



**Liverpool  
Public Health  
Observatory**

**An overview of the history and work of Liverpool Public Health Observatory,  
and its impact on policy and services.**

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**LPHO Report Series, number 103**

***Produced on behalf of the Merseyside and Cheshire Directors of Public Health***

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**PROVIDING INTELLIGENCE FOR THE PUBLIC HEALTH**

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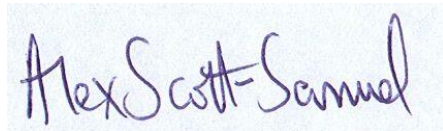
## Foreword

I am very proud to have been responsible for Liverpool Public Health Observatory for the last 20 years - a task considerably facilitated during the 1990s as a result of day to day management being successively undertaken by the enormously able Julie Hotchkiss and John Lucy.

The Obs (as we all call it) was the brainchild of Professor John Ashton in 1990, when public health first got drawn into the NHS internal market - with the resulting requirement to produce intelligence for health needs assessments and contract specifications.

John correctly saw that a university based unit was in a better position to do this than were individual health authorities. Later the climate changed and – inspired by the LPHO example – the Labour government invented the Regional Public Health Observatories in 1998. Following this, LPHO became a public health research and development unit as well as retaining an intelligence function.

But this factual overview tells us nothing about how the Observatory has worked over the years. To put it broadly, the Obs has been blessed with a long succession of highly able, highly convivial staff – researchers and administrators – who have made my role nothing short of a delight. In addition as I hope this report makes clear, the Observatory has produced a sustained sequence of high quality reports which have been of enormous utility to their public health commissioners.



Dr Alex Scott-Samuel, Director, Liverpool Public Health Observatory

## Introduction

Liverpool Public Health Observatory (LPHO) was established in 1990 to provide intelligence to Merseyside Health Authorities (later Primary Care Trusts and now Local Authority Public Health Departments). The work programme for LPHO is now managed by the Cheshire and Merseyside Public Health Intelligence Network, on behalf of the Directors of Public Health. The Intelligence Network identify areas of work based on local priorities and those of the CHAMPS public health collaborative service<sup>1</sup>. A project lead, usually a member of local authority staff, is identified, and a working group is established – the working group provides expert input into the projects, and a steer to researchers in the University regarding scope and local requirements. Academic support for the projects is provided by the University of Liverpool. When reports are complete, they are uploaded to LPHO's website, and disseminated widely via CHAMPS to relevant professionals, including relevant leads within the NHS and local authorities, and presented at relevant local, national and international conferences and events. Projects are now evaluated six months after they have been completed.

This overview report provides a summary of some of the more recent reports that have been compiled by LPHO, including evaluation findings where these are available, and the impact that LPHO's work has had on public health practice.

An appendix which lists all LPHO's publications is included at the end of this report for future reference.

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<sup>1</sup> <http://www.champspublichealth.com/about-us>

## Assessing the impact of the economic downturn on health and wellbeing

Observatory Report Series No.88

Lyn Winters, Sharon McAteer and Alex Scott-Samuel

February 2012

Link to Full Report: <http://tinyurl.com/kn96lat>

### **Aim**

The aim of this report was to understand the likely impacts of recession on health and in particular the impacts of this economic downturn such as changes in welfare and housing benefits and reductions in public sector spend, to identify local examples of good practice and include interventions which are known to mitigate the impacts, and to develop a set of core indicators which all areas can monitor over time.

### **Findings**

Studies have consistently shown that unemployment, which increases in economic downturns, is linked to poorer health. The links between poorer health have been explained through the psychological effects of unemployment (e.g. stigma, isolation and loss of self-worth) and the material consequences of a reduced income. There is consistent evidence that the economic downturn may increase suicide and alcohol-related death rates. The majority of new disability claims are on the basis of mental health. Evidence suggests mental health problems are causing a surge in anti-depressant prescriptions in England, particularly in the North of England, due to a rapid rise in unemployment. There has also been an increased use of specialist mental health services during 2009/10.

There may also be an impact on health behaviours. In western countries there is an association between economic downturns and worsening diets as people try to save money with cheap junk food. Fuel poverty is also increasing in all local authority areas covered by this report. Along with poorer mental health there is a decline in self-reported health and an increase in limiting long-term illness.

A study for the Joseph Rowntree Foundation (JRF) looked into how people in the UK are coping with poverty during the aftermath of the current recession, and showed that adapting to the rising cost of living creates a stressful burden for those affected, by having to economise on food, heating and travel, spending more time and effort on shopping and cooking, whilst having less nutritious food. Such effects occur disproportionately among people with disabilities, ethnic minorities, the poor, some women and single mothers (and their children), young unemployed and older people. Cuts in public spending are affecting services that promote long-term health and well-being, such as: adult social care, libraries and community centres, and their reduction or closure could threaten the health of the vulnerable and the elderly.

## Health Needs Assessment of adult offenders across the criminal justice system on Merseyside

Observatory Report Series No. 87 - Health Needs Assessment of Adult Offenders Across the Criminal Justice System on Merseyside

Cath Lewis and Alex Scott-Samuel

June 2012

Health Needs Assessment for Adult Offenders – Full Report - <http://tinyurl.com/mthjywu>

### Aim

The aims of the project were to determine the health care needs of the Merseyside offender population, and to investigate the extent to which current service provision is addressing their health care needs.

### Findings

There are three prisons within the Merseyside area: HMP Liverpool, Altcourse, and Kennet. HMP Liverpool and Altcourse are Category B prisons, while HMP Kennet is a Category C prison. As the majority of female offenders from the Merseyside area are sent to HMP Styal, in Cheshire, this prison was also included. Health care is also delivered in a number of probation offices across the area, and there are eight Custody Suites across the Merseyside area.

Between August 2011 and February 2012, interviews, and a small number of focus groups, were carried out with a total of 58 people. 38 of these were offenders, and 20 were members of staff. 13 of the offenders were women, and 25 were men. 22 interviews with prisoners were carried out, and 4 of these were young offenders aged 18-2. Interviews at HMP Styal were carried out with prisoners who were from the Merseyside area, and where possible interviewees from the male prisons were from the Merseyside area. Interviews were conducted with 16 offenders in the community who were attending treatment agencies.

Key findings from interviews that were carried out in prisons were;

- Offenders and staff were generally satisfied with prison health care. Health care was generally easy to access
- Areas for improvement included the need to submit 'applications' for health care at most prisons, which could deter prisoners with low literacy levels from seeking help
- Offering the option of health care on prison wings would increase uptake
- Prisoners reported that questions about accommodation, employment, benefits etc., were sometimes only raised shortly before discharge, which did not give sufficient time to plan
- Prisoners and health care staff also felt that it was easy to access drugs in prison. However, excellent, easily accessible services were available for those withdrawing from drugs

- Although females tended to have shorter prison sentences, being sent to prison often had a greater negative impact on their health. They reported losing residency of their children whilst in prison. Women lost accommodation whilst in prison, and because they served relatively short sentences, it was difficult to get appropriate accommodation, employment or benefits in place prior to discharge.

Key findings from interviews in the community were;

- Wider health needs such as accommodation, employment and benefits advice were key concerns. Accommodation immediately following discharge was not always conducive to preventing re-offending, e.g. offenders with drug problems were sometimes sent to hostels where there was easy access to drugs
- Employment and training needs were of priority health concern. Although provision for some groups of offenders was excellent, more comprehensive 'signposting' for offenders was necessary
- Services that were specifically targeted at female offenders, including the Turnaround Project and Tomorrow's Women Wirral, were highly valued by both offenders, and staff, in terms of meeting health care needs. Women were supported to keep families together in a way that they would not have been had they been sent to prison.
- Offenders and health care staff expressed the view that services were in place, should offenders be willing/able to use them. Offenders were more likely to use services where they could access several services under 'one roof', or drop-in services that they were able to access immediately.

### **Recommendations**

The report concluded that strengthening liaison between different agencies working with offenders was the most important recommendation, alongside ensuring adequate 'signposting' for offenders to appropriate services, and ensuring computer systems are linked wherever possible, to allow health care staff to access the fullest possible medical history. An integrated health pathway for offenders would also help to achieve this. In the main, services are available, but services need to be as easy to access as possible. Services should be targeted towards specific offender groups.

## Children and young people's emotional health and well-being needs assessment: Merseyside

Observatory Report Series Nos. 90 and 91

Janet Ubido, Louise Holmes, Sharon McAteer, Lucy Tomlinson, Alex Scott-Samuel

October 2012

Children's Emotional Health - Full Report - <http://tinyurl.com/kemma5p>

Children's Emotional Health - Summary - <http://tinyurl.com/k8x2bmn>

### **Aim**

The aims of this project were to assist in the delivery of better mental health outcomes for children, young people, families and the communities in which they live in Merseyside, and to provide a baseline of need across Merseyside, quantifying the prevalence of emotional and mental wellbeing, mental health problems and mental illness. The project also aimed to identify inequalities in emotional health and wellbeing, and explore the factors that contribute to positive and negative emotional health and wellbeing. It aimed to inform commissioning, both by commissioning services for those with common and complex mental health problems, and by broader public health commissioning, addressing emotional health and wellbeing and early intervention.

### **Findings**

The authors found that many of the factors associated with child health and wellbeing are inter-linked, with children and young people often facing more than one adverse experience. Across Merseyside, on the whole there were low levels of protective factors and high levels of risk factors relating to emotional health and wellbeing, with some exceptions. However, there were different patterns of need between each local authority and within local authorities. Limited small area data shows that the distribution of low levels of child wellbeing follows a very similar pattern to that of high levels of school absenteeism, to levels of child poverty, and to a lesser extent, children under 16 on disability allowance.

### **Recommendations**

Preventive, population based work such as that being undertaken in schools should continue to be given a high priority. Awareness raising and training for all those involved with children and young people is essential. Child mental health workers need to be available to carry out such training and support. There is a shortage of data on the protective factors associated with emotional health and wellbeing. Areas for further investigation have been listed in the main report.

### **Impact**

An evaluation survey was conducted using 'Survey Monkey'<sup>2</sup>, which allows online surveys to be created, resulting in 10 responses. Responses were mostly positive, with 80% agreeing that the report is easy to read and will be recommended to colleagues (60% agreed strongly). 70% agreed that the

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<sup>2</sup> <https://www.surveymonkey.com/>



information will be useful in their work. There were also four unsolicited emails received that commented on the project, each of them positive.

