



Strengthening links with the Community and Voluntary Sector



A SUMMARY REPORT

BACKGROUND

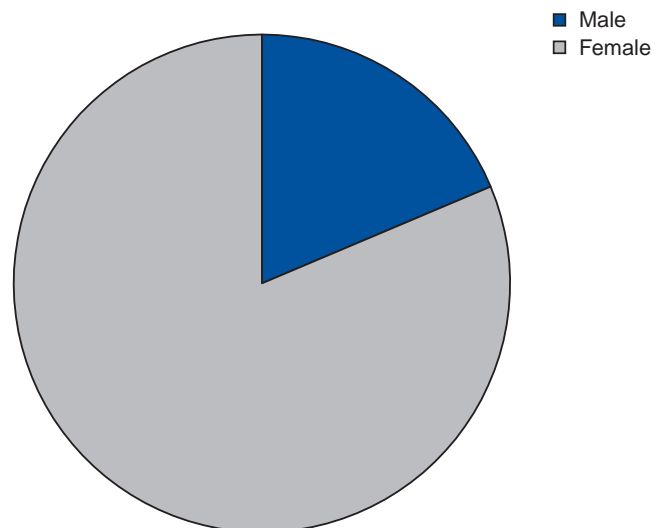
The Southern Health and Social Services Council (SHSSC) is one of 4 independent statutory watchdog bodies for health and social services which were established in 1991. Community Development and Health Network (CDHN) is a regional voluntary membership organisation, established in 1995. The organisations mission is: supporting people developing healthy communities.

In January 2005 the SHSSC retained CDHN to provide baseline information on existing knowledge of, and relationship with, the SHSSC among the community and voluntary sector. Methodology used:

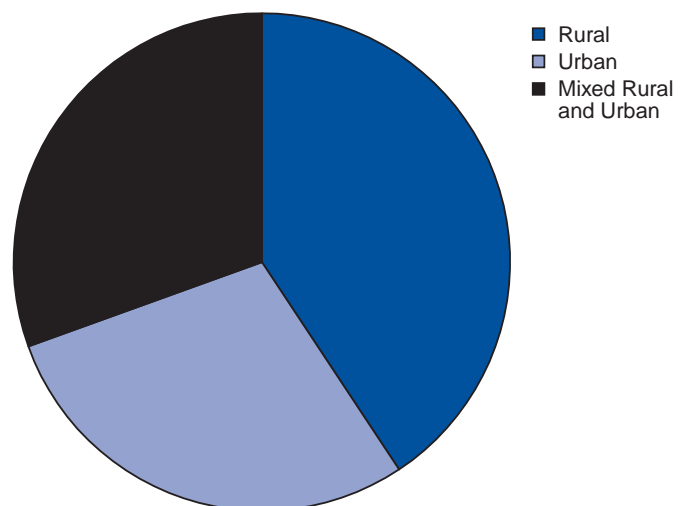
- 250 questionnaires to community and voluntary groups in the Southern Board area. 59 were returned.
- Facilitated discussion groups held in Newry and Portadown.

PARTICIPANTS

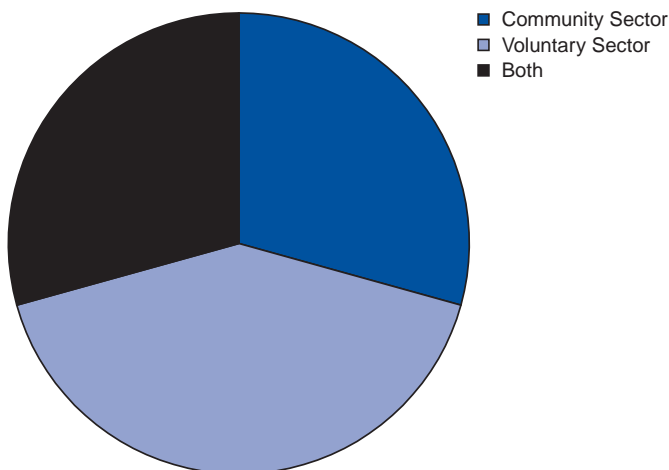
- In terms of gender, the survey had almost 4 times as many responses from women than men, given that females outnumber men almost 4 to 1 in the community and voluntary sectors, this is actually fairly reflective of the gender balance in such sectors.



