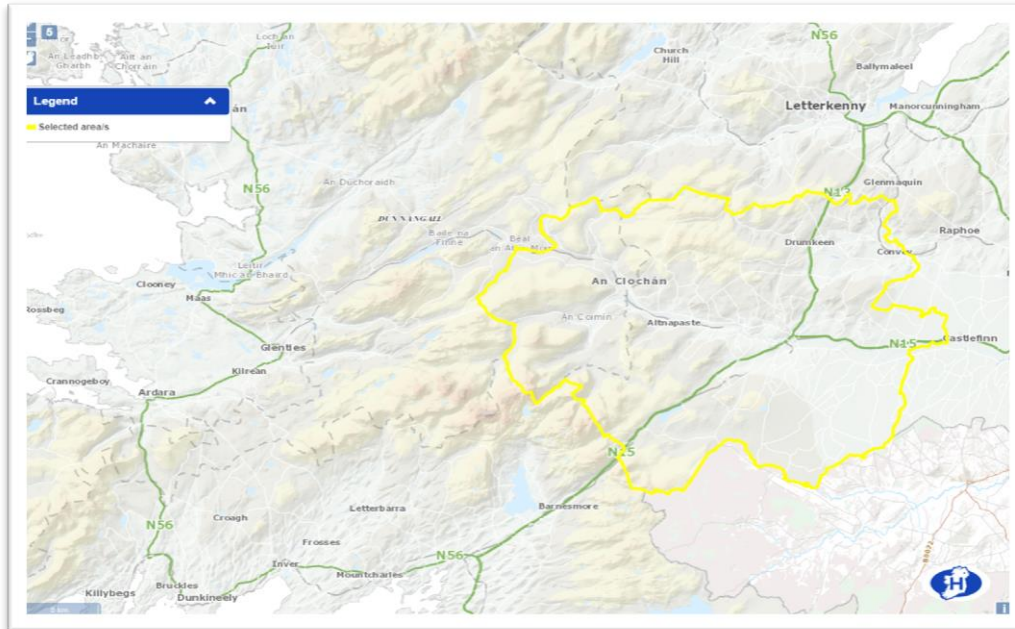


4.8 Finn Valley Primary Care Team Area Profile

The Finn Valley PCT is centred around the towns of Ballybofey and Stranorlar, located in the south east part of Donegal. The PCT borders Letterkenny PCT area to the north, Donegal PCT area to the south, the Dungloe PCT to the west and the Lifford/ Castlefin PCT to the east.

Figure. 1: Finn Valley PCT area



The Finn Valley Primary Care Team has been in place over 10 years and the Team meets bi-monthly. The PCT commitment and activity has been sporadic since its establishment, and while progress has often been slow and frustrating, the Team has stuck with the process. However, meetings have been increasingly cancelled it has been many months since a meeting has taken place. The process is supported by a HSE administrator and a HSE Facilitator.

The Finn Valley Community Health Forum was established in 2007 and is one of the more active groups, meeting every month. It has initiated a number of health and wellbeing related projects in the area over the last number of years, some in conjunction with the Primary Care Team and other community groups. They include:

- a Community Directory
- Mental Health Services Pathway (developed by the PCT)
- An annual Health and Wellbeing Event in association with the Finn Valley Centre
- A weaning project for expectant and new parents (in association with the PCT)
- A Community Needs Assessment Report (June 2011)
- Women and Men's Health Programmes
- A Community Gardens Project

2. Overview of Area¹

The Finn Valley Primary Care Team area encompasses both urban and rural features; the twin towns of Ballybofey and Stranorlar are central to the area and it is the third largest urban centre in the County after Letterkenny and Ballyshannon. The area also includes the more rural townlands of Drumkeen, Convoy, Cross-roads/ Killygordon and Glenfinn. The twin towns serve as the shopping centre, and the following services are available in the PCT area:

- 11 Primary Schools
- 3 secondary schools
- 1 libraries
- 1 Community Hospital in Stranorlar which provides short term (**respite, convalescence and rehabilitation**) and long term care. **In all, a total of 78 residents can be accommodated in three units (male unit, female unit, dementia specific unit).**
- 1 Primary Care Centre
- 1 Arts centre

There is no community centre, although there is an Enterprise Centre that provides space for local enterprise and community projects i.e. BASE, and a large leisure centre and athletics facilities (Finn Valley Athletic Centre). A Family Resource Centre will shortly be opening in the area (through Springboard). The area is well served by sports/ physical activity groups, youth projects, arts and theatre groups, carers groups, a Men's Shed, women's groups, a community garden, mental health groups, addiction support groups and senior citizen groups.

Inter-city and local bus services run through the town as it is on the main (the N15/ N14) transport corridor between the north and south of the County/country. The Local Link service also operates in the area running routes from Ballybofey to Derry (via Castlefin), Stranorlar to Derry (via Convoy) and Ballybofey/ Stranorlar to Letterkenny.

The Twin Towns of Ballybofey and Stranorlar have been identified as one of a number of 'Strategic Town' in the Donegal County Development Plan that performs 'Special Economic Functions' for the following reasons:

- Development Centre focussing on the towns as a Centre of Excellence for Sport and Recreation
- Educational Hub
- Proximity to Northern Ireland border and associated cross border context
- Extent of retail offering

These are the areas of potential that will be built upon over the next number of years and a Local Area Plan has been drafted for the Twin Towns to capitalise on that potential.

¹ The statistical data in the section is drawn primarily from the Area Profiles developed by the HSE Public Healthy Department using Census 2016 data and other relevant health data sources.

Population Structure

The population of the Finn Valley PCT area in 2016 was 14,631. The birth rate is declining the area with a 14% decrease since 2011. This is in line with the changes experienced at County level but well above the national figure of 7%. Much like the other PCT areas, there is a significant decrease in the 20 – 34 age group although not as severe as in other areas. The decrease in the 24 – 34 year old age bracket was 19% meaning that one in every five person of this age left the area between 2011 and 2016. This is a little lower than the county figure of 21%.

The numbers of people at the older end of the age spectrum has increased with an additional 325 people moving into the 65+ age bracket accounting for 15% of the total population in the area. This is a lower proportion than many other PCT areas. The biggest increase was in the 70 – 74 year olds (21%) and the 75 – 79 year olds (25%). This is in line with County, CHO 1 and national figures. There has been a small increase in the number of people over the age of 85 (237 people in the area). The majority of people in the older age groups (from 75 years onwards) are women.

In relation to the projected population in 2025, it is anticipated that the population will rise to 15,190 (an increase of 4%). These increases are evident in the older age bracket, as the 0 – 9 year old age bracket are predicted to decrease by 20% meaning that there will be 457 less young people in this age cohort by 2025. Increases are projected for the 20 – 29 age group and the over 50 age group. In fact, the cohorts that will experience the biggest increase is the 70+ population, where there will be a substantial increase in the number of people in the 75 – 79 age bracket (increasing by 53%). It is projected by 2025 that there will be 2,759 people in the over 65 age category which will represent 18% of the population.

Age Dependency

Reflecting the demographic shifts above, the age dependent population stands at 59% which is one of the lowest dependency ratios recorded across all of the PCTs (Letterkenny and Lifford/Castlefin being lower). It is also slightly lower than the County figure of 60% and higher than the national figure of 53%. The older dependent population figure is relatively low (23%) compared to other areas, and lower than the County figure, reflecting the proportion of the population that falls into the over 65 age category. The youth dependent population however is slightly higher (36%) than the County average (35%) reflecting the significant younger population in the Finn Valley area.

Nationality & Ethnicity

The vast majority of people identify as Irish (91%) with 3% of the population from the UK, 1% from Poland and the remaining 2.6% from elsewhere. There were 21 people from the Traveller community living in the Finn Valley area in 2016 which accounts for 0.1% of population, much lower than County (0.4%) or national (0.7%) figures.

