

Rhwydwaith Byw'n Iach
Healthy Living Network

Rhondda Cynon Taf



An **Evaluation** of the Rhondda Cynon Taff **Healthy Living Network** Project

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Commissioned by the HLN Partnership
Funded by the Big Lottery Fund
March 2009

Summary Report

The Healthy Living Network is a community health development project in Rhondda Cynon Taff funded by the Big Lottery under their Healthy Living Centre Programme. This report summarises the findings of an independent evaluation of the impact that this project has had on the individuals, communities and organisations involved. The full technical report of this evaluation is available on request from Rhondda Cynon Taff Local Public Health Team.



Background

The Healthy Living Centres Programme

The Healthy Living Centres (HLCs) programme was launched in 1999 by the New Opportunities Fund (now Big Lottery Fund) to promote health in its broadest sense in the most disadvantaged sectors of the population. It aimed to reduce differences in the quality of health between individuals, and improve the health of the worst off in societyⁱ

The success of Healthy Living Centres pivots on being community-ledⁱⁱ, namely local people and communities identifying, defining and developing ways of addressing their own health needs. Healthy Living Centres have taken different forms, including partnerships and networks as well as physical centres^{iii iv}

The Healthy Living Network Project

In response to the Healthy Living Centres programme, a cross-sector partnership of organisations in Rhondda Cynon Taff developed a bid for funding to support a Healthy Living Network (HLN). Rhondda Cynon Taff is an area with significant health inequalities and a relatively high number of disadvantaged communities^v. A Network model for Rhondda Cynon Taff was developed in order to:

- reach a large number of geographically dispersed disadvantaged communities
- address inequalities in health on an equitable basis
- build community capacity (a community's ability to identify and address its own needs, issues and problems) for health that would be sustainable

In the period of time between developing the bid and the initiation of the Healthy Living Network in 2004 the majority of the communities targeted by the project received Communities First status¹. Although the objectives of the project remained the same, this had implications for the way that the network has delivered these.

The objectives of the HLN as identified in the Business Plan, 2001^{vi} are to:

- Increase the confidence and skills of individuals to identify the issues that affect their own health; the steps that they can take and the services that can help them
- Increase the capacity of communities to take collective action on health issues
- Work with health professionals to increase access to services through relocating services to more accessible local facilities and reducing the barriers to access for other services

- Increase the knowledge and skills of individuals in the community around health issues
- Put health issues on the agenda of all organisations and agencies

The Business Plan (2001) also outlines the underpinning principles of the project as follows:

- That the Healthy Living Network would be available to communities across Rhondda Cynon Taff to ensure an equitable service based on need
- That it should focus on existing community facilities, groups and organisations and make use of existing infrastructures
- That it should seek to increase access to health related activities
- That sustainability should be achieved through the development of the capacity within communities to deliver action on local health needs in the longer term.

¹Communities First is the Welsh Assembly Government's flagship programme to improve the living conditions and prospects for people in the most disadvantaged communities across Wales.

