O303049 Appendix B

Consultation Panel Recruitment Survey

Report from research carried out on behalf of

Rochford District Council and Castle Point Borough Council in partnership with Castle Point and Rochford PCT

August - October 2003







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1. Introduction

RBA Research recruited a new consultation panel of citizens for Rochford District Council and Castle Point Borough Council in partnership with Castle Point and Rochford Primary Care Trust (throughout this report referred to as 'the partnership') from August to October 2003. This report 'sets the scene' in terms of the profile of the panel and the current attitudes of that panel on a number of issues.

1.1 Background and Objectives

A consultation panel provides an opportunity to approach willing participants on a regular basis to seek their views on a range of topics. Panel members are all volunteers. The partnership acknowledges that consultation panels are appropriate for gaining 'broad brush' pictures of public opinion and for identifying specific sub-groups for more focused research. Whilst it is important for the panel to be a broad cross-section of the population in the partnership area (subsequently referred to as 'the area'), the partnership acknowledges that by their very nature, panels can never be fully representative of the area's population.

The panel provides ready access to this broad cross section of the population. It also provides access to a sufficiently large sample of the population that reliable results can be reported at an area wide level and at a number of sub-area or sub-group levels. Where appropriate, these surveys should also be complemented by targeted qualitative research designed to probe in more depth and gain a better understanding of views behind the figures.

The following specific aims have been identified for this consultation panel:

- Ensure feedback is obtained in a credible and consistent manner
- Enable the views of residents, service users and other stakeholders to be regularly collated on a wide variety of issues.
- Facilitate consultation on the Local Health Plan.

In addition the panel was proposed to be used as a tool to 'benchmark the needs of the area and monitor performance against the stated objectives of the LSPs of both Local Authorities.' RBA express concern over the intention to use the panel for this purpose. Panels are useful for studying changes in the opinions of individuals, but if the aim is to study how the opinions of the population as a whole are changing, the panel would not be a suitable vehicle. This is because panel members are not fully representative of the population, and become less and less representative over time. Even if the panel is periodically refreshed, it would still consist solely of volunteers, and mainly of people who have been conditioned, to a greater or lesser extent. For accurate measurement of changes in the views of the population as a whole, it would be necessary to take a fresh, representative sample each time.

1.2 Methodology

Postal questionnaires were sent out on 12th August 2002 to 10,000 residents randomly selected from the Electoral Register. By the original cut off date on September 5th, 1554 questionnaires had been returned indicating a wish to be a panel member but only 1077 (602 in Castle Point and 475 in Rochford) of these agreed to have their details passed on to the partnership. Consequently a letter (see appendix D) was sent out to the 477 respondents who did not wish to have their details passed giving them the opportunity to change their mind regarding data protection and thus be on the panel. The cut off date for the returns from this letter was October 3rd at which point there were 1567 questionnaires returned representing a response rate of 16%. Of these 1,226 had now agreed for their details to be passed on to the partnership (661 in Castle Point and 565 in Rochford).

1.3 Report Format

The findings of this survey are reported in two parts. The first part summarises the composition of the panel following this recruitment questionnaire and compares it with the population of the area. The second part of the report highlights the main findings from the attitudinal questions asked on the recruitment questionnaire. Any large differences between Rochford and Castle Point will be highlighted throughout the report (in addition any large differences between the Mainland and Canvey Island in Castle Point will also be pointed out). Sub-group analysis will usually be reported on the full panel for the partnership (1,226 members) due to the small numbers that would otherwise be within each group making interpretation difficult.

1.4 Interpretation of the Data

This report contains several tables and charts that show the survey results. In some instances, the responses may not add up to 100%. There are several reasons why this might happen: the question may have allowed each respondent to give more than one answer; only the most common responses may be shown on the table; or individual percentages may have been rounded to the nearest whole number such that the total comes to 99% or 101%. A * denotes a value less than 1%.

The results given in this report are based on the 1,226 respondents who agreed for their details to be passed to the partnership, since these respondents will make up the panel for future consultation. Unless otherwise stated, all tables and charts are based on all respondents. All of the figures given in this report are taken from the unweighted dataset.

1.5 Representativeness of the panel

Table 1 outlines the confidence intervals ¹ for the Rochford and Castle Point panels on a number of response rate scenarios, e.g. in Rochford a response rate of 70% would give us a sample size of 396. On a sample of this size we can be 95% confident that results are accurate to within +/- 4.9 percentage points, that is, if the survey results show that 50% of tenants are satisfied then we can be 95% confident that, had we included all residents, the 'real' result would have been between 45.1% and 54.9%.

Table 1 Confidence Intervals for the panel

		Full Reply	80% Response	70% Response	60% Response Rate
			Rate	Rate	
	Sample (n=)	656	452	396	339
Rochford	Confidence Interval	<u>±</u> 3.8	<u>±</u> 4.6	<u>±</u> 4.9	±5.3
Castle	Sample (n=)	661	529	463	397
Point	Confidence Interval	<u>+</u> 3.8	<u>±</u> 4.3	<u>±</u> 4.6	±4.9

¹ It should be noted that strictly speaking the confidence interval calculation only applies to simple random samples and panels (due to their self selecting nature) contain some bias.