## Health needs assessment of young offenders in the youth justice system on Merseyside

Observatory Report Series No. 92

Cath Lewis and Alex Scott-Samuel

March 2013

Health Needs Assessment of young offenders – Full Report -<http://tinyurl.com/l4fcacc>

### **Aim**

The aims of the report were to determine the health needs of the Merseyside young offender population, and to investigate the extent to which current service provision is addressing their health needs.

### **Findings**

The health needs assessment covered young people in police custody, in secure institutions and those being managed by Merseyside Youth Offending Services (YOS). From 1<sup>st</sup> April 2011 to 31<sup>st</sup> March 2012, 23% of all arrests across Merseyside (12,550) were people aged under 20. There are no secure training centres or young offender institutions on Merseyside. There is one secure children's home, housing young people who are in contact with the youth justice system (YJS). There are no young offender institutions on Merseyside, however, because the majority of male offenders who are sent to young offender institutions go to HMYOI Hindley, in Greater Manchester, Hindley was included in this HNA.

As part of the health needs assessment, interviews were conducted between August 2012 and January 2013, with young offenders at HMOI Hindley, and Red Bank Community Home, and with young offenders being managed in the community by Merseyside YOSs. Interviews were also conducted with members of staff working with these young people, primarily health nurses and Child and Adolescent Mental Health Services (CAMHS) staff. A total of 22 interviews were carried out.

This health needs assessment demonstrated that services that were available to young offenders were of high quality. Accessibility was key in terms of ensuring that young people engaged with services in the community, and staff were very flexible about where and when they saw young people. Young people are more likely to engage where several services are provided under one roof, and if they can see health workers at venues that are convenient for them. Key areas for improvement identified include gaps in services for those aged 16-18, and in provision for wider health needs, such as accommodation and education, training and employment needs. There was also a need for earlier identification of health problems, and increasing the confidence of front-line staff to identify these problems, particularly Attention Deficit/ Hyperactivity Disorder (ADHD) and mental health problems.

**Recommendations**

Areas where improvement could be made were in transition from community to secure accommodation, and transition from children's to adult services. There were gaps in provision of appropriate accommodation, and in education, employment and training opportunities for these young people. Staff working with young people felt that a comprehensive qualification for staff working with young offenders should be introduced. Several services under one roof where possible, at times and venues that are convenient for young people, should be provided.

## Health needs assessment for ex-Armed forces personnel

Observatory Report Series No. 93

Cath Lewis, Louise Holmes and Alex Scott-Samuel

March 2013

Health Needs Assessment for ex-Armed Forces Personnel - <http://tinyurl.com/n4fy69s>

### **Aim**

The aim of the research was to assess the level of health needs of the military veteran community, and their families, in Cheshire and Merseyside, in order to inform commissioners in future commissioning arrangements

### **Findings**

The report found that there are health benefits from serving in the Armed Forces, although it is a physically dangerous job. Armed Forces personnel benefit from regular exercise and from medical checks. A high proportion of UK recruits come from more deprived backgrounds, and have limited education and work prospects, which makes comparisons with the population as a whole more difficult. However, service in the Armed Forces may have a positive impact on the health of individuals who might otherwise have had a poorer diet, limited exercise, and been at risk of unemployment and criminality. Overall rates of common mental health problems and post-traumatic stress syndrome are low, although reservists were more likely to experience psychological impact of deployment than regular forces. For those who seek help in Service, there is a high quality and effective mental health Service available, although many people experiencing mental health problems don't ask for help. There is limited research on the lifestyle behaviour of ex-Armed Forces personnel, although there is some evidence that alcohol misuse is a problem.

Following service, the majority of service personnel adapt to civilian life without any problems. Homelessness is one issue that is faced by a minority of personnel. A large scale study also found that the rate of offending among military personnel was lower than in the population as a whole, but that younger members of the Armed Forces returning from duty were more likely to commit violent offences than the rest of the population. Military Service in itself was not associated with an increased risk of committing violent offences once confounding factors, including age, education, and pre-service history, were taken into account, although serving in combat was.

There is a relatively small body of research on the impact on families and children of those who serve in the armed forces. One study found that almost a third of children who had a currently deployed or recently returned parent showed clinical levels of anxiety. An American study of 1,500 children in military families concluded that having a parent deployed for longer periods of time, and having a non-deployed parent who has experienced emotional problems, were important predictors of whether or not a child would experience problems. Health problems of parents, such as increased incidence of alcohol

misuse amongst those who had been deployed that was identified in one study, are likely to have an impact on the health of children.

### **Recommendations**

Facilitate GP registration prior to discharge from Armed Forces, and use Defence Medical Services (DMS) Record Transfer. GPs should be encouraged to ask about previous service. In addition, the military Service read code should be used more widely, and connectivity improved between DMS and NHS computer systems. There is a need to increase understanding of prioritisation among GPs and ex-Armed Forces personnel. In terms of future planning, there is a need to conduct research on the needs of the families of Armed Forces and ex-Armed Forces personnel.

## Learning disabilities and autism: A health needs assessment for children and adults in Merseyside and North Cheshire

Observatory Report Series No. 94

Janet Ubido, Sharon McAteer, Chris Williamson, Sophie Kelly, Cath Lewis, Alex Scott-Samuel

September 2013

Learning Disabilities - Full Report - <http://tinyurl.com/lpvycuu>

Learning Disabilities - Full Summary & Recommendations - <http://tinyurl.com/q9du8am>

Learning Disabilities - Easy Read Versions – <http://tinyurl.com/n5ga9up>

### **Aim**

The project aimed to determine the health and wellbeing needs of people with learning disabilities and autism living in Merseyside and North Cheshire, to provide accurate data to help inform local Joint Strategic Needs Assessments (JSNA) and the Learning Disabilities Self-Assessment framework, and to make a set of evidence-based recommendations for local commissioners.

### **Findings**

There are around 20 people with learning disabilities in every 1000 people in England. But only 4 or 5 of these get specialist learning disability services. There are about 33,000 adults with learning disabilities in Merseyside and North Cheshire. People with learning disabilities and autism have problems using health services and are more likely to die early and to have health problems such as obesity, asthma, and mental health problems.

### **Recommendations**

Recommendations to address these issues were made, covering action that can be taken by local councils; community and hospital health services; police and courts; and by joint working involving health and social care services.

### **Impact**

Following the project, an evaluation was carried out, which included an online survey via Survey Monkey. There were 22 responses to the survey. Feedback was mostly positive, with 86% agreeing that they would recommend this report to their colleagues (68% strongly and none disagreed). Three quarters (77%) of respondents agreed that the information in the report would be useful to them in their work (59% agreed strongly and none disagreed). The majority of comments were positive and suggested that the report was well written and useful, for example: 'Really well written rich data, honest appraisal of data/gaps in data.... Already used in JSNA refresh'.

## Fixed odds betting terminal use and problem gambling across the Liverpool City Region

Observatory Report Series No. 95

Cath Lewis, Louise Holmes and Alex Scott-Samuel

April 2014

Gambling - Full Report - <http://tinyurl.com/o4oebky>

### **Aim**

The aim of the report was to develop a local evidence base in relation to Fixed Odds Betting Terminal (FOBT) use and problem gambling, reasons for excess gambling and wider related issues across the Liverpool City Region. The project also aimed to recommend local action by Licensing Teams which will help regulate betting shops. It also aimed to investigate the availability and adequacy of local support services for problem gamblers, and recommend ways to improve and integrate provision.

### **Findings**

National surveys show that 68% of men and 61% of women aged 16 and over gamble. However, only 0.8% of men and 0.2% of women are estimated to be problem gamblers. Although national data is available, obtaining local data on gambling in Licensed Betting Offices is problematic. According to estimates based on the 2012 Health Survey for England, there are a total of 5857 problem gamblers across the Liverpool City Region, 4610 male, and 1247 female. National research conducted by the Campaign for Fairer Gambling shows that Licensed Betting Offices are far more likely to be in areas of high socio-economic deprivation.

Between January and March 2014, 33 interviews were carried out with people who had had problems with gambling, and with staff who worked with them. Respondents across the Liverpool City Region who were interviewed reported a wide range of impacts from problem gambling, including impact on family life, relationships and employment, as well as financial impacts. Gambling took respondents' time away from relationships, as well as their money, and led to mistrust and arguments within the family, or with friends. Problem gambling has a 'ripple' effect, as one person's gambling problems can impact upon many people. Some respondents felt that there was a lack of services for problem gamblers, compared to services for those with drug and alcohol problems. Other respondents felt that there was a lack of easily accessible, face to face services for problem gamblers.

### **Recommendations**

The project identified a need for easily accessible, face to face services for problem gamblers.

### **Impact**

Following the project, an evaluation was carried out. A survey was conducted on 'Survey Monkey' between December 2014 and February 2015. There was a relatively low response rate - the highest

number of responses to any question was 11, although the link to the survey was widely circulated. More than 90% of respondents felt that the information in the report was useful to them in their work, and none disagreed. More than 90% had also recommended the report to others. All those who had been involved in the project said that they had benefitted from their involvement. The report was described as 'very comprehensive', an 'Excellent evidence base on which to consider action to be taken'.

Feedback via email from members of the project working group, since the project was completed, indicated that a steering group has been established in to look at the recommendations from the report. Locally, this group are exploring our opportunities to have influence re responding to consultations, lobbying, and linking with health side further.

In addition, The Gambling Commission<sup>3</sup>, in May 2015, asked if a link to their report could be included in their Local Authority bulletin. The Campaign for Fairer Gambling<sup>4</sup> described the report as 'the most extensive look at gambling issues at a local authority level ever produced'. They also promoted the report to attendees at a Local Government Association Conference in July 2015. The report was quoted in an article in The Guardian on 2<sup>nd</sup> January 2015<sup>5</sup>.