The Healthy Living Network model

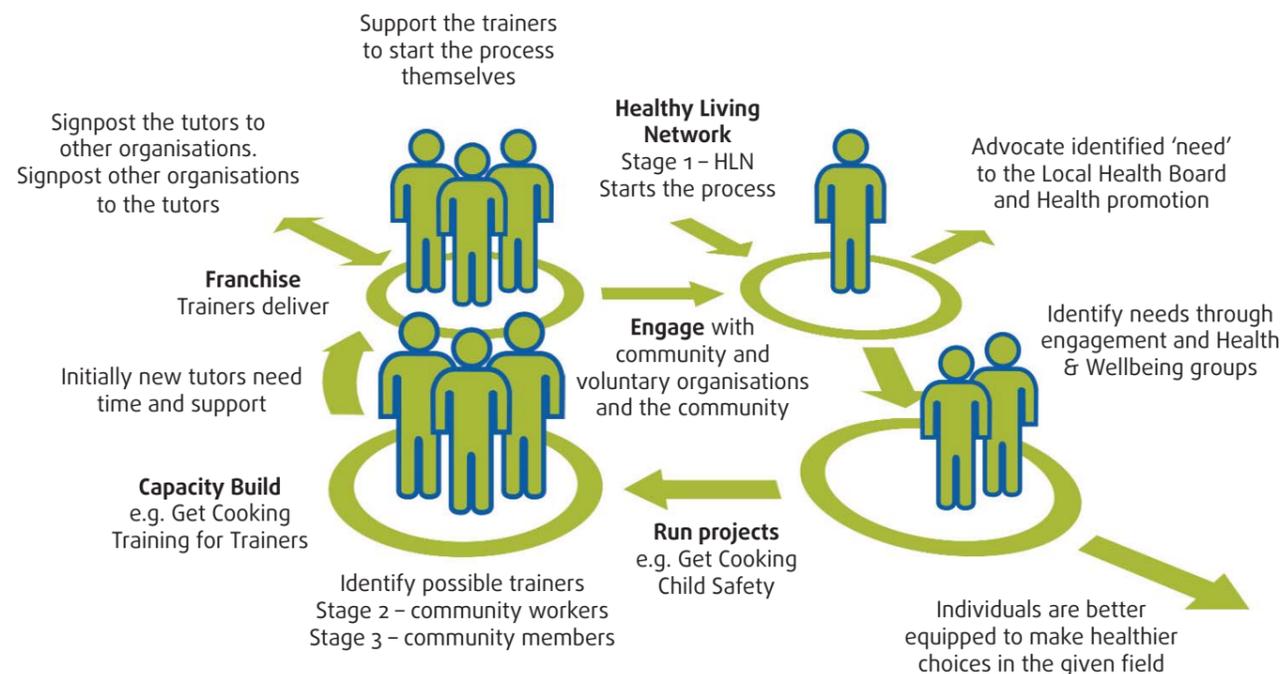
The Healthy Living Network comprises a peripatetic team of health development workers who work in the most deprived communities. The Network Team provides training and supports a variety of health improvement activities in local community venues across Rhondda Cynon Taff rather than in the 'traditional' Healthy Living Centre building.

The purpose of the Healthy Living Network is to help local communities identify their own health needs, and subsequently to build capacity to address these. It is anticipated that the knowledge, skills and confidence built within communities will

enable local initiatives developed as a result of this project to be sustainable after the project funding has ended. This is conceptualised in a diagram one:

The Healthy Living Network Project is supported by a cross-sector Partnership Board and the Team is based at the Local Health Board and managed by the Local Public Health Team.

Healthy Living Network Capacity Building Model



Note
Capacity Building is delivered by Health Promotion under the Healthier Communities banner - this allows the governance and good practice to be highlighted from the start

Monitoring

The HLN has directly engaged with over 21,301 beneficiaries over three years (April 2009) through a diverse range of projects and training.

Get Cooking

- 7893 beneficiaries,
- 288 tutors trained,
- 5995 beneficiaries through the HLN
- 1898 beneficiaries through tutors
- 80 tutors attended two update days

Sexual Health

- 125 youth and community workers trained
- 9 new Condom Card Scheme outlets established

Child Safety

- 505 beneficiaries have received a paediatric first aid and child safety in the home training
- 56 tutors trained

Healthier Communities

- 153 beneficiaries
- Several new modules have been developed in partnership with various agencies; An Introduction to Health Improvement, the Council as a Health Improving Agency, Behaviour Change, Food Glorious Food, Mental Health Awareness, Introduction to Mental Health Promotion, Health Impact Assessments, How to Run a Focus Group, Motivational Interviewing, Child Poverty

Food Hygiene

- 419 beneficiaries

Appointed Persons First Aid

- 193 beneficiaries

The figures above have been formally recorded with the Healthy Living Network. Unfortunately due to the very nature of cascade training, gathering accurate monitoring data from the tutors trained is difficult. Feedback from tutors suggests that many are delivering sessions for which no monitoring data is submitted and therefore it is likely that the actual number of beneficiaries is higher.

The Network has supported the development of 13 new walking groups, 6 new food coops and 4 Health Impact Assessments of community projects. The Team also sit on a range of local partnerships including Mentro Allan, Active Communities, E3 plus, Communities First, I Love Walking partnership, Sexual Health Training sub group, Nutrition Strategy sub group, Patient Participation group and the Mental Health Promotion Strategy Steering Group.

The Evaluation

A qualitative approach was taken with the evaluation of Rhondda Cynon Taff Healthy Living Network in order to assess the extent to which objectives were met, to examine the way that the Network and its partnership operated and assess the impacts on individuals, communities and organisations.