2.0 Main Findings

2.1 Panel Profile

2.1.1 Demographics

The profile of the panel members is closely matched in terms of age, gender, ethnicity and working status to the profile of the partnership areas' population as reported in the latest available data (2001 census).

The panel is almost evenly split between men and women (48% and 52% respectively), unusually the proportion of men is higher amongst the oldest age group (56% of those 60+). The representation of women is slightly higher in the sample from Canvey Island (57%).

Almost two fifths of the sample are aged 18-44, and the same proportion is aged 45-59 (37% in each age band), and a quarter (26%) are aged 60 or over.

Over three-fifths of the sample are employed; 41% full time, 12% part-time and 9% self-employed. One in thirty-three (3%) are unable to work due to long-term sickness or disability. A fifth (20%) are wholly retired from work and a further 9% are looking after the home or family. Just 2% are in full-time education and 1% are unemployed and seeking work.

In terms of socio-economic group, just 4% of the panel are classified as A, one in seven as B (15%), over half are C1 (54%) one in eight are C2 (13%), one in nine are D (11%) and one in fifty are E (2%). This pattern holds true across all areas. Socio-economic groups (also known as 'social class' or 'social grade') are used to group people based on occupation. While it is true that there is a strong link between SEG and income, they are not the same. For example, a C2 manual worker could easily earn more than C1 office administrator. However C2s often think and behave differently to C1s regardless of their income.

One in five (21%) say they have a long-term illness, disability or health problem that limits their daily activities or the work they can do. Most of these say their problem affects their mobility and/or lifting/carrying ability (15%). Just under a fifth of the sample are registered disabled (18%) and one in seventeen (6%) describe themselves as an informal (unpaid) carer for someone who has a long-term illness or health problem.

Just over four fifths describe themselves as living in a household with two adults (82%), of which half live with one or more children (ie 40% of the total sample live in a household with two adults plus children). One in nine panel members live alone (11%) and one in thirty three are lone parent households (3%.)

The most common forms of property type are detached or semi-detached (48% and 40% respectively). One in fourteen panel members say they live in a terraced property (7%) and one in thirty-three say they live in a flat, bedsit or maisonette (3%.)

The majority of the panel own their own home (87%), one in sixteen live with family (6%). Similar proportions rent from the council or from a private landlord (2% in each case) or rent from a housing association (1%.)

More than nine out of ten panellists live in a household which has access to a car or van (94%.)

Almost all panel members describe themselves as from a white background, mostly white British (96% in Rochford, 98% in Castle Point). One in a hundred are from a non-white background (1%) and 0.2% are from a mixed background. These proportions reflect the population profile of the area(s). Due to the small number of non-white panellists it is not possible to comment further within this report on differences between white and non-white panel members.

No one on the panel is an elected councillor for the County, District, Borough or Parish Council or an employee of the Castle Point and Rochford Primary Care Trust.

2.2 Living in Rochford and Castle Point

Several questions within the panel recruitment questionnaire dealt with living in Rochford and Castle Point generally. These ranged from the 'factual' (eg how long residents have lived there) to the 'attitudinal' (eg how satisfied residents are with their area as a place to live.) This section of the report covers these issues.

2.2.1 How long Panel members have lived in the area

Table 2 shows how long residents have lived in their respective areas.

Table 2:	How long	have voi	ı lived in	the area?
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	ROCHFORD	CASTLEPOINT
Base:	565	661
	%	%
Under 1 year	0	0
1-2 years	13	4
3-5 years	13	6
6-10 years	12	8
11-20 years	21	20
21+ years	41	61
Unknown	0	1

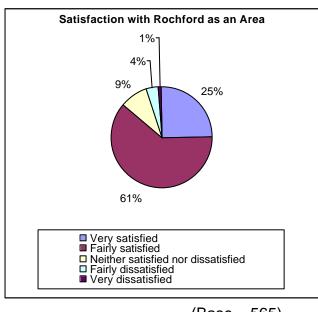
Members of the panel in Castle Point have the greater tendency to be long-standing residents with a mean or average length of time in residence of 25 years. Across the panel as a whole, three-fifths have lived in the area for more than twenty years and only a tenth have moved into the area within the last five years.

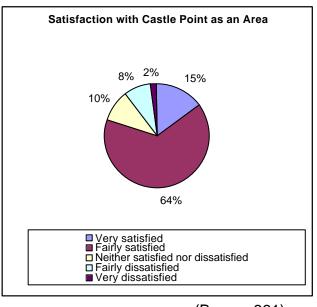
Panel members in Rochford have a slightly lower average residency of 12 years. This reflects a much more varied length of residency; two fifths have lived in Rochford for more than twenty years and a quarter have moved into the area within the last five years.