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<sup>3</sup> [www.gamblingcommission.gov.uk/Home.aspx](http://www.gamblingcommission.gov.uk/Home.aspx)

<sup>4</sup> <http://fairergambling.org/>

<sup>5</sup> <http://www.theguardian.com/uk-news/2015/jan/02/gambling-addiction-fixed-odds-betting-terminals>



## Homelessness in the Liverpool City Region: A health needs assessment

Observatory Report Series No. 96

Janet Ubido, Louise Holmes, Chris Williamson, Sharon McAteer and Alex Scott-Samuel

May 2014

Homelessness in Liverpool Final Report - <http://tinyurl.com/pfdp9vx>

Homelessness in Liverpool Technical Supplement - <http://tinyurl.com/pk4pexu>

### **Aim**

The aim of the project was to determine the health needs of the local homeless population within Liverpool City Region, and to investigate the extent to which current service provision is addressing the health needs of the local homeless population. The project also aimed to make a set of evidence-based recommendations for local commissioners on the provision of health services for the local homeless population.

### **Findings**

The report found that, across the Region, homelessness is on the increase amongst those considered to be in priority need (mainly families) and also those in non-priority need (mainly single homeless). The effects of the recession and welfare reforms have impacted negatively on homeless people, especially those with chaotic lifestyles. Those who are homeless face extra barriers to accessing health care and have health needs often different to those of the general population.

### **Recommendations**

There is a need for standard datasets, with agreed definitions, on numbers of homeless people in the community and in primary and secondary care to inform commissioning. Data collection should be aimed at identifying housing status, health needs and outcomes of interventions. Throughout the report, there are discussions and recommendations on various data issues, including those relating to data from general practice, hospitals, drug and alcohol services and Supporting People<sup>6</sup>.

In view of the large scale of resource use involved in hospital admissions and emergency health care for homeless people, it has been recognised that more effective and cost-effective ways of securing health care for the homeless population could be identified by reviewing current delivery models and considering alternatives. The recommendations from this health needs assessment set out what can be done locally.

### **Impact**

An evaluation was carried out, following completion of the project. There were 34 responses to a project evaluation online survey, of which 82% agreed that the information in the report had been useful to them in their work (38% agreed strongly and none disagreed). Three quarters (74%) of respondents said that they had recommended the report to others and more than half (58%) said they had benefitted

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<sup>6</sup> <https://supportingpeople.st-andrews.ac.uk/>

from being involved with the project. Those who had took part in focus groups also felt that they had benefitted. At most of the groups, contacts were made between organisations who felt that working together would be beneficial for the service, and contact details were exchanged. Occasionally, one organisation was not aware of another organisation providing a service in their area. The focus groups themselves have increased partnership working – in St Helens, for example, there is now work being conducted by the commissioning leads, housing and hostel providers, and the drug and alcohol service, around waiting list issues and sharing of information, as a direct result of contacts made during focus groups.

## Dental health needs assessment for Cheshire and Merseyside

Observatory Report Series No.103

Louise Roper<sup>7</sup>, Janet Ubido, Chris Williamson, Sharon McAteer and Alex Scott-Samuel

March 2015

Dental health needs assessment for Cheshire - <http://tinyurl.com/ozbtwsx>

Dental health needs assessment for Merseyside - <http://tinyurl.com/pb9j5mj>

### **Aim**

The aim of the project was to determine the current health needs of the population in relation to dental health in Merseyside and Cheshire for NHS patients, to investigate the current service provision for dental health in children and adults highlighting any gaps and inequalities based on the new dental contract. The project also aimed to make a set of evidence based recommendations for local commissioners on the provision of oral health promotion for the local population.

### **Findings**

Levels of deprivation are linked to the complexity of dental treatment, with more deprived children needing more complex and urgent treatment than those in more affluent groups. At age 5, all Merseyside areas except Sefton were above the national level of 27.9% children with decayed, missing or filled teeth. In Cheshire, only Warrington and Wirral were above the England average.

A telephone survey undertaken for the health needs assessment found that in Cheshire and Merseyside, around three-quarters of NHS dental practices had some out of hour's weekday access, but only around 1 in 10 on a Saturday. There were 1 in 4 NHS practices with expected routine appointment waiting times of more than 2 weeks. Of all dental practices listed, three quarters hold NHS contracts for adults and of these practices, around three quarters were currently able to accept new NHS adult patients. The telephone survey found that there were only small differences in results between Cheshire and Merseyside, with Cheshire having slightly more out of hours access and practices with long appointment waiting times. The proportion of practices with adult NHS contracts was slightly higher in Merseyside, but of these, those in Cheshire were slightly more likely to currently accept new NHS patients.

### **Recommendations**

This dental health need assessment has highlighted many areas of improvement that local councils, NHS area teams and Public Health England could address in order to further improve dental health and service provision for the local population. For example, the level of domiciliary care provision was outside the scope of this DHNA but should be investigated in order to ensure that it is appropriate for the populations needs. Public Health and ward level data (where available) should be utilised to help inform commissioning intentions and decisions & work towards a multi-partnership oral health

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<sup>7</sup> Nee Holmes

programme strategy for older people which focuses on prevention, promotion and appropriate treatment for older people. Oral health needs to be placed on a wider agenda for change in order for collaboration with relevant sectors and agencies to take place and further work could explore the needs of people on low incomes but who are not exempt from dental charges.

## Appendix – Liverpool Public Health Observatory publications

This section lists all Liverpool Health Observatory publications, in chronological order.

### **Observatory Report Series**

Since it was established in 1990, the Observatory has produced a series of reports. They are reports of work carried out on behalf of the Merseyside Local Authorities that fund the Observatory. Reports are sent to various people, including directors of public health and chief executives within the North West.

#### **No. 1 - Indicators and Targets for Health for All, the Mersey Region, 1991 update**

M.J. Platt, K. Ord, J. Ashton

An update on the 12 areas for health promotion first identified and prioritised in 1984 August 1991.

#### **No. 2 – Health and Deprivation in the Mersey Region**

M.J. Platt, J. Ashton.

Townsend Deprivation and Health Indices calculated for all electoral wards in the Mersey region using 1981 census data. (one for each Health Authority and Family Health Services Authority area - 13 in total, as 2 co-terminous)  
November 1991.

#### **No. 3 – Mersey Region Planned Parenthood Profile**

P. Mawle, J. Hotchkiss, A. Marchbank, K. Ord, J. Ashton

Information about family planning at the district, regional and national level. Includes demography, fertility statistics, provision and use of contraceptive services, abortion and sterilisation services. Includes recommendations  
March 1992.

#### **No. 4 – Liverpool Planned Parenthood Profile**

J. Ubido, J. Ashton

Information about family planning at the small area level, electoral ward, postal district or GP practice  
September 1991.

#### **No. 5 - Environmental Causes of Death and Disability in the Mersey Region.**

H. Crombie, K. Ord, J. Ashton

In addition to presenting information for environmental factors known to affect health, chiefly accidents, especially road accidents, also describes lack of monitoring in many other areas including air pollution, and understaffing in some environmental health departments  
September 1991.

**No. 6 – Health Education in Schools in the Mersey Region**

K. Ord, J. Ashton

A survey of primary and secondary schools carried out in 1990, with particular reference to health education content, methods of teaching and parental involvement

October 1991.

**No. 7 – Heart Disease and Stroke: A Liverpool Profile (Full length version)**

J. Ubido, J. Ashton

Presents information on risk factors, morbidity and mortality at small area level (ward or city) as relevant to primary care staff. Contains appendices of local statistics

April 1992.

**No. 8 - Heart Disease and Stroke: A Liverpool Profile (Short version)**

J. Ubido, J. Ashton

Presents summary information on risk factors, morbidity and mortality at small area level (ward or city) as relevant to primary care staff

April 1992.

**No. 9 - FHSAs Medical/Pharmaceutical Advisers and the Indicative Prescribing Scheme**

J. Dawson

Report of three surveys carried out MASC (Medical Advisers' Support Centre) during 1991. The groups surveyed were: Medical advisers, Pharmaceutical advisers and General Managers of FHSAs.

**No. 10 - Situation Analysis of the Targets Identified in "The Health of the Nation": A Mersey Perspective**

M.J. Platt, P. Mawle, J.Ashton

This report presents the extent to which we have information and can assess whether we could monitor and meet the targets set out in the governments green paper

June 1992.

**No. 11 - Maternity Services: The views and experiences of Halton women 1992**

J. Dawson

Report of two surveys, one of 230 antenatal women and one of 492 postnatal women. Found that women were generally quite satisfied with services, but consistently would have liked more information and greater continuity of care.

**No. 12 - Consumer Participation - Directory for Merseyside and Cheshire**

J. Ubido

Directory of statutory and voluntary agencies which have involved consumers in their organisation.  
December 1992.

**No. 13 - How to Evaluate Complementary Therapies: A literature review**

H. McGourty

Review of literature from 1991 and 1992 on the evaluation of "complementary" or "alternative" therapies. Includes discussion of the definition of these concepts  
January 1993.

**No. 14 - Mental Health Care Services in Chester 1992. Final Report of a Needs Assessment Project.**

Vol. I - the report

Vol. II - the research instruments

K. Snee, A. Marchbank, E. Church, J. Hotchkiss.

Report of three surveys and two workshops aimed at developing a strategy for the provision of mental health services in Chester.

March 1993

**No. 15 - Croxteth Health Action Area, Community Needs Survey and Response**

J. Hotchkiss

Reports how a community survey was used by the local 'Health Action Area' (part of the Liverpool Healthy City 2000 Project) to stimulate debate and derive recommendations for local service providers and the community at large, as part of a local primary care strategy

September 1993

**No. 16 - Health and Lifestyles in Cheshire and Wirral 1992/93**

J. Dawson

Detailed report of the survey of over 6000 residents in Cheshire and part of Merseyside. Areas covered included general health, diet, smoking, alcohol, exercise, knowledge of HIV transmission and satisfaction with GP and hospital services. Volume 2 is a record of all the comments which respondents made.

September 1993

Volume 1 - the report

Volume 2 - opinions on local health services and further comments

Volume 3 - further analysis of the public's comments on local health services.

**No. 17 - Evaluation of the Croxteth Health Action Area**

N. Bruce, L. Winters.

A review of the projects developed and supported by the Croxteth Health Action Area and an in depth study of one of those projects - the Neighbourhood Health Action Management Team.

February 1994.