This evaluation was not designed to measure health outcomes. Health outcomes may take generations to achieve and, as is often the case, there are no appropriate baseline measurements for Rhondda Cynon Taff from which to measure change or improvement in health^{vii}.

The evaluation, completed over a seven month period, obtained diverse perspectives utilising documentary analysis, observation and semi-structured in-depth individual or group interviews.

34 representatives from a range of community, voluntary and statutory organisations were interviewed as well as a small number of community groups and members (4). Accepted research practice was adhered to during design, data collection, analysis and report writing.

The findings are set out in the full technical document² as seven community case studies and five individual/group case studies with the Partnership Board, voluntary organisations and statutory sector presented in sections.

² Golby A (2009) An Evaluation of the Rhondda Cynon Taff (RCT) Healthy Living Network Project: full technical report Commissioned by the HLN Partnership and funded by the Big Lottery Fund, March 2009



Findings

The evolving Healthy Living Network Project

The Team had to firstly build relationships with local communities before they were able to build local capacity to meet health needs. A number of health activities and initiatives, such as demonstrating how to make curries, soups and fruit 'smoothies' at local community events, physical activity taster sessions and Get Cooking, were used by the Team to firstly engage with local communities, build trust and then relationships.

Activities such as these enabled the Team to identify more specific needs and priorities. They also provided the opportunity to engage with both the community members able to deliver projects themselves and community workers who could provide the necessary support.

Get Cooking

Get Cooking is a practical cookery course aimed at improving basic cookery skills and increase awareness of healthy eating messages.

The course introduces participants to a variety of food types and cooking practices and which engages communities by using practical cookery activities such as soups, curries and 'smoothies'.

Contents: practical cookery skills, healthy eating messages and Get Cooking manual³

Length: six week course, and one-off demonstrations/taster sessions in communities

Target audience: community members

The Project has now progressed from the delivery of engagement and awareness raising events and now focuses more on supporting communities to develop local health initiatives, supporting partners to develop interventions for communities and 'training trainers' to deliver health related courses. Community members and community development workers working for a variety of organisations are now equipped to deliver courses and projects.

The evolving role of the HLN in local communities

A youth coordinator in Community C states that she used to describe one of the Team members as the 'smoothies guy', seeing him demonstrating Get Cooking at local events to engage with local people. She now views him differently as there are now staff and community members trained up to provide these type of demonstrations themselves (Community C).

³ The Get Cooking manual was developed by the HLN and includes the Food Standards Agency Get Cooking course guide and recipes. The manual gives a step-by-step session plan, recipes and tips for participants. Participants are allowed to keep the manual for future reference

Identifying local need, local forums and strategic links

The Team works with local partners, including Communities First partnerships, to identify local community needs and tailor new health improvement activities to meet that need. Some of this has been achieved through local forums, such as Health & Wellbeing Groups, that the Healthy Living Network has helped to set up and/or maintain. However, not all communities have chosen to have such groups and in some communities attendance has declined or the groups have become project/event/service-focused.

Strategic links are in place in most communities, the Healthy Living Network itself being described as the “face of the Local Health Board” in local communities, providing an essential link between the LHB and communities, and in facilitating contact for local communities with appropriate individuals, services and organisations as well as providing information about opportunities and essential health information that community workers would not be able to access otherwise.

The Healthy Living Network aims to create links to local and national strategies and has developed a key role in facilitating the implementation of these strategies at a community level. The original design of the Project outlined in the 2001 business plan incorporated six thematic programmes to address priority areas for action such as coronary heart disease, mental health and sexual health outlined in the Health Improvement Plan and Local Health Action Plan. Furthermore, the Network is helping to deliver aspects of the Community Plan and also assists with addressing priorities in other local strategic documents.

An important aspect of the work of the Healthy Living Network is assistance with the development, and delivery, of the new HSC&WB Strategy for Rhondda Cynon Taff (2008-2011)^{viii}. The team have been able to utilise their relationship with communities to facilitate consultation and engage partners with the delivery of actions within the plan.

The Healthy Living Network is described as a key element in delivering the strategic agenda of the Local Health Board, having a key position between the LHB and local communities. It appears that the Healthy Living Network is important as it provides the additional capacity and resources necessary to develop and deliver community health improvement projects. The team is able to spend the time necessary to engage local people, develop relationships and build capacity.

Community Hubs

Introduction: The Community Hubs Project is part of the Local Authority Partnership Agreement in Rhondda Cynon Taff, funded by the Sports Council for Wales. The remit of the project is to develop new, sustainable exercise opportunities based on the identified needs.