2.2.2 Perceptions of the area

Charts 1 & 2 below show that overall the majority of panel members are satisfied with their area. However the level of satisfaction is slightly higher in Rochford than Castle Point (86% and 79% respectively). In particular the number of panel members in Rochford 'very satisfied' with their area is much higher than in Castle Point (25% compared with 15%). Correspondingly the levels of dissatisfaction in Castle Point are higher. One in twelve are 'fairly dissatisfied' with the area (8%) and one in fifty 'very dissatisfied' (2%), this compares with one in twenty-five Rochford panel members who are 'fairly dissatisfied' with their area (4%) and one in a hundred who are very dissatisfied with the area (1%).

Charts 1 & 2 Satisfaction with the area





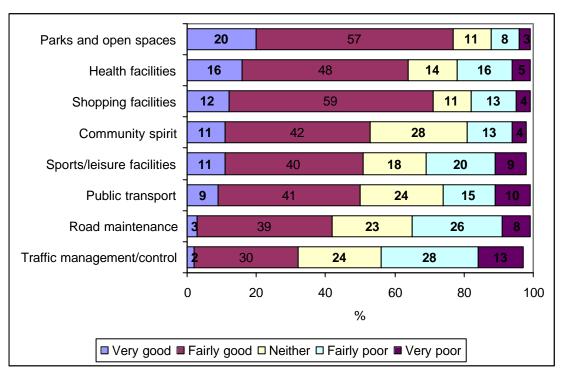
(Base = 565)

(Base = 661)

Across the panel as a whole, satisfaction with the area differs greatly by tenure, with those owning their own home more likely to say they are 'very' or 'fairly' satisfied compared with those that rent from the council or a housing association and those who rent from a private landlord or live with family (84%, 67% and 75% respectively).

Respondents were asked to rate their local area with regards to several factors; charts 3 & 4 show the panel members' ratings of the facilities in their area.

<u>Chart 3: Rating of Local Facilities – Rochford</u> (Base=565)

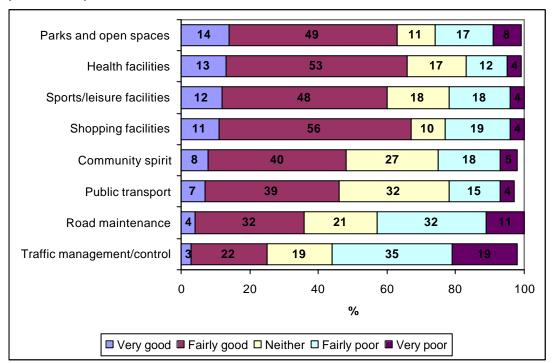


Parks and open spaces are rated the most favourably in Rochford with three quarters rating them as good or very good (77%) and only one in nine (11%) rating them as poor or very poor.

Over half of the panel members in Rochford rate health facilities, shopping facilities and community spirit in their area as either good or very good (64%, 71% and 53% respectively); half rate sports and leisure facilities and public transport as good or very good (51% and 50% respectively). However, a large proportion of panel members rate these same facilities as poor or very poor (21%, 17%, 17%, 29%, 25% respectively).

One in three panel members rate road maintenance in the Rochford area as poor or very poor (34%) and just over two in five rate traffic management control poorly (42%).

<u>Chart 4: Rating of Local Facilities – Castle Point</u> (Base=661)



At least six in ten panel members in Castle Point rate parks & open spaces, health facilities, shopping facilities and/or sports & leisure facilities in their area as either good or very good (63%, 67%, 67%, and 60% respectively). However, in each case there are approximately one in five panel members who rate these same services as poor (25%, 16%, 24% and 20%).

Almost half of panel members in Castle Point rate community spirit and public transport as good or very good (48% and 47% respectively); however, one in five panel members rate public transport poorly (19%) and one in four rate the community spirit in their area as poor or very poor (23%).

However, just over half of the Castle Point panel members rate traffic management and control as poor or very poor (55%) and just over two in five rate road maintenance in their area as fairly or very poor (43%).

Table 3 shows that panel members living on Canvey Island tend to rate shopping facilities, parks and open spaces, traffic management / control and health facilities less favourably than panel members living on the mainland. Conversely it shows that they tend to rate sports / leisure facilities and community spirit more favourably.

Table 3: Rating differences between areas in Castle Point

Facility rated	% saying good or very good – Canvey Island	% saying good or very good – Mainland
Base:	419	235
Shopping Facilities	62	70
Parks and Open Spaces	50	71
Traffic management / control	21	27
Health Facilities	57	72
Sports / leisure facilities	71	55
Community spirit	63	40

Rating of Local Facilities Compared

Panel members in Rochford tend to rate the following more favourably² than panel members in Castle Point:

- Road maintenance (42% compared with 36%)
- Traffic management / control (33% compared with 25%)
- Parks and open spaces (77% compared with 63%)
- Community spirit (54% compared with 48%)

Panel members in Castle Point tend to rate the following more favourably than panel members in Rochford:

- Sports / leisure facilities (60% compared with 51%)
- Health facilities 67% compared with 64%)

There are no major differences between the two areas in ratings on shopping facilities or public transport.