**No. 18 - Drug Misuse and Services for Drug Users in Chester**

H. McGourty, J. Hotchkiss.

This report aims to describe health needs, as can be derived from epidemiological methods, and includes in-depth interviews with drug users and the professionals who care for them.

May 1994.

**No. 19 - Valencia Health Policy Review**

J. Hotchkiss

A review of progress in the area of health since the Valencian Community assumed responsibility for its own health service in 1987, with recommendations for future development.

May 1994.

**No. 20 - Focus On Formby**

L. Winters

The report describes the current range of mental health services available to Formby residents, together with the results of a stakeholders' workshop held to develop recommendations for action

October 1994.

**No. 21 - Methadone Treatment Outcome: In the Mersey Region**

A. Wilson

A detailed report describing the development of the Methadone Treatment Questionnaire (MTQ) and the testing of the instrument on over 500 drug users from 3 Merseyside clinics.

October 1994.

**No. 22 - Alcohol Services in Chester and Ellesmere Port**

L. Winters, H. McGourty.

The report describes current services available for alcohol related problems in Chester and Ellesmere Port. Also case studies of problem drinkers and their "significant others", to illustrate areas for service developments.

November 1994.



**No. 23 - Youth Sexual Health Needs Assessment in Halton and Frodsham**

S. Amor

This report identifies problems which young people have in accessing information and services on sex education, sexual health and contraception. It lists recommendations for improved services based on discussion group and background work

December 1994.

**No. 24 - Diabetes Services Review**

A. Wilson

A report commissioned by Sefton Health Authority who wanted to estimate the size of the diabetic problem amongst adults in the Sefton population. The report also gives a review of relevant services and views from providers about how services could be developed

December 1994.

**No. 25 – Liverpool Centre for Health**

J. Hotchkiss

This report provides an account of the first twelve months of a pilot project offering and evaluating a range of complementary therapies within a primary care referral centre

August 1995.

**No. 26 - Survey of Women's Views and Experiences of Maternity Services and Care in Liverpool**

N. Fleeman, J. Dawson

This survey was carried out in order to obtain views of Liverpool women on their experiences of maternity services. The opening of a new maternity hospital in Liverpool in 1994 was seen as an opportunity to restructure services in line with recommendations in the Department of Health Report 'Changing Childbirth'

June 1995.

**No. 27 – Dingle Housing and Health Survey**

J. Dawson

Dingle is a disadvantaged inner city area within Liverpool and is now the target of area regeneration initiatives. This survey provides baseline information on the environment, housing, health and lifestyles of people in Dingle.

July 1995.

**No. 28 – “ Sucess Stories”**

S. Sogoric, H. McGourty.

Report on projects in the Mersey (and other) regions that had succeeded in implementing various intervention programmes and reaching an increased level of "quality of life" and health for the whole community or some of its sub- groups

March 1995.

**No. 29 - A Review of: Stroke Services in Primary and Secondary Care for Sefton Health**

S. Barrett

A review of services for stroke patients in Sefton with recommendations for future developments.

November 1995.

**No. 30 - Substance Use and Misuse Prevention Amongst Youth: A Literature Review**

P. Keeling

A review of literature on substance misuse

October 1995.

**No. 31 - Maternity Services: The Views and Experiences of North Cheshire Women**

N. Fleeman, P. Keeling

A report to North Cheshire Health giving views expressed by women in focus groups compared with a brief literature search and previous survey findings

May 1996.

**No. 32 - Induced Abortion in North West Region: A review of the trends 1983-1993**

S. Ghebrehewet

A review of the most recent available data relating to patterns of induced abortion in North West Region.

June 1996 (revised December 1996).

**No. 33 - Alcohol Home Detoxification**

N. Fleeman, P. Keeling

This report gives the findings of a literature review and interviews with key informants which were conducted to aid the assessment of the feasibility of providing home detoxification in Liverpool Health Authority Neighbourhoods 7 and 8.

May 1996 (reprinted August 1996).

**No. 34 - Evaluation of the 'Total Care Team' Pilot Project**

L. Winters

An evaluation of the innovative Total Care Team, provided by the Wirral Community Health Care Trust, whose aim is to offer both health and social care to clients who wish to remain at home as an alternative to nursing home care.

December 1996.

**No. 35 - Epidemiological Needs Assessment of Child and Adolescent Mental Health in Sefton Health District**

S. Ghebrehewet

This report estimates the number of children and adolescents with mental health problems/disorders in Sefton Health district and identifies those who are thought to be at risk. The report aims to provide information for purchasers of child and adolescent mental health services.

February 1997.

**No. 36 - Health Impact Assessment: A Literature Review**

L. Winters

This review gives some practical insight into the methods that can be applied to health impact assessment. It is aimed at those working in health related fields who have no previous experience with these methods

March 1997.

**No. 37 - Wirral Diabetes Service - Users' Views**

N. Fleeman

A qualitative review of the experiences of people with diabetes from their own perspective with a literature review relating to standards of care and charter development.

June 1997.

**No. 38 - Health Impact Assessment of the Community Safety Projects, Huyton SRB Area**

L. Winters, A. Scott-Samuel

Part 1 gives provisional guidance on undertaking a health impact assessment. Part 2 reports on the health impact assessment on the combined effects of four community safety projects in the Huyton SRB (Single Regeneration Budget) area.

October 1997.

**No. 39 - Health Impact Assessment of the Southport Drug Prevention Initiative**

N. Fleeman

The aim of this report is to identify the likely health impacts of a Single Regeneration Budget (SRB) programme in Southport, and in so doing to pilot a method for undertaking health impact assessment (HIA)

December 1997.

**No. 40 - Amphetamine, cocaine and crack use: Prevalence, treatment and services.**

J. Ubido

Prepared for St.Helens & Knowsley, the report includes a literature review of prevalence studies of amphetamine, cocaine and crack use, as well as an attempt to estimate prevalence in the district. The report gives a breakdown of the various approaches to provision of services and treatment for users of these drugs.

April 1998.

**No. 41 – Tobacco Quest**

N. Fleeman, P. Keeling

This is an evaluation of a computer game devised by Healthwise about the tobacco industry and smoking. It aims to discourage young people from smoking by presenting information in a global context and also by being enjoyable to play

September 1997.

**No. 42 - Health Impact Assessment of the King George V Playing Fields: Huyton SRB Area**

D. Broomfield

Health impact assessment of a regeneration initiative.

March 1998

**No. 43 - Health Impact Assessment of the International Astronomy and Space Exploration Centre: Twelve Quays, Wirral**

L. Winters

Health Impact Assessment of a new development.

May 1998

**No. 44 - Evaluation of the Orthopaedic Assessment and Treatment Clinics, for Wirral Health**

L. Winters, J. Ubido

This report aims to confirm that patients referred for an orthopaedic assessment and/or treatment are seen in the most appropriate setting and receive quality care.

October 1998.

**No. 45 - A prospective health impact assessment of the Merseyside Integrated Transport Strategy (MERITS)**

N. Fleeman

This report outlines the results of a prospective health impact assessment of the Merseyside Integrated Transport Strategy. The study uses an innovative approach based on transferring and adapting elements of existing HIA methodology, strategic environmental appraisal, and policy analysis work January 1999.

**No. 46 - Child and Adolescent Mental Health. Report on Health Needs Assessment. Sefton Health District.**

S. Ghebrehewet.

The aim of this study was to review the adequacy of existing arrangements in the provision of mental health services for young people in the age range 12-25 years, in Sefton August 1998.

**No. 47 - South Asian Heart Health Project. A report for Liverpool Health Authority**

Lyn Winters

A report on a project which aims to reduce the very high, and growing incidence of coronary heart disease and non-insulin dependent diabetes among the South Indian community in Liverpool October 1998.

**No. 48 - Neighbourhood Information Communication Technology Centres Health Impact Assessment**

Lyn Winters

A prospective health impact assessment commissioned by Wirral Health Authority on a proposed SRB funded project to provide neighbourhood information technology suites. August 1999.

**No. 49 - A health impact assessment of a proposed sports centre in Parr**

Nigel Fleeman and Victoria Jeffrey

The report aims to identify the likely health impacts that could arise from the construction and presence of a sports centre Parr, St.Helens July 2000.

**No. 50 - Evaluation of midwife/GP-led care. Duchess of Westminster Wing, Arrowe Park Hospital.**

Lyn Winters

This study aimed to evaluate patient satisfaction with the new midwife/GP-led maternity care for low-risk women. Under this model, patients do not routinely see a hospital doctor and their care is delivered primarily in a community setting August 2000.

**No. 51 - Wirral Joint Public Health Group**

Evaluation of Demonstration Projects

An evaluation of 3 projects: The Wirral Community Health Grants Scheme, the Leasowe Women's Centre Cookery Project, and the Healthy Workplace Grants Scheme for Small Businesses in Wirral

Janet Ubido

May 2000.

**No. 52 - Support services for pregnant teenagers and teenage parents**

A report to the Teenage Pregnancy Coordinator for Liverpool

Janet Ubido

Liverpool Public Health Observatory carried out an extensive review of the support services available to young Liverpool women who are pregnant, as well as to prospective fathers, and to young parents

April 2001.

**No. 53 - The Public Health contribution to capacity planning and demand management in Merseyside, Phases 1 and 2: Circulatory diseases, respiratory diseases, older people (aged 75 and over), alcohol problems and musculoskeletal disorders**

Nigel Fleeman

This report examined the potential impact on hospital admissions of public health interventions that can be provided by the NHS, the aim being to identify key evidence-based public health interventions, that will contribute significantly to demand management. This report presents the findings from a search of the literature.

August 2003.

Capacity planning and demand management in Merseyside – Full Report - <http://tinyurl.com/oszgcqg>

**No. 54 – Changing practice: steps to success in developing public health nursing roles**

Fieldwork with health visitors and school nurses

Lyn Winters

During 2002, researchers conducted eleven focus groups with health visitors and school nurses from Liverpool and Sefton Primary Care Trusts, in order to determine the steps to success in developing public health nursing roles.

January 2003.

**No. 55 - The Public Health contribution to capacity planning and demand management in Cheshire and Merseyside, Phase 3: Preventing falls in older people**

Nigel Fleeman

This report attempts to quantify the impact on hospital activity in Cheshire and Merseyside by preventing falls in older people

November 2003.