Method: The project involves 3 pilot areas based around the geographical catchment area of 3 Sport Centres in different parts of RCT. The HLN Team have worked closely with the Area Sport Centre Managers to facilitate the development of local steering groups who have taken a multi sectoral partnership approach to identify community need and utilise existing community venues to promote exercise.

Length: The project financially supports an initial 8 week taster course and works with partners to sustain to opportunities in the long term.

Target Audience: Community Membe

Building capacity for health – building skills, knowledge and confidence

Community and individual capacity building, namely supporting individuals, communities and organisations to develop the necessary awareness, knowledge, skills and confidence, is central to the design of all Healthy Living Network projects and is key to the sustainability of the activities initiated.

Building capacity in communities utilising health improving activities has been a time-consuming task. Engagement activities have been well-received in most communities, and this enabled the building of relationships. As relationships are now well-established in most communities the Team has been able to build capacity through training and projects. Courses such as Get Cooking and Sexual health training for example, have built knowledge, skills and confidence and hence community capacity for health.

Communities addressing sexual health needs

The Healthy Living Network has organised training for youth workers in Community C so they have the skills to administer the Condom Card Scheme. The need for training in sexual health for youth workers was recognised some years ago by this community. The Team took on the responsibility of organising the necessary training and provides youth workers with regular updates. Youth workers in Community C are now able to give basic advice to young people on sexual health matters as well as administering the Condom Card Scheme. (Community C)

There are examples of individuals in communities who can now deliver some activities and the ongoing support of the Healthy Living Network with the design, development and maintenance of projects has enabled some community workers and community members to gain sufficient confidence to develop projects themselves.

Increasing community confidence

“... if you look at the people we are working with now – the staff, the volunteers – how far they have come. It is all sort of linked in. It is all linked around the health and well-being agenda, and being active and being confident. Through doing one thing they (community members) have had confidence to go out and do other things. So we have people doing community activities – the Bonfire Night – the events that we do and how they get involved in that, so it’s given them (community members) confidence as well (as staff)” (development worker, Community B)

Child Safety

Child Safety is a practical course for new mothers, fathers and guardians. It aims to provide parents and guardians working with young children with the knowledge and skills to prevent and treat some childhood injuries in the home environment.

Contents: practical child safety tips, home safety starter, safety plug.

Length: 3 x 2 hour or one full day. 2 sessions are dedicated to paediatric first aid and the final two concentrates on safety in the home

Target Audience: new parents and guardians

Although the Healthy Living Network has built capacity in some communities it appears that there is still need for ongoing support for communities and to replace the skills of people who have moved on to education and employment, a view confirmed by community development workers working in local communities.

Motivating local communities and replenishing skills

"...I know they (the HLN) have been building capacity in communities... A lot of communities need a lot of support basically and if there is not someone there from the outside pushing that local champion within that community, and who may decide to move away or something folds. So you need someone there to motivate the community to carry on with the work until it is established. It is a very delicate balance in communities, and you can capacity build and train people but unless they are motivated to cascade what they have learned... then I don't see how it will survive" (LPHT staff member)

The approach of the Team

The approach with local communities taken by the Team is important, namely being welcoming, informal, open, approachable and meet people on their own terms, a prerequisite to engaging local communities, the building of trust and relationships^{ix}, to enable further activities to take place. The approach of the Team has been praised and complimented by local communities and representatives of a variety of organisations.

The approach of the HLN Team

"The Team brought with them an enthusiasm – they make healthy eating sound quite exciting, whereas before we would have thought 'no, that's such a difficult subject to get over to younger people, or older people when they are set in their ways'. But they (the Team) have come out and work really well together as a Team and we have not hesitated to have them in our youth groups and that can be quite scary for some individuals when they are working with youth... and the feedback from the young people has been really, really positive" (Community Development Unit manager, Community A)

A 'hands-on', non-threatening and enjoyable approach is taken with the delivery of courses and projects to communicate good practice and 'healthy' messages effectively thus enabling local people and communities to make life changes and take ownership of projects.

The approach compared very favourably with some other organisations with which those working in communities had previously had contact, namely having achieved success where others have failed.