Within the partnership area as a whole, seven in ten panel members rate the shopping facilities favourably (69%). This rating varies with the length of time the person has lived in the area, with longer-term residents rating the facilities less favourably (65% of those living in the area 20 + years rate it favourably, compared with 77% of panel members who have lived in the area for less than 10 years).

Road maintenance is also given a slightly less favourable rating by those who have lived in the area longer; just over a third of those who have lived in the area for more than 20 years give road maintenance a favourable rating (35%) compared with around two in five of those who have lived in the area for 10-20 years or under ten years (41% and 45% respectively). Ratings of road maintenance also vary with respect to disability status (a third (32%) of those with a disability give a favourable rating compared to 40% of panel members without a disability).

Panel members who have been living in the area longer are more likely to rate community spirit as poor or very poor (25% of those living in the area 20+ years, compared with 12% of those living in the area less than 10 years and 19% of those in the area between 10 and 20 years). This is a common pattern in survey research – it seems that longer-standing residents are more likely to look back to the 'good old days', whereas newer residents tend

² Throughout this section (and section 2.4) a favourable rating of a facility / service refers to the percentage rating that facility as good or very good and an unfavourable rating refers to a rating of poor or very poor.

to consider their current area compared with others they have lived in more recently.

Community spirit is also more likely to be rated as good / very good by women (55% compared with 46% of men) and by panel members who are disabled (56% compared with 49%); however these differences reflect an increase in the proportion of men and non disabled panel members rating community spirit as neither good nor poor.

Health facilities are given a more favourable rating by older residents, three-quarters of those aged 60+ (74%) compared with almost two-thirds if those aged 45-59 (65%), three in five of those 25-44 (61%) and just under half of those under 25 (47%). These ratings reflect a corresponding lower proportion of older residents in the partnership area rating the health service poorly.

2.2.3 Improvement Needs

Residents were then asked to state what they think would make their area a better place to live. Table 4 illustrates where residents see the greatest need for improvement.

Table 4: What would make the area a better place to live?

	Rochford & Castle Point Combined	Rochford	Castle Point
Base:	1226	565	661
	%	%	%
Better road system/less traffic congestion*	73	64	80
Less crime/vandalism*	72	62	80
Better sports/leisure facilities*	42	45	40
Better job opportunities*	40	39	40
Better health facilities*	39	39	38
Better public transport*	36	36	37
Better schools*	16	18	15
Other thing(s)	8	7	9
Facilities/ activities for youngsters/ teenagers	7	6	7
More police/ police on the streets	6	4	7
Cleaner streets/ litter	5	4	5
Better shops	4	4	3
Less housing/ house building/ keep the green belt	3	3	3
Better pavements	2	2	3
NHS dentist/ doctor etc	2	2	1
Nothing, the area is fine as it is	1	2	1
Better recycling/ waste disposal facilities	1	2	1

^{*} These options were listed on the questionnaire and hence 'prompted' the respondents. The other options are things that respondents wrote in themselves. Had they been on the prompted list, it is likely that higher proportions would have selected them.

Over half of panel members feel that road systems / traffic congestion (64% in Rochford and 80% in Castle Point) and/or less crime / vandalism would make their area a better place to live (62% in Rochford and 80% in Castle Point).

Over a third of panel members feel that improvements in sports and leisure facilities (45% in Rochford and 40% in Castle Point), job opportunities (39% in Rochford and 40% in Castle Point), health facilities (39% in Rochford and 38% in Castle Point) and public transport (36% in Rochford and 37% in Castle Point) would make their area a better place to live.

Improvements in schools are mentioned by similar proportions in Rochford and Castle Point (18% and 15% respectively).

2.2.4 Feelings of safety

Almost all panel members say they feel safe outside during the day in the area in which they live (96%), this figure drops to 64% after dark (66% in Rochford and 62% in Castle Point). This leaves three in ten panellists feeling unsafe outside in their area after dark.

Within Castle Point the figures differ by area, with panel members on the mainland tending to feel safer than those on Canvey Island (65% on the mainland and 57% on Canvey Island say they feel safe).

Panel members with a disability report feeling less safe than panellists without a disability, both during the day (92% compared with 97%) and at night (53% compared with 67%).

Respondents who are not satisfied with the area they live in tend to report lower feelings of safety than those who are happy with the area in which they live, both during the day (92% compared with 97%) and at night (41% compared with 69%). This suggests that feelings of safety are linked to attitudes towards the area – but the results cannot tell us which causes the other.