Preventing Falls in Older People – Full Report - <http://tinyurl.com/knr63mh>

**No. 56 - The Public Health contribution to capacity planning and demand management in Cheshire and Merseyside, Phase 3: Pulmonary rehabilitation**

Nigel Fleeman

This report attempts to quantify the impact on hospital activity in Cheshire and Merseyside by providing pulmonary rehabilitation.

November 2003.

Pulmonary Rehabilitation – Full Report: <http://tinyurl.com/okkbxwb>

**No. 57 - The Public Health contribution to capacity planning and demand management in Cheshire and Merseyside, Phase 3: Managing heart failure**

Nigel Fleeman

Following a search of the literature of public health interventions that can be provided by the NHS to reduce hospital admissions (see Report No. 53), this report attempts to quantify the impact on hospital activity in Cheshire and Merseyside by providing nurse-led services for managing heart failure

November 2003.

Managing Heart Failure Report - <http://tinyurl.com/o5hlc25>

This report should have also highlighted the service provided in Halton as a model of good practice as this is an example of a community based heart failure service which is dedicated solely to managing patients with heart failure and so increasingly being seen by many as being one model of good practice. Unfortunately, this is not mentioned in the report. For further information, please read this short description – Managing Heart Failure Supplement - <http://tinyurl.com/pn9tt6t>

**No. 58 - Interim report on Deaths from Suicide and Injury Undetermined**

Janet Ubido

A Mental Health Equity Profile is being compiled for the Directors of Public Health of Primary Care Trusts (PCTs) within Merseyside. The profile forms the early stage of a baseline mental health equity audit. Part of the profile includes an examination of data on mortality from suicide and injury undetermined. This paper aims to describe the epidemiology of suicide in Merseyside.

April 2004.

Deaths from Suicide and Injury Undetermined- Final Report - <http://tinyurl.com/mmc3jkk>

**No. 59 - Merseyside Mental Health Equity Audit**

Equity in access to and provision of mental health services in Merseyside

Janet Ubido

The aim of the project was to examine equity in access to and provision of services for mental health needs of residents of Merseyside PCTs, using 'readily available' performance measures. The report made a range of recommendations

December 2004.

Merseyside Mental Health Equity Audit Executive Summary - <http://tinyurl.com/lt8j3nf>

Merseyside Mental Health Equity Audit Full Report - <http://tinyurl.com/nlyarqa>

Merseyside Mental Health Equity Audit Supplement - <http://tinyurl.com/nv86nvs>

**No. 60 - Rapid Health Impact Assessment of Aintree Hospitals NHS Trust proposal to build an Elective Care Centre at the University Hospital Aintree site**

Nigel Fleeman, Professor Susan J Milner

LPHO was commissioned to undertake a Health Impact Assessment of the North Mersey Future Health care Programme (NMFHP). This HIA is focused on the proposal to build an Elective Care Centre at the University Hospital Aintree site and the transfer of services currently provided at the Walton Hospital site to the new centre

November 2005.

Aintree Elective Care Centre Executive Summary - <http://tinyurl.com/ksmjpdn>

Aintree Elective Care Centre Full Report - <http://tinyurl.com/19y>

**No. 61 – Rapid Health Impact Assessment of Mersey Care NHS Trust's Outline Business Case for Mental Health and Learning Disability Services**

Nigel Fleeman

LPHO was commissioned to undertake a Health Impact Assessment of the North Mersey Future Health care Programme (NMFHP). This HIA is focused on a proposal to build a mental health resource facility at the Queen Mary site in North Liverpool and to build mental health centres throughout North Merseyside.

January 2006.

HIA Mersey Care Executive Summary - <http://tinyurl.com/qzhs7ou>

HIA Mersey Care Full Report - <http://tinyurl.com/pvega8e>

**No. 62 - Health Impact Assessment of the Patient Choice Agenda**

Lyn Winters

This research considers the potential health impacts on Merseyside, with particular emphasis on the implications for health inequalities, of the choice agenda as specified in the 2005-2008 targets.

February 2006.

HIA Patient Choice Agenda Full Report - <http://tinyurl.com/meht9tu>

**No. 63 - Rapid Health Impact Assessment of the Royal Liverpool Children's NHS Trust's Outline Business Case for the modernisation of children's services**

Nigel Fleeman

The aim of this HIA was to explore the health impacts resulting from the implementation of the Royal Liverpool Children's NHS Trust's proposals to deliver 21st century hospital and community facilities for children, supported by a new model of care.

May 2006.

Modernisation of Children's Services Executive Summary - <http://tinyurl.com/o2ppvdu>

Modernisation of Children's Services Full Report - <http://tinyurl.com/njj9ol3>



#### **No. 64 - Top Tips for Healthier Hospitals**

Janet Ubido, Lyn Winters, Matthew Ashton, Alex Scott-Samuel, Janet Atherton and Fiona Johnstone  
Liverpool Public Health Observatory and Cheshire and Merseyside Public Health Network. *Top tips for healthier hospitals* is the first in a series designed to support partners in focussing on the actions they can take to improve health, and has been modelled on the *10 High Impact Changes for service improvement and delivery: a guide for NHS leaders*, which have had significant impact on service planning within the NHS

November 2006.

Top Tips - Healthier Hospitals Executive Summary - <http://tinyurl.com/kht3ya6>

Top Tips - Healthier Hospitals Full Report - <http://tinyurl.com/q83gn82>

#### **No. 65 - Top Tips for Health in Local Authorities**

Janet Ubido, Lyn Winters, Cath Lewis, Matthew Ashton, Alex Scott-Samuel

Liverpool Public Health Observatory and Cheshire and Merseyside Public Health Network.

In producing *Top tips for health in local authorities*, our aim is to enable local authorities within Cheshire and Merseyside to focus on actions they can take to promote the health of local people and their employees. Linked closely to the Choosing Health White Paper, it draws together evidence, national policy and targets for each Choosing Health priority area. Examples of good practice can be found in the full report, along with further details and examples of the impact and benefits of interventions given for each priority area

December 2007.

Top Tips – Health in Local Authorities Executive Summary - <http://tinyurl.com/lokgoev>

Top Tips – Health in Local Authorities Full Report - <http://tinyurl.com/pwlnf7r>

#### **No. 66 - Rapid Health Impact Assessment for Royal Liverpool and Broadgreen University Hospitals Trust - 'A New Health Service for Liverpool, World Class Hospitals, World Class Services'**

Cath Lewis, Alex Scott-Samuel

LPHO was commissioned to undertake a Health Impact Assessment of the North Mersey Future Health care Programme (NMFHP). The overall aim was to maximise the health benefits which could result from implementation of the proposals by the Royal Liverpool and Broadgreen Hospitals to redesign its services, develop a new hospital to replace the Royal Liverpool University Hospital (RLUH) on its existing site, and make further investment at Broadgreen Hospital.

January 2008.

A new health service for Liverpool – Full Report - <http://tinyurl.com/nda8y9m>

**No. 67 - Top Tips for Healthier Workplaces**

Janet Ubido, Lyn Winters, Matthew Ashton, Alex Scott-Samuel

Liverpool Public Health Observatory and Cheshire and Merseyside Public Health Network

The aim of this report is to enable local workplaces within Cheshire and Merseyside to focus on the actions they can take to promote the health of their existing and prospective employees. Top tips is closely tied to the Choosing Health priority areas, and draws together evidence, national policy, and targets as well as examples of good practice

August 2008.

Top Tips – Healthy Workplaces Summary - <http://tinyurl.com/mkxex4g>

Top Tips – Healthy Workplaces Full Report - <http://tinyurl.com/mokb5u6>

**No. 68 - Rapid Health and Equality Impact Assessment (HEqIA) of Mersey Care NHS Trust's Outline Business Case for Mental Health and Learning Disability Services**

Cath Lewis, Janet Ubido, Alex Scott-Samuel

The aim of this assessment was to look at the Health and Equality impacts of Mersey Care's Outline Business Case, which aimed to establish home treatment as the norm, refocus in-patient services around patients who are acutely ill, develop a local Psychiatric Intensive Care in-patient Unit, and strengthen community and primary care services. The results of this Health and Equality Impact Assessment will be used to feed into the Outline Business Case.

August 2008.

HEqIA Mental Health and Learning Disability Services - Full Report - <http://tinyurl.com/kfiglcf>

**No. 69 - Mental Health Equity Profile for the Mersey Care NHS Trust Catchment Area**

Janet Ubido, Cath Lewis

Liverpool Public Health Observatory was commissioned by Sefton, Liverpool and Knowsley PCTs to undertake a rapid mental health equity profile to support the local health commissioning process, and to support the Mersey Care NHS Trust TIME (To Improve Mental Health Environments) project

September 2008.

Mental Health Equity Profile - Full Report - <http://tinyurl.com/nfmer89>

Mental Health Equity Profile - Executive Summary - <http://tinyurl.com/l3nfba3>

**No. 70 - Evaluation of the Phase 2 Snack Right Social Marketing Project - base-line data**

Lyn Winters

This report summarises the findings of the base-line survey of parents/carers attending a children's centre in Cheshire and Merseyside prior to the launch of the Phase 2 Snack Right social marketing intervention.

December 2008.

Snack Right Social Marketing Baseline Data - <http://tinyurl.com/nalvv9p>

### **No. 71 – Evaluation of the Phase 2 Snack Right Social Marketing Project - Final Report**

Lyn Winters -

This research is the final report on the evaluation of Phase 2 Snack Right social marketing project that aimed to improve the nutritional quality of snacks given to pre-school children in deprived areas of Cheshire and Merseyside and to gain experience and build capacity in social marketing throughout Cheshire and Merseyside

Snack Right Social Marketing - Full Report - <http://tinyurl.com/mj76moz>

### **No. 72 - Top Tips for Sexual Health Promotion - Final Report**

Janet Ubido, Matthew Ashton, Simon Henning, Alex Scott-Samuel, Penelope A Phillips-Howard and Wendy Nicholson

*Top tips for promoting sexual health* is the fourth in a series of *Top tips* documents aimed at promoting public health. It was commissioned by the ChaMPs Federation of Directors of Public Health from Liverpool Public Health Observatory

November 2009.