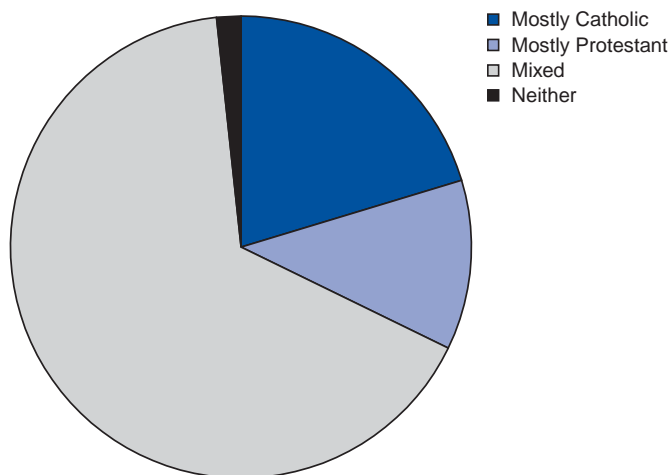
- Responses came from eastern areas (Kilkeel), northern areas (Craigavon, Lurgan), southern areas (Newry, Crossmaglen) and western parts (Dungannon, Coalisland).
- The survey was fortunate to attract responses from rural areas, urban areas and mixed areas



There were almost equal responses from the voluntary and community sectors (and from those that work in both).



- The research attracted a range of responses from different kinds of workers (from administrators to directors)
- A fairly reflective range of views was gathered from those representing specifically Catholic and Protestant communities, and those serving mixed and other religious denominations.



- The survey was successful in including the views of those who work with mixed ethnic communities and those working with Traveller communities, Portuguese communities and Chinese communities.

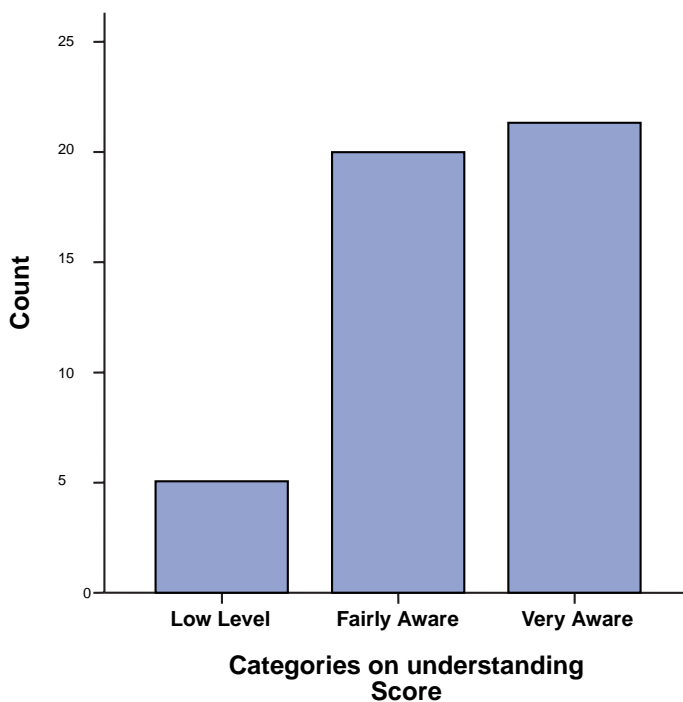
- Comments were gathered from a range of groups including newly created groups, established groups and those in existence for more than 30 years.

Role of The Council

Over 74% of the groups had heard of the SHSSC. However, only 17.8% of respondents were 'very aware' of the role of the Council and almost 45% were only slightly aware.

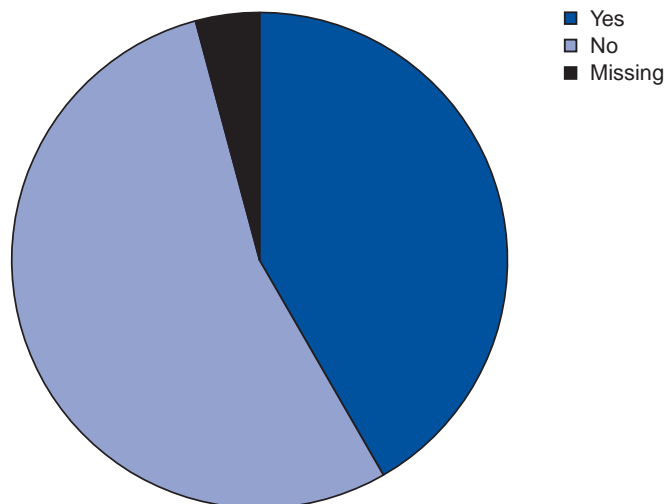
Functions of The Council

In general most people who had heard of the Council are at least 'fairly aware' of the functions of the SHSSC. 47% of those respondents who had heard of the Council rated as being 'very aware' of its functions.



