitation at community consultations. We have also been instrumental in updating Signpost Directories and ensuring wider distribution. CAH North has also been involved with initiatives such as Sure Start programmes and Public Health User Involvement development.

"A real opportunity for the reshaping and delivery of services"

Improving the health of Black and Minority Ethnic (BME) communities

The main action point from last year's conference was to establish a dedicated centre to meet the needs of the BME community in North Newcastle. A working group has now been set up to aid access to current facilities and to determine potential community developments with the long term aim of raising funds for future provision. Membership is still developing but includes CAH North, a worker from the Elswick Health Development Team, the North Newcastle Bangladeshi Welfare Association, the Gosforth Community Co-ordinator and other local workers.

Older People/Disabled People

Many of the points raised in last year's workshop emphasised the need for dissemination of information and more joint work by organisations. CAH has been working with other agencies to raise awareness of services for older people through the organisation of joint events such as the Older & Safer event at Newbiggin Hall and the Fawdon Older People's Health event.

Promoting Positive Mental Health

CAH have been working with the Primary Care Trust's Mental Health Task Team to produce a mental health resource pack for North Newcastle. The information provided includes local self-help groups, voluntary organisations, and statutory services. Funding from a number of the Council's Ward Sub-Committees in North Newcastle will enable a wide distribution to include community centres, libraries, as well as health professionals. For a copy of the resource pack, please contact the CAH office.

Making connections

CAH North is involved with a number of networks that work directly with the community to improve the health and well-being of local areas. Some of these are already mentioned but others include HealthWORKS North West, Fawdon Health Group, Blakelaw/Cowgate MAPS, Food Nutrition Action Group, North West Asylum Seekers Network, Villages in Partnership, and the North Public Health and Community Involvement Group. We also have links with a number of community forums such as the Blakelaw Network, and

Cowgate, Montagu, and Newbiggin Hall Community Forums. Marion assisted the Fawdon Community Development Worker, Emma Ramsey, in the development of a Fawdon Community Forum and was involved in a Fawdon Community Mapping Event earlier this year. CAH also have a place on the North Locality Group of the Primary Care Trust.

Getting Involved

If you would like to get involved with the work in the North please contact Marion on her direct line 0191 269 9855.

Community Action on Health East

CAH East covers the Wards of Dene, Heaton, Sandyford, Byker, Monkchester, Walker and Walkergate. CAH East is supported by Harold Norcott.

These are some of the issues we tackled over the last year. These issues were either identified at our conference in July 2002 or at the wide range of community meetings and forums that our worker attends and contributes to.

Asylum Seekers

Over the last year Community Action on Health has been actively involved in addressing a range of issues concerning asylum seekers and the groups supporting them in the East End.

After consulting with local groups and projects we came up with a plan for development and support work with asylum seeker communities. Community Action on Health developed a successful funding application to SRB6 for the East Area Asylum Seekers Support Group. This resulted in the creation of one full time post funded for 2 years plus capital and revenue budget. The post is a combination of community development work and access to services.

Community Action on Health is also involved in a group presenting and facilitating Asylum Awareness training to community groups in the East End.

This group includes representatives from Asylum Seekers Unit, East Area Asylum Seekers Support Group, Centre 48 and Byker Area Resource Centre. We have implemented and funded four sessions and are now developing a revised

programme of twelve sessions to be run until April 2004.

Community Action on Health is applying for funding to finance this work. We are also planning to do work with children and youth groups.

Community Action on Health has represented the views of Asylum Seeker Groups at the PCT East Locality Group and has lobbied for a GP Service for Asylum Seekers in the East End. Our worker is a member of the Management Committee of the East Area Asylum Seekers Support Group and contributes to the Byker Asylum Group and the Citywide Refugee and Asylum Group.

Mental Well Being

Harold is a member of the East Locality Mental Health Task Group and has helped the group to widen its membership to include community organisations and voluntary sector projects.