Achieving success where others had failed

"They are a really good bunch of 'kids'... they are a very down to earth bunch of well-educated people but they have got a way that they can relate to the professional side of stuff, but they just go out there and they do things in communities. And that's the nub of this is to actually get in there and do things in places where others have not succeeded. They have a magic touch as far as I am concerned. They have succeeded where others have failed" (Partnership Board member, voluntary sector).

Working in partnership

The findings of the UK evaluation show that "the existence of a partnership, and the commitment of partners, can play a key role in the future of a Healthy Living Centre"^x. Healthy Living Centres which operated as partnerships or networks. Working in partnership with a variety of organisations and across sectors was built into the original design of the project, it was anticipated that this would lead to improved cooperation between agencies and improved understanding of each others' work. There are many examples of how the Network has worked in partnership on a number of levels.

The Partnership Board for the project is described as successful especially in terms of its operation, relationship building and organisational learning. Board members have increased their awareness and knowledge of each others' organisation as well as improving their understanding of the Healthy Living Network and its community development approach.

Members describe new relationships that have developed across sectors through their involvement with the Partnership, and some voluntary organisations have benefited directly from the provision of HLN activities in their own organisations.

The Network plays a facilitating role in many projects and service development. Examples include the development of the Depression Busting project with Maerdy Association of Self Help, sexual health training, supporting the Active Communities project, Patient Participation Groups and helping to establish Allotment schemes.

New relationships have also developed on a strategic level within the statutory health sector due to the positioning of the HLN within the Local Public Health Team based at the Local Health Board. Further opportunities to build relationships and to promote the work of the HLN were identified.

Example – promoting the HLN – quote

"They should be shouting from the rooftops what they are doing but they don't. I think we could really raise the profile" (LHB employee)

Impact on individuals and communities

Individuals and communities have benefited from the support of the Healthy Living Network in a variety of ways, experiencing psychological benefits, reducing isolation, making life changes, taking ownership of health activity and contributing to their local communities.

Social and psychological benefits

The majority of those in the study have experienced some broader benefits of taking part in activities developed or supported by the Network, for example walking groups have experienced psychological and social benefits by members sharing common interests as well as experiencing improvements in physical health by engaging in physical activity.

Much more than physical activity – reducing isolation

The walking group in Community G is described as a “family group” where members meet each week to “put the world to right”. One member of the group in sheltered accommodation did not go out before joining the walking group. This older man has especially benefited, not missing a week of the walking group and making new friends. He is planning to go out for Christmas lunch with the group. Two other older people had lived in the next street for many years but had met for the first time through the walking group. It is also reported that the wider community are aware of the walking group, and will make friendly comments as the group passes by on their weekly walk.

Taking ownership – “communities doing it for themselves”

There are a number of examples of communities, and individuals developing and delivering projects themselves having gained in knowledge, skills and confidence through the support of the Healthy Living Network.

A Mental Health Self-Help Project

A Communities First partnership identified a need for support for local people with severe mental health conditions. The Healthy Living Network, Journeys, the Communities First partnership and the Local Health Board worked together to design and develop an appropriate intervention which community members could be instrumental in delivering. The Network provided financial support for training courses for the community, and supported staff to complete a health needs assessment and raised their awareness of mental health issues (Community B).

Some Communities First partnerships and voluntary organisations have adapted and modified Healthy Living Network activities to meet local needs. Get Cooking has been especially useful in enabling Communities First partnerships and voluntary organisations make modifications to meet local needs.

Combining and adapting health activities to meet local needs

A voluntary organisation demonstrates the flexibility of the Get Cooking course, combining both Get Cooking and walking activities, and has introduced a distinctive American style to cookery demonstrations in local communities. The organisation is also planning two new Get Cooking related courses, as follows:

- Get Growing’ where people are encouraged to grow culinary herbs, and fruit and vegetables with links to local allotment projects
- ‘Get Cooking for Men’ which is called ‘breakfast for blokes’ and takes place at day-centres for older people

Furthermore, the HLN has influenced the provision of some services and projects, for example some communities having healthier refreshments at local events and in local venues, improved catering facilities and/or increased awareness about hygiene, changes that have been welcomed and praised by local people using the community projects.

Influencing local services and projects

The Project has been a contributory factor in changes made in the last twelve months to snacks provided to children at a local community centre in Community D. The organisation now provides fruit cocktails for children instead of confectionery and has made further changes to refreshments that the organisation provides when organising a community event, such as a barbecue, staff ensure that food is of a high standard and nutritious (Community D)

Making life changes

There are examples of individuals moving on to further Healthy Living Network courses and education, such as First Aid and food hygiene courses, gaining qualifications through educational courses and gaining paid employment.