Additionally, those who have lived in the area longer are less likely to report feeling safe both during the day and at night as shown in Charts 5&6:

Chart 5: Residents feelings of safety outside in their area during the day. (Base: <10 years=308, 10-20 years=231, 20+ years=670)

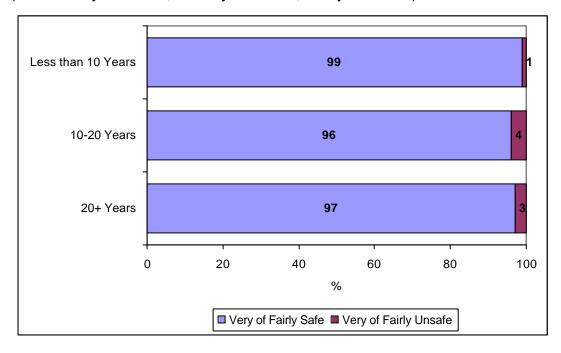
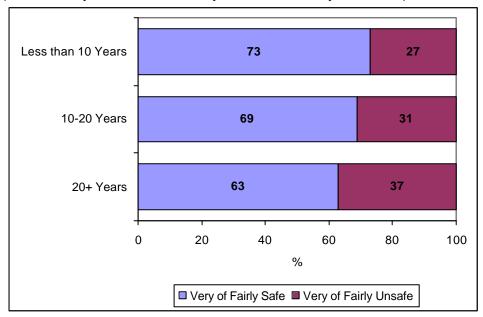


Chart 6: Residents feelings of safety outside in their area after dark (Base: <10 years=297, 10-20 years=225, 20+ years=648)



There are no major differences between men and women's feelings of safety during the day, but at night men are more likely to say they feel safe (71% compared with 57% of women).

2.3 Services used in the last 12 months

From a list of local services, respondents were asked to indicate which they had used in the last 12 months. The results to this question will allow the partnership to target particular groups of 'service users', should this be appropriate for future research.

Table 5 shows the proportions that have used each broad area of service in the last 12 months (either personally or from that household).

Table 5: Services used in the last 12 months

	Rochford & Castle Point Combined	Rochford	Castle Point
Base:	1226	565	661
	%	%	%
Refuse collection	96	96	96
GP services	93	91	94
Pharmacy services	90	88	91
Waste recycling centres	79	77	80
Parks and open spaces	77	81	73
Trains	64	70	59
Libraries	63	65	62
Hospital services	61	58	64
Leisure facilities	58	55	60
NHS dental services	55	43	65
Optometry services	47	44	51
Buses	47	44	50
Accident and emergency services	32	33	32
Schools	31	33	29
Police	22	21	24
Community halls	19	19	19
Colleges / further education	18	17	19
Citizen's Advice Bureau	12	14	10
Health visiting services	8	8	7
Voluntary services	6	6	6
District nursing services	6	5	7
Mental Health services	4	4	3
None of these	*	*	*

The most commonly used services are refuse collection, GP services, Pharmacy Services, waste recycling centres and parks & open spaces, all used by at least three-quarters of panellists.

Panel members in Castle Point are more likely than those in Rochford to report using the following health facilities:

- Hospital services (64% compared with 58%)
- NHS dental services (65% compared with 43%)
- Optometry services (51% compared with 44%).

Panel members in Rochford are more likely than those in Castle Point to report using parks and open spaces (81% compared with 73%) and/or trains (70% compared with 59%).

Households with children are more likely to report having used the following services:

- Leisure facilities (73% compared with 45% of those without children)
- Parks and open spaces (84% compared with 72%)
- Libraries (72% compared with 56%)
- NHS dental services (62% compared with 49%)
- Accident and Emergency services (39% compared with 26%)
- Buses (50% compared with 44%)
- Schools (61% compared with 7%)
- Police services (26% compared with 19%)
- Colleges and Further Education (24% compared with 12%)

Households in which the panel member is a carer for someone with a long term illness or disability are more likely to say they have used the following services:

- Hospital services (81% compared with 60%)
- Optometry services (64% compared with 46%)
- Accident and Emergency services (44% compared with 31%)
- Voluntary services (16% compared with 6%)

The following service uses differ by age:

- Waste recycling centres less likely to be used by panel members aged under 25,
- Colleges and Further Education institutions are more likely to be used by panel members under 25,
- Leisure facilities, trains and schools are less likely to be used by panel members over 60.

2.4 Perceptions of Health Services

Panel members were asked to rate various aspects of the health service. Some large differences were found between members living in Rochford and Castle Point.

Panel members in Castle Point are more likely than those in Rochford to rate the following services as good or very good:

- Family doctor (82%, compared with 76%)
- NHS dentist (55%, compared with 20%)
- District Nursing services (36%, compared with 25%)
- Optometry services (Opticians) (78%, compared with 65%)

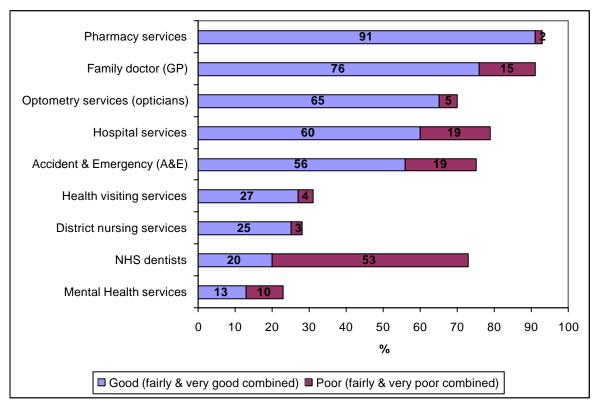
Panel members in Rochford, however, tend to be slightly more positive than Castle Point residents about Accident and Emergency services (56% rate them as good or very good, compared with 48%).