Top Tips - Sexual Health Promotion - <http://tinyurl.com/qxtc2tk>

The summary version of the report can be found at: [http://www.champs-for-health.net/publications/top tips for health series](http://www.champs-for-health.net/publications/top_tips_for_health_series)).

### **No. 73 - Top Tips for a Healthy Planned Environment - Final Report**

Lyn Winters, Matthew Ashton, Sophie Grinnell and Alex Scott-Samuel

*Top Tips for a healthy planned environment* is the fifth document in the *Top Tips* series that aims to promote public health. The key topic areas covered are: history, policy, transport, physical activity, environmental sustainability, wellbeing, crime prevention, alcohol, fast food, sunbeds and tobacco, which feature examples of best practice and "top tips". This report will support the integration of the health and planning agendas

July 2010.

Top Tips – Healthy Planned Environment - <http://tinyurl.com/mapglyn>

### **No. 74 - Ageing: Future planning - Horizon scanning for those aged 65+**

Cath Lewis and Alex Scott-Samuel

This document summarises two pieces of work: a review of the literature on ageing and its implications for health and health care in the future; and, the outcomes of a regional conference, Ageing: Future Planning, held on 6 October 2009

March 2010.

Ageing: Future Planning – Full Report - <http://tinyurl.com/lsgs393>

**No. 75 - Health care needs assessment: Specialist intervention in safeguarding children across Merseyside - Final Report**

Janet Ubido and Lyn Winters

The safeguarding needs assessment was undertaken by LPHO on behalf of the Merseyside Safeguarding Commissioning Collaborative. The needs assessment aims to show patterns of use of/referral to services across Merseyside (Sefton, Liverpool, Knowsley, St.Helens and Wirral). It will enable an estimation of the needs for and provision of specialist health services input to child safeguarding practice

August 2010.

Safeguarding Children across Merseyside – Full Report - <http://tinyurl.com/momxbbs>

**No. 76 - Wellness Services - Evidence based review and examples of good practice - Final Report**

Lyn Winters, Marie Armitage, Jude Stansfield, Alex Scott-Samuel and Alison Farrar

This report reviews the regional and National evidence base regarding any programmes that commission on a "whole person" centered approach and potential benefits that might be achieved in terms of the economics and overall patient/ public experience and quality issues. Examples of good practice have been included along with guidance for wellbeing and lifestyle services and suggested standards for wellness services

November 2010.

Wellness Services – Full Report - <http://tinyurl.com/pogdpey>

**No. 77 - Reducing emergency alcohol-related hospital admissions**

Cath Lewis

This report was the first of a series of six reports which focussed on reducing emergency admission. It looked at policy interventions, community interventions and health service interventions to reduce emergency alcohol-related hospital admissions

October 2009.

Reduce Alcohol Related Emergency Hospital Admissions - Full Report - <http://tinyurl.com/ojqdtsb>

**No. 78 - Interventions to reduce emergency hospital admissions for respiratory illness**

Cath Lewis

This report was the second of a series of six reports on reducing emergency admissions. It looked at policy interventions, community interventions and health service interventions to reduce emergency hospital admissions for respiratory illness

November 2009.

Reduce Emergency Hospital Admissions for Respiratory Illness - Full Report - <http://tinyurl.com/mxlcxq5>

**No. 79 - Interventions to reduce emergency admissions for heart failure**

Cath Lewis

This report, which was commissioned by Merseyside Directors of Public Health, was the third of a series of six reports on reducing emergency admissions. It looked at policy interventions, community interventions and health service interventions to reduce emergency hospital admissions for heart failure

December 2009

Reduce Emergency Hospital Admissions for Heart Failure - Full Report - <http://tinyurl.com/n64hwaq>

**No. 80 – Interventions to reduce emergency admissions for diabetes**

Cath Lewis

This report, which was commissioned by Merseyside Directors of Public Health, was the fourth of a series of six reports on reducing emergency admissions. It looked at policy interventions, community interventions and health service interventions to reduce emergency hospital admissions for diabetes

December 2009.

Reduce Emergency Admissions for Diabetes – Full Report - <http://tinyurl.com/lis8g6z>

**No. 81 – Interventions to reduce emergency admissions for falls**

Cath Lewis

This report, which was commissioned by Merseyside Directors of Public Health, was the fifth of a series of six reports on reducing emergency admissions. It looked at policy interventions, community interventions and health service interventions to reduce emergency hospital admissions for falls

January 2010.

Reduce Emergency Admissions for Falls – Full Report - <http://tinyurl.com/mrc93pk>

**No. 82 - Interventions to reduce emergency hospital admissions - redesign of services**

Lyn Winters

This report was the last in a series of six reports which looked at reducing hospital admissions, and looked at a range of interventions to reduce admissions

December 2009.

Reduce Emergency Hospital Admissions – Full Report – <http://tinyurl.com/nmhnr9>

**No. 83 – Prevention Programmes Cost-Effectiveness Review: Physical activity**

Cost Effectiveness Review Series, No. 1

Cath Lewis, Cath Lewis, Janet Ubido, Richard Holford and Alex Scott-Samuel

This is the first topic area covered by the cost effectiveness review series. A comprehensive review of the literature is presented on evidence of the cost effectiveness and potential cost savings of preventive programmes and projects relating to physical activity

December 2010.

Physical Activity Cost Effectiveness – Full Report - <http://tinyurl.com/lvwtw4y>

**No. 84 – Prevention Programmes Cost-Effectiveness Review: Alcohol**

Cost Effectiveness Review Series, No. 2

Janet Ubido, Cath Lewis, Richard Holford and Alex Scott-Samuel

This is the second topic area covered by the cost effectiveness review series. It follows on from a review on physical activity. A comprehensive review of the literature is presented on evidence of the cost effectiveness and potential cost savings of preventive programmes and projects relating to alcohol.  
December 2010

Alcohol Cost Effectiveness – Full Report - <http://tinyurl.com/p8yk88g>

**No. 85 - Sexual Violence Needs Assessment Final Report**

Lyn Winters

This sexual violence needs assessment aims to ensure that provision meets actual need and to reduce organisational barriers. It reviews current activity in sexual violence services in Merseyside utilising data from police, third sector and health and social care agencies for those aged 13 years and above. The findings from this review will inform the strategic review of the commissioning arrangements for the provision of the Sexual Assault Referral Centre (SARC) services for the population of Merseyside.  
August 2011.

Sexual Violence Needs Assessment – Full Report - <http://tinyurl.com/l7c9dg8>

**No. 86 - Merseyside Mental Health Needs Assessment**

Janet Ubido and Alex Scott-Samuel

This mental health needs assessment uses a population approach to identify at-risk groups and areas of need in Merseyside. In the new NHS structure, commissioning will be undertaken by GP/clinical commissioning groups and local authorities, and the NHS commissioning board, with advice and support from public health. The needs assessment presented here will be a tool for these bodies, with a much wider scope than just providing information for specialist mental health commissioning.  
August 2011.

Merseyside Mental Health Needs - Full Report - <http://tinyurl.com/k8gp8qf>

**No. 87 - Health Needs Assessment of Adult Offenders Across the Criminal Justice System on Merseyside**

Cath Lewis and Alex Scott-Samuel

Liverpool Health Observatory (LPHO) were commissioned to undertake a health needs assessment (HNA) for adult offenders across the criminal justice system on Merseyside. The HNA included a review of relevant literature, as well as interviews with offenders and health care staff, both in prisons and in the community  
June 2012.

Health Needs Assessment for Adult Offenders – Full Report - <http://tinyurl.com/mthjywu>

**No. 88 - Assessing the Impact of the Economic Downturn on Health and Wellbeing**

Lyn Winters, Sharon McAteer and Alex Scott-Samuel

LPHO was commissioned to produce a report on the health impact of the economic downturn. Through a literature review and analysis of key indicators the report assesses the evidence base for the impact of the economic downturn on mental and physical health and use of health and local authority services in the five Merseyside PCTs. Included in the report is an assessment of effective interventions likely to aid local services in helping their population cope with the effects of the economic downturn  
February 2012.

Economic Downturn and Health and Wellbeing - Full Report - <http://tinyurl.com/kn96lat>

**No. 89 - Prevention Programmes Cost-Effectiveness Review: Diet and healthier eating**

Cost effectiveness review series, No. 3

Janet Ubido, Richard Holford and Alex Scott-Samuel

This is the third topic area covered by the cost effectiveness review series. A comprehensive review of the literature is presented on evidence of the cost effectiveness and potential cost savings of preventive programmes and projects relating to diet and healthier eating  
March 2012.

Diet and Healthier Eating - Full Report - <http://tinyurl.com/mrjwyrn>

**Nos. 90 and 91 - Children and young people's emotional health and wellbeing needs assessment: Merseyside.**

Janet Ubido, Louise Holmes, Sharon McAteer, Lucy Tomlinson, Alex Scott-Samuel

The factors that contribute to positive and negative emotional health amongst children and young people are explored. The needs assessment seeks to paint a picture of need across Merseyside  
Evidence based interventions at each level are detailed  
October 2012.

Children's Emotional Health - Full Report - <http://tinyurl.com/kemma5p>

Children's Emotional Health - Summary - <http://tinyurl.com/k8x2bmn>

**No. 92 - Health needs assessment of young offenders in the youth justice system on Merseyside**

Cath Lewis and Alex Scott-Samuel

Liverpool Health Observatory (LPHO) was commissioned to undertake a health needs assessment (HNA) for young offenders across the youth justice system on Merseyside. The HNA includes a detailed description of the young offender population, both nationally and on Merseyside, and a brief review of relevant literature, as well as interviews with young people and health care staff, in both secure and community settings

March 2013

Health Needs Assessment of young offenders – Full Report - <http://tinyurl.com/l4fcacc>

**No. 93 - Health needs assessment for ex-Armed Forces personnel**

Cath Lewis, Louise Holmes and Alex Scott-Samuel

Liverpool Health Observatory (LPHO) was commissioned to undertake a health needs assessment (HNA) for ex-Armed Forces personnel, and their families, in Cheshire and on Merseyside. The HNA focuses on personnel aged under 65. It includes a brief review of relevant literature, as well as a description of provision for ex-Armed Forces personnel at a local and national level

March 2013

Health Needs Assessment for ex-Armed Forces Personnel - <http://tinyurl.com/n4fy69s>

**No. 94 - Learning disabilities and autism: A health needs assessment for children and adults in Merseyside and North Cheshire**

Janet Ubido, Sharon McAteer, Sophie Kelly, Cath Lewis, Alex Scott-Samuel

LPHO was commissioned to deliver a health needs assessment for learning disabilities and autism amongst adults and children, to cover Merseyside and North Cheshire. The aim was to determine the health and wellbeing needs of people with learning disabilities and autism, providing accurate data.