We have been involved in the planning and implementation of two Mental Well Being Events in the East End. The first of these was an event for mental health projects and practitioners and the second was for mental health service users, their carers and the wider community.

The events were in a market place format with stalls from a diverse group of service providers including Community Mental Health Team, East End Community Health Project, Adult Survivors of Child Abuse, NIWE etc. The events were written up in a report that has been used to influence the work of the Mental Health Task Group.

We are at present collating the results of a survey of residents

of the Walker Riverside to find out if people are stressed, what causes their stress and what they would like to see done about it.

Community Action on Health co-ordinates a group of local projects and groups in the Sandyford Ward who are involved in supporting the Vulnerable and Isolated People in the Ward. This VIP group meets on a regular basis and is a forum where best practice and information can be shared and joint projects developed. We are holding an away day to develop a programme for the next year.

Drugs

Drugs misuse is an issue that is at the top of the community agenda in the East End. Community Action on Health has brought together all the agencies involved in working with people with drug problems in the East End. There are over 50 on the mailing list. In the time the group has been meeting it has developed from an information sharing forum into a group that can influence drugs policy on a local level through input into the DAT and Regeneration initiatives.

The forum has identified a number of issues it wants to take forward including housing, access to employment, education and training, consultation with drugs service users, networking and professional development.

Community Action on Health is looking forward to organising a consultation event for drugs service users in the near future.

Food Issues

Community Action on Health are involved in Newcastle Community Food Initiative and East End Food Network. We are involved in the Five a Day Initiative where we helped organise a community consultation which fed into the New Opportunities Fund bid which we did with Community Food Initiative, East End Community Health Project, Schools Food Initiative and Health Promotion.

The Five a Day Initiative aims to promote increased consumption of fruit and vegetables. It will do this by working with community groups, retailers, and statutory and voluntary sector organisations.

Five a Day means eating five portions of fruit and vegetables per day. A portion is about 80 grammes e.g. one medium apple or three tablespoons of peas.

We are now part of the Five a Day Implementation Group that oversees the project and feeds back to the community.

Supporting Community Groups and Forums

In the East we support and consult with all manner of community groups and feed issues from these groups to relevant forums e.g. East Locality PCT.

These include: Heaton Community Network, Walker Riverside Forum, Residents and Tenants Groups, HealthWORKS East Steering Group, East End Community Health Project Board of Trustees etc

Public Health

CAH East chairs the East Locality Public Health and Inequalities Sub Group. The group focuses on the public health issues that affect people living in the East End. This group provides an effective link between the statutory and voluntary sectors and community groups. It ensures that the issues raised by the CAH Conference, HealthWORKS and other community groups working on health issues are disseminated throughout the locality and used to inform the agenda for action.

We are in partnership with the PCT, Health Works, the Local Authority and the Voluntary Sector developing a Health Plan for the Byker Ward, we will be holding a Health information Event in the near future.

Community Action on Health West

CAH West covers the following areas: Elswick, Benwell, Scotswood, West City, Moorside, Fenham, Wingrove, Lemington, Newburn, Westerhope, Denton. CAH West is supported by Leslie Gibson and Yasmin Khan.

A steering group of local people meets regularly to discuss health issues in the West End of Newcastle – if you are interested in joining this group, please contact either Leslie or Yasmin in the CAH office.

Feasibility Study for an Access Service for Black and Minority Ethnic (BME) Communities

For a number of years BME communities have identified a gap in practical support to access health provisions. For many people transport to the place of their appointment is a difficulty. Interpreters would only meet patients/clients at the point of their appointment. For some people finding their way to the correct department and communicating with staff at reception can also be problematic. After discussions with New Deal for Communities (NDC) it was agreed that they would provide some money to support some research to find out how an ‘Access Service’ would work.

Community Action on Health commissioned this research, which is now completed. The research provided a useful snapshot of the views of the BME communities in the West End of Newcastle and gave a number of options with a recommended proposal for an ‘Access Service’.