As would naturally be expected he proportions of panellists rating all of these services poorly is higher amongst those who indicated in question 5 that better health facilities would make the area a better place to live.

2.4.1 Perceptions of Health Services in Rochford

Chart 7: Rochford Panel Members' perceptions of health services

Base: 565



Pharmacy services

Nine in ten panel members in Rochford rate the Pharmacy services in their area favourably (91%), one in fifty rate them as poor or very poor (2%) and one in twenty as neither good nor poor (5%).

Family doctor (GP)

Three quarters of panel members in Rochford rate their family doctor as good or very good (76%). This figure differs significantly between panel members who are satisfied with the area and those who are dissatisfied with the area (78% compared with 57%). More women on the panel gave their family doctor a rating of good or very good (80%, compared with 70% of men).

Optometry Services

Almost two-thirds of panel members rate the optometry services in their area as good/very good (65%). Older panel members are more likely to give the service a positive rating, just over seven in ten of those aged over 45 (74% of those over 60 and 71% of those 45-59) compared with just over half of those aged 44 or under (54% aged 25-44, and 50% of those under 25).

Hospital Services

Three in five panel members rate the hospital services in Rochford as good or very good (60%), equal proportions rate them as neither good nor poor(19%), or as poor/very poor (19%). The proportion of panel members rating the services positively relates to the satisfaction with the area as a whole and age; the proportion rating the service as good or very good reduces to two in five of those who are dissatisfied with the area and those who are under 25 (41% in each case). Ratings also vary within socio-economic group with more DEs rating the service as good/very good than ABs (70% and 53% respectively).

Accident and Emergency (A&E)

Just over half of panel members in Rochford rate the A&E services in their area as good/very good (56%) and one in five rate them as poor / very poor (19%). Panellists are more likely to rate the service as *fairly* good or fairly poor than the extremes of *very* good or very poor. Again the proportion of panel members rating the services positively relates to the satisfaction with the area as a whole, (59% of those satisfied compared to 39% of those dissatisfied) and with gender (61% of women rate the service positively compared with 52% of men).

NHS Dentist

Over half of panel members in Rochford perceive the NHS dentist service in their area to be poor or very poor (53%) compared with just one in five (20%) who rate the service as good or very good. Within these ratings there are higher proportions rating the service as fairly good (14%) compared with very good (6%) and as very poor (33%) compared with fairly poor (20%) indicating a definite dissatisfaction with the service.

District Nursing Services

A quarter of panel members rate district nursing services as good or very good (25%), this reflects usage of the service as only one in thirty-three rate the service poorly (3%) and over half rate the service as neither good not poor (58%). Of those that have used the service over eight in ten panellists rate it as either good or very good (83%). A greater proportion of panellists with children in the household rate this service positively (32% compared with 20% of those without children).

Health Visiting Services

Just over a quarter of panel members in Rochford rate the health visiting services in their area as good or very good (27%), one in twenty-five (4%) rate the service poorly and over half rate the service as neither good not poor (55%).

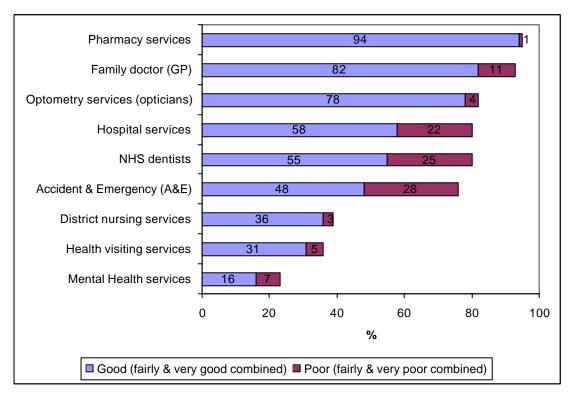
Mental Health Services

One in eight panel members from Rochford rate mental health services in their area as good or very good (13%) and one in ten rate them as poor or very poor (10%), just over three in five rate them as neither good nor poor (62%).

2.4.2 Perceptions of Health Services in Castle Point

Chart 8: Castle Point Panel Members perceptions of Health Services

Base: 661



Pharmacy services

Over nine in ten panel members in Castle Point rate local Pharmacy services favourably (94%). Ratings are similar across all sub-groups.