September 2013.

Learning Disabilities - Full Report - <http://tinyurl.com/lpvycuu>

Learning Disabilities - Full Summary & Recommendations - <http://tinyurl.com/q9du8am>

Learning Disabilities - Easy Read Versions – <http://tinyurl.com/n5ga9up>

**No. 95 - Fixed odds betting terminal use and problem gambling across the Liverpool City region**

Cath Lewis, Louise Holmes and Alex Scott-Samuel

LPHO was commissioned to look at problem gambling, and Fixed Odds Betting Terminal (FOBT) use, across the Liverpool City Region. The aims of the project were to develop a local evidence base in relation to FOBT use and problem gambling, look at reasons for excess gambling, and to investigate the availability and adequacy of local support services for problem gamblers. The project included an online survey on FOBT use and interviews with problem gamblers, and staff working with them, across the region

April 2014.

Gambling - Full Report - <http://tinyurl.com/o4oebky>

**No. 96 - Homelessness in the Liverpool City Region: A Health Needs Assessment**

Janet Ubido, Louise Holmes and Alex Scott-Samuel

This health needs assessment aims to determine the health needs of the local homeless population within Liverpool City Region and to investigate the extent to which current service provision is addressing their health needs. Recommendations are made resulting from a consideration of the findings, including the data gathered, the findings of the stakeholder focus groups held in each local authority, and evidence in the literature

May 2014.

Homelessness in Liverpool Final Report - <http://tinyurl.com/pfdp9vx>

Homelessness in Liverpool Technical Supplement - <http://tinyurl.com/pk4pexu>



**No. 97 - Rapid Evidence Review Series, no. 1 –Loneliness - The prevalence of loneliness, its impact on health and wellbeing and effective interventions that can be used to ameliorate these effects**

Janet Ubido and Alex Scott-Samuel

This report is the first in a series of rapid evidence reviews. Loneliness has a negative effect on health and wellbeing and leads to increased use of health and social care services. This rapid review is the first in a series of rapid reviews on various topics. It presents the evidence on the prevalence of loneliness, its impact on health and wellbeing and effective interventions that can be used to ameliorate these effects.

July 2014.

Report Into Loneliness - <http://tinyurl.com/p3wnkuh>

**No. 98 - Rapid Evidence Review Series, no. 2 - An evaluation of the cost effectiveness of monitored dosage systems (MDS) as an aid to maintaining independence in taking medication**

Janet Ubido and Alex Scott-Samuel

A monitored dosage system (MDS), usually in the form of a box or a blister pack divided into days of the week, is a medication storage device designed to simplify the administration of solid oral dose medication.. There is currently heated debate about the usefulness of such devices. This rapid evidence review assesses the evidence on the cost effectiveness of MDS

October 2014.

Monitored Dosage Systems - <http://tinyurl.com/nrk7q78>

**No. 99 - Rapid Evidence Review Series, no. 3 - Suicide Prevention Training**

Janet Ubido and Alex Scott-Samuel

This rapid evidence review summarises the evidence on the effectiveness of suicide prevention training programmes. The review will inform the sub-regional Suicide Reduction Action Plan (SRAP), being developed by the Cheshire & Merseyside Suicide Reduction Network which is governed via CHAMPS. A key component of the plan relates to the provision of suicide prevention training for anybody working with individuals who may be at greater risk of suicide

October 2014.

Suicide Prevention Training - <http://tinyurl.com/m38ku6t>

**No. 100 – Top Tips for healthier providers of health-care in Merseyside and Cheshire**

Cath Lewis and Alex Scott-Samuel

Top tips for healthier providers of health-care aims to support organisations in focusing on the actions they can take to improve the health their patients, their staff, and the wider community that they serve. It builds on a previous report that was carried out by Liverpool Public Health Observatory in 2006, which focused on hospitals. The report is a review of secondary data, alongside examples of local delivery from Merseyside and Cheshire

November 2014.

Top Tips for Healthier Providers of health-care – Full Report - <http://tinyurl.com/lb2rccy>

**No. 101 - Rapid Evidence Review Series, no. 4 - Local interventions to tackle outdoor air pollution with demonstrable impacts on health and health service use**

Janet Ubido and Alex Scott-Samuel

The association between air pollution and poor health has been well documented. This rapid evidence review summarises the evidence that exists on the effectiveness of local interventions to tackle outdoor air pollution, involving demonstrable impacts on health and health service use. Key findings are presented.

January 2015.

Interventions to tackle outdoor air pollution - <http://tinyurl.com/nn9z5go>

**No. 102 - Rapid Evidence Review Series, no. 5: Effective pathway from child to adult mental health services**

Janet Ubido and Alex Scott-Samuel

Although there is evidence that young people aged 12-25 years have the highest levels of mental illness across the lifespan, access to mental health services is the poorest of all age groups. This rapid evidence review presents the evidence of gaps in transition from child to adult mental health services and evidence of effective solutions.

January 2015.

Effective pathway from child to adult mental health services - <http://tinyurl.com/pd3y6y5>

**No. 104 and 105 – Dental health needs assessments for Cheshire and Merseyside**

Louise Roper, Janet Ubido and Alex Scott-Samuel

The aim of the project was to determine the current health needs of the population in relation to dental health in Merseyside and Cheshire for NHS patients, to investigate the current service provision for dental health in children and adults highlighting any gaps and inequalities based on the new dental contract

Dental health needs assessment for Cheshire - <http://tinyurl.com/ozbtwsx>

Dental health needs assessment for Merseyside - <http://tinyurl.com/pb9j5mj>

### **Liverpool Public Health Observatory Issues Series**

The intention of the issues series is to target the audiences most closely involved with each issue covered. All ISSUES are sent to directors of public health, chief executives and chairs of health authorities, and chairs of community health councils within the North West Region. The Issues Series was launched by LPHO in 1994, as part of its role in providing intelligence for the public health. This was in response to the perceived need for timely reports reviewing theory and practice of most controversy and concern within public health.

#### **No.1 - PCBs, Dioxins and the Public Health**

N. Squires

This Observatory publication considers what the public health response to the shipment of PCBs into Liverpool should be. It also considers the production of dioxins which result from the incineration of clinical waste, and looks at what responsibilities the NHS has for minimising this source of environmental pollution.

October 1994

#### **No.2 - The Hearing Aid Debate**

J. Ubido

Many people who could benefit from a hearing aid do not have one. The problems with the present system are discussed, and options for change are considered.

October 1994

#### **No.3 - Healthy Prisons**

N. Squires

This paper presents the results of a healthy prisons' 'wish list survey'. It details changes that are thought to be needed within the prison service if the goal of the healthy prison is to be achieved.

February 1995

#### **No.4 - Arthritis: The Patient's Perspective?**

J. Ubido

This paper summarises the current literature relating to needs assessment and arthritis, and emphasises the need for a focus on the patient's perspective.

April 1995

#### **No.5 - Asthma and Environmental Pollution**

J. Ubido

The rising prevalence of asthma is considered, and the links with outdoor and indoor pollution and other factors are explored.

April 1995

**No.6 - "Hospital at Home" schemes: a review of the literature**

D. Seddon

A recent hospital at home scheme in Liverpool was unsuccessful. This review seeks lessons from reports of other schemes in the UK.

May 1995

**No.7 - "I need emergency contraception today - can I get it from you?"**

M. Maxwell, A. Mooney, P. Wilson

This report is a qualitative review of the provision of hormonal emergency contraception service in all 34 accident & emergency departments. It also includes a non-random sample of 44 GPs in the North West Region.

November 1995

**No.8 - Male Circumcision**

M. Maxwell

This report reviews all circumcisions, religious, cultural and medical. It looks at the arguments for and against circumcision and service provision in the North West.

April 1996

**No. 9 - Developing Emergency Services in the Community**

J. Ubido

The options available to help ease the pressures on accident and emergency services are considered, including a re-organisation of primary care provision, community pharmacies, dental services, mental health crisis teams, and district and practice nursing services. New initiatives are detailed, and the need for patient information and education and further research is discussed.

July 1999

**No. 10 - Alcohol: Minimum Pricing and Licensing Powers. Expected outcomes and recommended local actions for Merseyside**

J. Ubido and P. Cordy

Liverpool Shadow Safer Healthier Communities Board commissioned Liverpool Public Health Observatory to provide information on alcohol minimum pricing and utilising licensing powers, resulting in a summary paper being presented to the Board in January. The Observatory Issues paper details the information used for the summary paper, and focuses on local actions and measurable expected health outcomes if a 50p minimum per unit price for alcohol were to be introduced.

March 2010

View or download the paper here - [Alcohol: Minimum Pricing and Licensing Powers](#)

### **Liverpool Public Health Observatory HIA Reports (not listed elsewhere)**

The Observatory was one of the first units to undertake health impact assessment (HIA) and has produced a literature review and practical guidelines as well as various project reports.

#### **HEALTH IMPACT ASSESSMENT - a ten minute guide.**

This leaflet is designed for newcomers to HIA - to define what it is, what it aims to do, the key concepts and principles on which it is based and how it can be applied. Some suggestions for further reading are also included for those who want to know more. View of download the guide here - [Health Impact Assessment - a 10 Minute Guide](#)

#### **The Merseyside Guidelines for Health Impact Assessment**

Alex Scott-Samuel, Martin Birley, Kate Arden. November 1998

These Guidelines were produced for the 1st UK Health Impact Assessment Conference held in Liverpool in November 1998. They have been written for those who wish to commission or carry out a health impact assessment. They will be of use to those working in central or local government, the health sector, the voluntary sector, and other bodies whose work influences (or is influenced by) public policy. The Guidelines therefore address commissioning issues and procedures, and outline methods for undertaking HIA.