Starting her own business

Following her training provided by the Network, a member of the community is now making plans for starting a catering business in the area where she lives, and describes her experience:

“The Healthy Living Network and the training they have provided me, has given me the confidence to not only cook and cook for my family and others, but to think about how I can use these new skills in work and I’m looking to start a business doing what I now know I do well”

The young mother has taken steps towards achieving this ambition and states that her experience with the Healthy Living Network has helped her to identify what she wanted out of life.

⁴Journeys (formerly the Depression Alliance Cymru) is the only organisation in Wales that offers support and understanding to people affected by depression, their friends, families and carers. The organisation provides guided self-help, information, practical resources, services and training for those affected and for employers to promote the development of skills and strategies to assist recovery (Journeys website, www.journeysonline.org.uk)

Contributing to the local community

There is evidence that health knowledge and skills are now being passed on to individuals, families and local communities by community workers and members, supporting individuals to make life changes. There are examples of community members becoming volunteers and paid employees providing health enhancing activities in their local communities.

Family bonding and helping others make life changes

One Get Cooking tutor has increased confidence sufficiently to help others make life changes. The mother of two teenage daughters makes suggestions for adapting meal recipes and menus to a friend who has a weight problem, referring to the Get Cooking manual for ideas. One of her daughters now cooks more, has more confidence to experiment with recipes and menus, and is now a voluntary worker. Get Cooking has also enabled the community member to bond with one of her daughters. Overall, she describes the experience of HLN courses as a "boost for the three of us".

Impact on organisations Health on the agenda

Health competes with other priorities of Communities First partnerships however through the support and resources of the Healthy Living Network, health appears to be a higher priority for the majority of Communities First partnerships and for some voluntary organisations.

Health a higher priority

"It has emphasised the importance of health as well – whilst working in a community 'health' should be a priority but sometimes it can come your 4th or 5th priority but it has definitely emphasised how important it is and the impact that we as a Community Development Unit can have on our community by promoting it in the right ways" (Manager of a Community Development Unit, Community A)

The majority of Communities First partnerships valued the support of the Healthy Living Network and were positive about the input they had received. Community Workers reported that they now have a better understanding of health in the broader sense as well as an increased awareness of their role in improving health.

An improved understanding of health

The health information and support provided by the network has raised awareness of 'health' and helped develop a better understanding of the holistic approach to health, namely not being simply about improving health services (Community C).

It appears, however, that some Communities First Partnerships have engaged with the project more than others. One Partnership, for example, had a particular focus on improving local health services and felt that the Healthy Living Network Project was unable to meet this need.

Effective community engagement and addressing need

Healthy Living Network activities have enhanced the programme of activities at local events, sporting events and courses and to projects provided by some community and voluntary organisations as well as complementing other activities, such as life skills and physical activity.

Enhancing the programme of activities

The programme of activities of two voluntary organisations especially has been enhanced by the project. A young mothers group at one community project has benefited from Get Cooking and other activities have developed, such as exercise projects with people aged 18-75 years and, with the assistance of Network funding, dancing sessions and soccer skills are now provided. The enjoyable and popular Get Cooking activity complements the physical activities that another voluntary organisation provides for young people.

The engagement activities provided by the Network have been enjoyable events where local people have been able to experience hands-on food preparation and food they may not have seen or tasted before. By utilising Healthy Living Network activities and approaches, community and voluntary organisations have been able to engage some population groups that they would not usually have contact with as well as being able to engage more effectively.

Community workers have also gained in knowledge, skills and confidence to enable them to identify and address health issues in communities, such as mental health and sexual health.

Communities identifying their own health needs

One Communities First partnership has experienced additional benefits for the organisation, and local communities, which includes development workers identifying the health and psychological needs of local communities whilst leading walks. The walking group also helped to address the depressive symptoms of some local people through their taking part in physical exercise and a social activity (Community D)

Organisational learning

One of the unintended consequences of the Project is that partnership organisations have an increased understanding of each other's organisation and built new relationships. Partner organisations have learned more about health in the broader sense as well as approaches to community health development. Positioning of the Healthy Living Network within statutory health services has increased awareness and understanding within these services about appropriate ways of working in local communities and they now have a clearer picture of local community needs.