However, 9% of respondents thought that the SHSSC delivers health and social services and 12% thought that they provide training opportunities for community groups. Over half of the respondents (58%) did not know that the Council offers help and advice to anyone wishing to complain about a service.

Contact with the Council



33% of respondents had been in contact with the Council compared with 44% who had not. The research also found that:

- Groups based in urban areas were less likely to contact the Council compared to those in rural and mixed areas.
- Community groups were more likely than voluntary groups and others, to have had contact with the Council.
- Frontline staff were less likely than project workers and directors to have contacted the Council.
- Respondents see contact with the Council as 'when needed' rather than a routine 'way of working'.

Council Membership

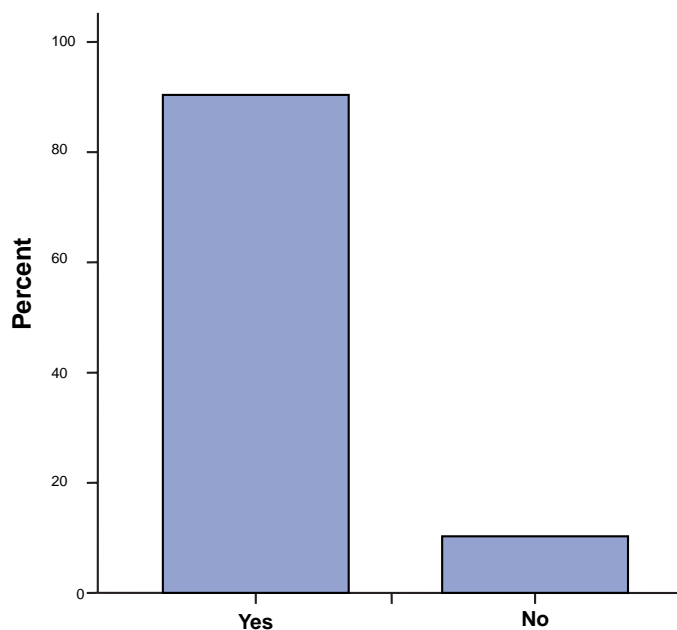
The SHSSC has 24 members who are appointed by the DHSSPS. Respondents were asked if they knew any members of the Council - only 19% actually knew the name of a Council member.

Communication

Most Preferred
Newsletters
Information through outreach sessions and leaflets
Least Preferred
Information sessions in Council office
Articles in local papers

Health and social service issues of most concern to groups involved were, disability services, user participation in decision making, and issues regarding health promotion.

Participation



88% of respondents were in favour of working more closely with the Council. 64% of these respondents would be quite interested/very interested in developing these links.

Barriers preventing involvement included: staff shortages, lack of time, financial constraints, lack of capacity in the community and voluntary sector, statutory services view of 'community based' as anything not provided in hospitals.

The preferred form of participation for over 60% of respondents was through themed focus/discussion groups, followed by community/voluntary sub groups. The least preferred was through e-mail networks or online discussion forums.

RECOMMENDATIONS

Based on the findings of this research a number of recommendations were made.

Enhancing Relationships with the Community and Voluntary sector

The Council should:

- Use information and awareness sessions to raise the Council's profile. Frontline staff in voluntary and community organisations to be specifically targeted.
- Raise awareness of Council members. Members can be used to build up contacts in the wider community.
- Develop clear parameters for participation and consultation.
- Raise awareness of the role and remit of the Council, particularly with Protestant communities, voluntary groups, front line staff and younger workers.

Increasing Participation

The Council should:

- Utilise existing community activity e.g. conferences, information days, CDHN member meetings and use community venues for meetings.
- Primarily use face to face contact when working with the community and voluntary sector.

- Provide support and information to participants and facilitating training where necessary.

Improving Communication

The Council should:

- Use face to face contact as well as e-mail, prepaid post cards or local omnibus surveys to encourage communities to involve themselves.
- Ensure information about services is accessible and easily understood.
- Provide regular updates on their work and progress.
- Work in collaboration with other statutory agencies to improve networking and information sharing opportunities between sectors.

Adopting Community Development Approaches to the Work of the Council

- By integrating user participation into **all** areas of their work the Council are following Community Development principles.

The full report and summary can be downloaded from our website:

www.shsscouncil.net

Or you can contact us at:

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