Family doctor (GP)

Just over eight in ten Castle Point panel members rate their GP as good or very good (82%). This figure differs between panel members who are satisfied with the area, (84%, compared with 72% of those who are dissatisfied). Older members of the panel are more likely to give a favourable rating of their GP, almost nine in ten of those aged 60 + (87%), and over eight in ten of those aged 45-59 (84%) do, compared with just over three quarters of those 35-44 (77%) and almost two thirds of those under 25 (64%). Carers are also among those most likely to give a positive rating (92% do).

Optometry Services

Just under eight in ten Castle Point panel members rate the optometry services in their area as good or very good (78%) a further one in six rate it as nether good nor poor (16%) and one in twenty-five rate the service as poor (4%).

The proportion giving a positive rating falls to just seven in ten of those aged 25-44 (70%) compared with just over eight in ten aged 45+ (82%).

Hospital Services

Almost six in ten panel members (58%) rate the hospital services in the Castle Point area as good or very good. Panel members who care for someone else with a long term illness or condition are among those most likely to give a favourable rating (73% do, compared with 58% of 'non-carers').

NHS Dentist

Just over half of panel members in Castle Point rate the NHS dentist service in their area as good or very good (55%). A quarter rate the service as poor or very poor (22%).

Accident and Emergency (A&E)

Just under half of panel members in Castle Point rate A&E services in their area as good or very good (48%). A&E is the health service in Castle Point with the highest proportion of panel members rating it as poor or very poor (28%).

Residents over the age of 60 are most likely to rate A&E favourably (60% do) compared with around two in five of those aged under 25 (45%), 25-44 (41%) and 45-59 (45%).

District Nursing Services

Just over a third of panel members rate district nursing services as good or very good (36%), this most likely reflects usage of the service as only one in thirty-three rate the service poorly (3%) and almost half rate the service as neither good not poor (49%). Just over three-quarters of panel members who have used the service rate it as good/very good (77%).

Health Visiting Services

Just over a third of panel members in Castle Point rate health visiting services in their area as good or very good (31%), this most likely reflects usage of the service as only one in twenty (5%) rate the service poorly and just over half rate the service as neither good not poor (52%). Just over three in five of panel members who have used the service rate it as good/very good.

Mental Health Services

One in six panel members from Castle Point rate mental health services in their area as good or very good (16%), only one in fourteen rate them as poor or very poor (7%), just over three in five rate them as neither good nor poor (62%).

3.0 Summary

3.1 Panel Profile

- The profile of the panel members is closely matched in terms of age, gender, ethnicity and working status to the profile of the partnership area's population as reported in the latest available data (2001 census).
- The split between male and female panel members is almost equally balanced, with a slightly higher proportion of women (52%).
- In terms of employment:
 - > 41% are in full time employment,
 - ▶ 12% are in part-time employment
 - > 9% are self-employed.
 - Overall 62% are in paid employment.
 - 20% retired
 - > 9% look after the home or family
 - > 3% are permanently sick or disabled.
 - > 2% are in full-time education
 - 1% are unemployed and available for work.
- In terms of socio-economic group
 - ➤ 4% are classified as A.
 - > 15% as B
 - > 54% as C1
 - > 13% as C2
 - > 11% as D
 - > 2% as E
- One in five say they have a long-term illness, disability or health problem (21%).
- Almost one in five are registered disabled (18%)
- Just over four fifths are living in a household of two adults (82%), half of these have one or more children. One in nine panel members live alone (11%) and one in thirty three are lone parent households (3%.)
- 48% live in a detatched property, 40% in a semi-detatched, 7% say they live in a terraced property and 3% in a flat, bedsit or maisonette.
- 87% own their own home, one in sixteen live with family (6%), 5% rent from the council, a private landlord or rent from a housing association.
- 94% of panel members live in households with access to a car or van.
- Almost all panel members describe themselves as from a white background, mostly white British (96% in Rochford, 98% in Castle Point). These reflect the population profiles of the areas'.