The next stage is to get citywide commitment and support to develop a service or services that will increase access to health and related services. If you would like a copy of the report, please contact Yasmin in the CAH office.

The Relocation of Bentinck Road Surgery

Following the retirement of Dr Sarma in December 2001, Newcastle Primary Care Trust (PCT) made a proposal to move Bentinck Road Surgery into Elswick Health Centre when the lease on the building ran out.

In November 2002 the PCT consulted widely on this proposed relocation. The views and opinions of many local community groups and patients were raised via Community Action on Health West, along with other local projects and organisations. As a result of seeking out views of local people CAH West produced a report highlighting peoples opinions and concerns about proposed change.

" A better area – less crime and racial harassment"

" we want a more welcoming environment, and less waiting time for appointments"

There were 2 main issues that communities mentioned:

- Concerns about safety and security issues around Elswick Health Centre, particularly fears about racial harassment**
- The need for further improvements in the services provided by the GP practice.**

In January 2003 the PCT confirmed that the Bentinck Road Surgery had to move to Elswick Clinic.

CAH West arranged a meeting in March 2003 with support from Riverside Community Project and the Health Development Service. This meeting was an opportunity for local community members and staff from key agencies such as the PCT, Local Authority, and Police to work together to address the safety and security issues being raised by the

community. A report has been produced from this meeting which states the actions needed by each organisation in order to address the concerns of local people.

A further meeting will be held in the near future to look at the service development issues at Elswick Clinic.

If you would like a copy of the report we produced, please contact Yasmin at the CAH office.

The Black Mental Health Forum

Community Action on Health West were involved in planning and organising an event in June 2002. The aim of the event was to highlight the mental health issues affecting Black and Minority Ethnic (BME) Communities including Asylum Seekers and Refugees in Newcastle. People were given the opportunity to share their experiences of mental health services, and say what improvements they would like to see to those services.

CAH West was also involved in planning and organising the follow-up event in June 2003. The aim of this event was to take forward the key recommendations from the previous event as part of a strong citywide planning strategy for BME communities.

Race Area for Special Action

Community Action on Health West are involved in the RACE ASA Advocacy Sub Group, where we are looking at setting up health advocacy for BME communities to fit in with the existing Advocacy Centre in Newcastle.

Yasmin Khan from CAH West has recently been appointed as Chair of the Race Equality Training Sub Group. The aim of this task group is to develop and implement an accredited Race Equality Training programme for NHS Staff and other community and voluntary workers.

District Nursing Services

The District Nursing service was discussed by many people at the 2002 CAH West conference. As a result, we have raised the points people made with the District Nursing Team and made a number of suggestions for improving services. These include:

- 1. Updating the information leaflet about District Nursing, and including information about how the teams work etc. This may help overcome misunderstandings about clients seeing lots of different staff.**
- 2. Providing named team leader information (perhaps on a business card) so that people have an easy point of reference if they had any queries.**
- 3. Conducting a review of District Nurse Practice, including looking at the workload of District Nurses and whether the perception about the lack of consistency of service provision is seen as correct.**

Literacy and Health

Poor literacy skills are one of the many social factors contributing to health inequalities in Newcastle. We have been working over the past year to promote a training scheme which helps people with basic literacy skills around health. We are hoping that a pilot scheme will be set up sometime over the next year – if you would like further information, please contact Leslie in the CAH office.

Working together

There are a number of organisations all encouraging communities and individuals to have stronger voices around health. Community Action on Health is working closely with Healthworks and the Community Empowerment Fund, as well as a wide range of organisations based in the West End of Newcastle, to ensure that there is strong communication between different groups and that people who want to raise issues are fully supported. If you would like to know more about how you can have your voice heard, please contact Leslie or Yasmin at the CAH office.

Bullying in schools

A number of cases of bullying in schools have recently been reported to Community Action on Health. Not only is bullying very destructive to children, it can cause long term health problems. We have been working with schools, the NHS and others on a range of ideas to help children who are being bullied – if you would like more details, please contact Leslie at the CAH office.

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