Conclusion

A synopsis of the main findings of the evaluation is presented throughout this summary report. Some comments about the operation of the Healthy Living Network, the extent to which the Network has met its objectives, some lessons learned and recommendations are presented here.

The approach of the Network and its Team was considered to be one of the most important factors in the success of the Project. Individuals, communities and organisations were complimentary about the approach taken by the Team when working in local communities as well as their professionalism and for the flexibility and simplicity of some of the activities and courses, such as Get Cooking.

With reference to meeting the objectives, the targeted communities have engaged in a range of health enhancing activities, and capacity for health has been built in some local communities. Health issues are now a higher priority for some local communities.

There are examples where individuals have made life changes, community workers are more able and confident to identify and address local health issues and where individuals, communities and organisations have taken ownership of health improving activity.

Improving access to local services was one of the most difficult to achieve as bringing about change to many services may be out of the direct control of a project such as the Healthy Living Network. The Network has indirectly influenced the development and delivery of some new services, projects and strategy as well as meeting the strategic priorities of the Local Public Health Team and Local Health Board.

The extent of the achievements of the Healthy Living Network in local communities and community organisations appears to depend upon the degree of development of Communities First partnerships and community projects and the extent that community workers have embraced the Healthy Living Network and its activities. Furthermore, it appears that early contact with the Project may have shaped some communities' perception of the Healthy Living Network Project objectives, parameters and approach.



Lessons learned

A number of messages for any future Healthy Living Network Project emerged during the course of the evaluation, and are discussed throughout the full technical report. Some of the main lessons learned are summarised here, some of which centre around the length of time from submitting the original bid for funding to the Project commencing, namely aspects of communication and working in partnership.

Communication

The importance of ensuring that members of the partnership board had a clear understanding of the project as it evolved had been recognised and steps were taken to address this. Although the majority of members are now aware of the HLN objectives and its vision, most are still unsure of the role and responsibilities of Board members. Some voluntary organisations and key members of Local Health Board staff are still unaware of the Healthy Living Network and it would be advantageous for the future of the project, for its objectives, approach and achievements to be further promoted. Some community organisations appear to hold some misconceptions about the Healthy Living Network objectives, parameters of its work and its approach in communities.

Working in partnership

Although the benefits of working in partnership have been discussed in this summary report, there are some important messages for any future Healthy Living Network Project. The relationships that have developed within the health sector, and across sectors, need to be maintained and further developed.

Resources

There is evidence that some communities experienced difficulty accessing some resources to support the delivery of community health initiatives, such as transport, child care and financial resources to provide 'healthy' refreshments. This is especially important since some Communities First partnerships and voluntary organisations are experiencing a reduction in financial resources. Some communities experienced difficulties with inappropriate and inaccessible facilities in some local venues and with the storage and transport of Get Cooking equipment as well as difficulties attracting volunteers.

Recommendations

Communication

Recommendations are made for improvements in communication at all levels and a number of suggestions are made as follows:

- Team presentations to continue to communicate the work of the Healthy Living Network to partners
- To communicate the objectives, parameters, approach and activities to some local communities and organisations
- To promote the objectives, approach and achievements of the Project to key individuals and key organisations
- To communicate any messages from the Project to the appropriate departments and organisations

Future project

Recommendations are made that the Healthy Living Network Project should continue for a number of reasons and the Partnership Board and management need to consider which aspects of the project it plans to sustain.

Future model

It is suggested that a number of key features are retained for a future model, as summarised below:

- A Network model that continues to meet the specific needs of Rhondda Cynon Taff
- the community development approach currently used
- based with the Local Public Health Team
- the project continues to work in partnership with a range of organisations.



Resources

During the course of the evaluation local communities identified a number of local requirements for additional resources, as follows:

- Transport for walking groups, and to access courses held in other communities
- To continue to provide crèche facilities
- Business 'training' or resources and supplementary resources to accompany cookery courses.
- Small budgets for the provision of 'food' incentives and refreshments for those attending some activities, and community projects

Furthermore, a small number of Communities First partnerships reported difficulties with the transportation and storage of Get Cooking equipment and food produce.

Future partnership

There are also suggestions for any future Partnership Board, as follows:

- To consider the membership of the Partnership for any future Project
- To commence a programme for ensuring partners fully understand the Project from the outset
- To reconsider the role and responsibilities of the Partnership Board for any future Project

References

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