3.2 Main Attitudinal Findings

3.2.1 Perceptions of the area

- The majority of panel members are satisfied with their area (86% in Rochford and 70% in Castle Point). Panel members in Rochford are more likely to be very satisfied with their area and less likely to be fairly or very dissatisfied than those in castle point.
- In Rochford parks and open spaces are rated the most favourably with three quarters rating them as good or very good (77%) and only one in nine (11%) rating them as poor or very poor. Over half rate health facilities, shopping facilities and community spirit in their area as either good or very good (64%, 71% and 53% respectively); half rate sports and leisure facilities and public transport as good or very good (51% and 50% respectively). However, a large proportion of panel members rate these same facilities as poor or very poor (21%, 17%, 17%, 29%, 25% respectively). One in three panel members rate road maintenance in the Rochford area as poor or very poor (34%) and just over two in five rate traffic management control poorly (42%).
- In Castle Point six in ten panellists rate parks & open spaces, health facilities, shopping facilities and/or sports & leisure facilities in their area as either good or very good (63%, 67%, 67%, and 60% respectively). Approximately one in five panel members rate these same services as poor (25%, 16%, 24% and 20%). Almost half rate community spirit and public transport as good or very good (48% and 47% respectively). One in five rate public transport poorly (19%) and one in four rate the community spirit in their area as poor or very poor (23%). Just over half of the Castle Point panel members rate traffic management and control as poor or very poor (55%) and just over two in five rate road maintenance in their area as fairly or very poor (43%).
 - Panel members living on Canvey Island tend to rate shopping facilities, parks and open spaces, traffic management / control and health facilities less favourably than panel members living on the mainland. Conversely it shows that they tend to rate sports / leisure facilities and community spirit more favourably.
- Panel members in Rochford tend to rate the following more favourably than panel members in Castle Point:
 - Road maintenance (42% compared with 36%)
 - Traffic management / control (33% compared with 25%)
 - Parks and open spaces (77% compared with 63%)
 - Community spirit (54% compared with 48%)
- Panel members in Castle Point tend to rate the following more favourably than panel members in Rochford:
 - Sports / leisure facilities (60% compared with 51%)
 - Health facilities 67% compared with 64%)

3.2.2 Improvement Needs

- Road systems & traffic congestion and/or crime & vandalism are the things mentioned by over seven in ten panel members when asked what would make the area a better place to live (73% and 72% respectively).
- Over a third of panel members mentioned improvements in sports & leisure facilities (42%), job opportunities (40%), health facilities (39%) and public transport (36%) as things that would make their area a better place to live.

3.2.3 Feelings of safety

Almost all panel members say they feel safe outside during the day in the area in which
they live (96%), this figure drops to 64% after dark. Those who have lived in the area
longer are less likely to report feeling safe both during the day and at night. Panel
members with a disability and those not satisfied with the area in which they live tend to
report lower feelings of safety.

3.2.4 Services used in the last 12 months

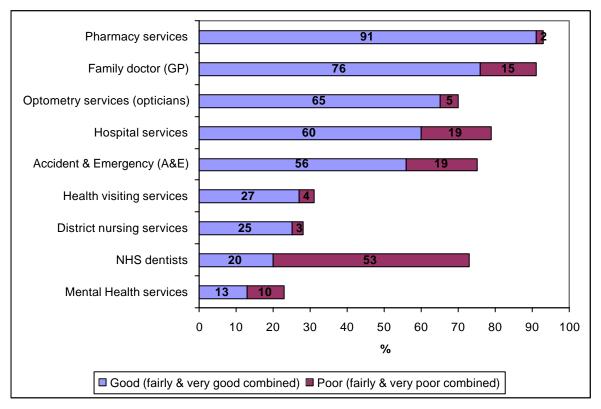
- The most commonly used services are refuse collection (96%), GP services (93%), Pharmacy Services (90%), waste recycling centres (79%) and parks & open spaces (77%).
- Panel members in Castle Point are more likely than those in Rochford to report using the following facilities
 - Hospital services (64% compared with 58%)
 - NHS dental services (65% compared with 43%) and/or
 - Optometry services (51% compared with 44%).
- Panel members in Rochford are more likely than those in Castle Point to report using
 - Parks and open spaces (81% compared with 73%) and/or
 - Trains (70% compared with 59%).

3.2.5 Perceptions of Health Services

Panel members were asked to rate various aspects of the health service.

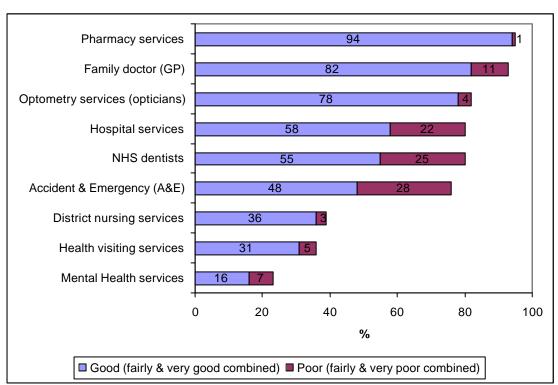
Rochford Panel Members' perceptions of health services

Base: 565



Castle Point Panel Members perceptions of Health Services

Base: 661



- Panel members in Castle Point are more likely than those in Rochford to rate the following services as good or very good
 - > Family doctor (82%, compared with 76%)
 - NHS dentist (55%, compared with 20%)
 - District Nursing services (36%, compared with 25%)
 - Optometry services (Opticians) (78%, compared with 65%)
- Panel members in Rochford tend to be slightly more positive than Castle Point residents about Accident and Emergency services (56% rate them as good or very good, compared with 48% in Castle Point).
- As would naturally be expected he proportions of panellists rating all of these services
 poorly is higher amongst those who indicated in question 5 that better health facilities
 would make the area a better place to live.

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October 2003

APPENDICES

APPENDIX A – Marked Up Questionnaire

APPENDIX B – Panel Questionnaire – Rochford

APPENDIX C – Panel Questionnaire – Castle Point

APPENDIX D – Data Protection Letter