### **Other Liverpool Public Health Observatory Reports**

The Observatory has occasionally undertaken work for voluntary and other agencies outside the NHS. Various publications have been produced as a result.

#### **Women's Health and Lifestyles. Results of a survey of women aged 25-34 years, based at the Elms General Practice, Dingle, Liverpool 1990**

C. Fernandez-Romeo, J. Ubido.

All women aged 25 to 34 registered in one practice (650) were sent the Oxford Health and Lifestyle questionnaire. There was a 61% response rate. Respondents were analysed by social class for various lifestyle factors.

January 1991

#### **Annual Public Health Report 1990, Mersey Regional Health Authority**

Edited by J. Hotchkiss.

Mortality statistics, coronary heart disease, cancer, some hospital activity, number of community care places for mental illness patients, discussion of prevention of major causes of adult mortality and the Regional Medical Officer's report.

April 1991

#### **Isle of Man Reports**

Review of health services on the Isle of Man, and projections for future requirements to the year 2010.

Vol. 1 The Review and Recommendations.

Liverpool University Health Planning Consortium. Edited by J. Ashton

April 1991

Vol. 2 The Results of the Community Survey.

M. Pearson, J. Dawson

May 1991

Vol. 3 Cancer on Man.

J. Youngson, D. Ashby, R. Hussey

May 1991

Dental Supplement

M. Lennon, T. Jenner

May 1991

#### **Evaluation of the "YUK" Accidental Poisoning Prevention Campaign in Liverpool.**

L. Dugdill, J. Ashton.

The report describes this campaign, and examines hospital data for childhood poisoning. Concludes that education must be linked to safe practice, and that messages need reinforcement with primary measures such as childproof packaging.

October 1991

**Vauxhall Health Report. A report on the health of the people of Vauxhall Ward, Liverpool.**

P.Mawle.

Photocopies of the glossy report were made available to members of the Vauxhall Community by Liverpool Family Health Services Authority. In addition to local health statistics, it contains a directory of local services. This report helped stimulate the formation of the Vauxhall Health Forum.

November 1991

**Alcohol Misuse in Mersey Region 1991.**

L. Dugdill, J. Ashton.

The report collates statistics available to assess the problems related alcohol consumption in Mersey. It highlights lack of local information and includes recommendations for further research.

March 1992

**Health Gain Seminars:**

A collaborative venture between Mersey Regional Health Authority, Eastern Health and Social Services Board, Northern Ireland and Yorkshire Health.

1. Summary - 5 pages
2. Coronary Heart Disease - 12 pages
3. Antenatal Screening for Congenital Abnormalities - 25 pages
4. Teenage Planned Parenthood - 24 pages

Also all 4 documents available in one report

July 1992

Also see "Health Gain: From Rhetoric to Reality" J. Hotchkiss, P. Watson, L. Boydell, Management in Medicine, 7(4).

**Abercromby and Granby Health Report. A report on the health of people of Abercromby and Granby Wards, Liverpool.**

J. Herd.

The report was commissioned by the Granby/Toxteth Community Project and the Liverpool Health Authorities, which compiles local health and social statistics, and a brief directory of community organisations, particularly those relevant to ethnic minorities.

May 1993

**Interim Evaluation of the Dallam on Health Project.**

P. Mawle, J. Hotchkiss, K. Snee

This brief report describes the first few months of an experiment in giving the community a budget for purchasing health and other services.

September 1993

**Heart of Warrington - a review of some of the approaches to heart disease prevention and treatment in Mersey Region and elsewhere.**

J. Ubido

North Cheshire Health Authority reviewed their strategy on heart disease and stroke. As a starting point, they decided to find out what could be learned from other districts in the Region. The public health departments of each health authority in Mersey Region were contacted and asked to describe their approaches to coronary heart disease prevention.

November 1993

**Heart of Warrington - Audit of activity related to heart disease prevention.**

(2 reports available: 'Summary' and 'Full audit plus recommendations')

J. Ubido

Interviews were carried out with 40 organisations in Warrington, including industry, NHS organisations, local government, education, and the community. The aim was to identify current policies on stopping smoking, healthy diet, reduced alcohol consumption, increased exercise, reduced stress and action against poverty. Organisations were also asked what they would like to be doing, and whether they would like to be part of an umbrella group to guide the heart disease strategy.

November 1993

**Health Care on Small Islands. A Review of the Literature.**

J. Hotchkiss.

Document commissioned by the World Health Organisation to give overview of the special problems faced by small islands in relation to health and the provision of health services.

Published by WHO, Geneva, 1994

**Family Planning , Abortion and Fertility Services**

J.R. Ashton, A. Marchbank, P. Mawle, J. Hotchkiss

Part of the Department of Health's needs assessment series. This document applies the findings of national studies to a reference district population to estimate the number of relevant events and services. Highlights need for better information.

In: Volume 2 of Health Care Needs Assessment, Radcliffe Medical Press 1994 ISBN 1-85775 002

0 Pages 555-594

**A Report on the Evaluation of Taking Sex Seriously Pilot Project**

P. Keeling.

An evaluation of a sex education package in schools.

December 1994, 65 pages



**Vauxhall Health and Lifestyles Report.**

P. Keeling.

A report on the health and lifestyles of the residents of Vauxhall ward, Liverpool.

January 1995

**Local Voices Seminar 1994, Merseyside and Cheshire,'Promoting Good Practice'.**

Neil Mercer

This is a report of a seminar on Local Voices, held at a community centre in Widnes, Cheshire. It serves as a guide for comparing some of the most common Local Voices methods and selecting those that best fit a particular set of needs.

February 1995

**Evaluation of the Wirral's Child and Family Support Service**

L. Winters

An evaluation of community mental health services for children and young adolescents.

April 1995

**Practice based profile for children in Helsby and Elton**

Dr. Alison J. Rylands and Janet Ubido.

The aim of the project was to develop a practice based profile for children in Helsby and Elton in order to provide a 'bottom up' approach to purchasing primary, secondary, tertiary and social care. Several sources of practice based information relating to children was collated. A profile of the circumstances in which the children live, something of their exposure to health care and the specific services offered to them was built up.

June 1995

**Cheshire Deaf Women's Health Survey**

J. Huntington, D. Warburton (Cheshire Deaf Women's Health Project) and J. Ubido

A project funded by the 'Local Voices' initiative with the aim of assessing health needs specific to deaf women in Cheshire.

September 1995

**Focus Groups, Observatory Guidance Notes Series, No.1**

N. Fleeman, P. Keeling

Guidance notes for running groups on a focused topic of interest.

December 1995

**Surveys, Observatory Guidance Notes Series, No.2**

J. Dawson, N. Fleeman, P. Keeling

Guidance notes for conducting surveys.

December 1995,

**Community Nutrition Assistant, Food and Health Training Project, Bolton. Progress Report - Evaluation of Phase I**

J. Ubido, L. Kennedy-Haynes

Progress Report - Evaluation of Phase 1: The Training Programme - its development, recruitment and implementation.

March 1996

**Developing Local Services - Setting priorities for mental and community health services in neighbourhood 9.**

H. McGourty, J. Lucy

August 1996

**Deprivation and Health in North Cheshire: an equity audit of health services.**

F. Johnstone, J. Lucy, A. Scott-Samuel, M. Whitehead (EQUAL, Equity in Health Research and Development Unit).

This report aims to define areas of deprivation, affluence and health need in North Cheshire, identifying evidence of inequality in health care and producing recommendations for action.

September 1996

**Health Needs Assessment in Primary Care, a report for Green Lane Medical Centre**

H. McGourty, J. Lucy

This report was commissioned by the practice in order to assess the health needs of the community and to aim to meet those needs through services provided in the practice and by others in the hospital and community trusts.

September 1996

**Health Needs Assessment in Primary Care - A literature review with examples from Mersey**

J. Ubido

The different sources of information for health needs assessment in primary care are described. There is a review of the collection of locally based existing data; data from general practice; views of the primary health care team; and views of patients and the wider public. The advantages of a combined approach are discussed. Examples from Mersey are given at the end of each section. The last section reports on the 'Mersey view' of how practices can be encouraged to carry out health needs assessments.

September 1996

## **Health Indicators - A literature review**

J. Lucy

September 1996

## **Evaluation of the Community Nutrition Assistant Food and Health Training Project, Bolton. Final Report.**

J. Ubido, L. Kennedy

The report evaluates the work of the Community Nutrition Assistants (CNAs), who are local people trained to explore the food and health needs of their communities. The evaluation covers the personal development of the CNAs, the type of work they do, and the people they reach. It attempts to measure the impact the CNAs have had in the community, and on service delivery.

April 1998

## **The Merseyside Guidelines for Health Impact Assessment.**

A. Scott-Samuel, M. Birley, K. Arden (Merseyside Health Impact Assessment Steering Group).

These guidelines were written for those who wish to commission or to carry out a health impact assessment. They will be of use to those working in central or local government, the health sector, the voluntary sector and other bodies whose work influences (or is influenced by) public policy. Methods for undertaking HIA are outlined.

November 1998

## **2010 Year of Health and Wellbeing Evaluation Report**

June 2011

View or download the report here - 2010 Year of Health and Wellbeing Evaluation Report

*"The Year of Health and Wellbeing was conceived as an approach that would have both an immediate impact and a longer term legacy. Our aim was to affect behaviour, change attitudes and also to influence policy. At a time when public budgets are under extreme pressure, it was important that we evaluated our activity.*

*Liverpool Public Health Observatory (LPHO) were commissioned to support the collation of this report and to help draw conclusions. The report is based on a range of evaluations which were specifically commissioned for individual projects or to evaluate the overall impact of the year."*

2010 Year of Health and Wellbeing – Full Report - <http://tinyurl.com/knnddyp>

## Acknowledgements

Thanks to all those who commented on drafts of this report

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April 2015



**Liverpool  
Public Health  
Observatory**

Liverpool Public Health Observatory (LPHO) is commissioned by the Merseyside Directors of Public Health, through the Cheshire and Merseyside Public Health Intelligence Network, to provide public health research and intelligence for the local authorities of Halton, Knowsley, Liverpool, St. Helens, Sefton and Wirral.

LPHO is situated within the University of Liverpool's Division of Public Health and Policy

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