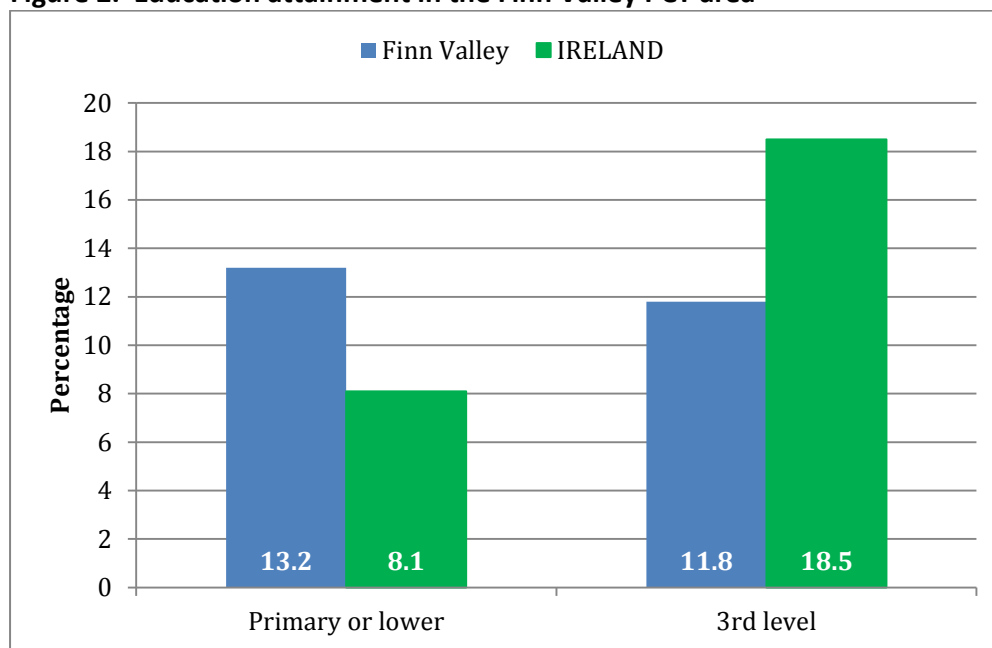
Socio-Economic Profile

The proportion of people falling into the semi-skilled and unskilled work categories stands at 17% in the Finn Valley area which is slightly above County (16.6%), CHO1 (16%) and national (14.1%) figures. At the other end of the spectrum, the proportion of the Finn Valley population falling into the 'Professional' work category stands at 5%, just slightly lower than County and national figures.

Educational Attainment

Educational attainment levels in the Finn Valley area have improved since 2011 with 13% of the population obtaining a primary education only. This compares favourably with attainment figures in other PCTs and is also slightly lower than the County figure of 13.4% but still much higher than the national figure of 8.1%. It appears however that trends are moving in the right direction and 12% of the population now has a third level qualification. Compared to other PCT areas, there is still some catching up to be done and it is also below the County figure (14%) and national figure of 18.5%.

Figure 2. Education attainment in the Finn Valley PCT area



Unemployment

The rate of unemployment in Finn Valley in 2016 stood at 7%, along similar trends seen at County level (7.3%) but still higher than the national figure of 5.6%. This rate has decreased significantly since 2011, but it is difficult to know whether the fall in unemployment is a result of job creation and opportunities in the area or the migration/ emigration of the working population or the increase in the number of people ageing into retirement or the number of people on labour market schemes (TUS/ CE) which takes them off the unemployment register. It is likely it is a combination of all these factors.

Occupations

The total number of people at work in the Finn Valley PCT area in 2016 was 2,854 accounting for 46% male and 54% female. The greatest numbers work in Professional Services, Commerce and Trade and Manufacturing (outside of the 'Other' category).

Industry	Total	Male	Female
Agriculture, Forestry, Fishing	266	234	32
Building & Construction	157	145	12
Manufacturing Industries	343	265	78
Commerce and Trade	561	287	274
Transport & Communication	142	112	30
Public Administration	159	75	84
Professional Services	640	132	508
Other	586	293	293

Family Structure

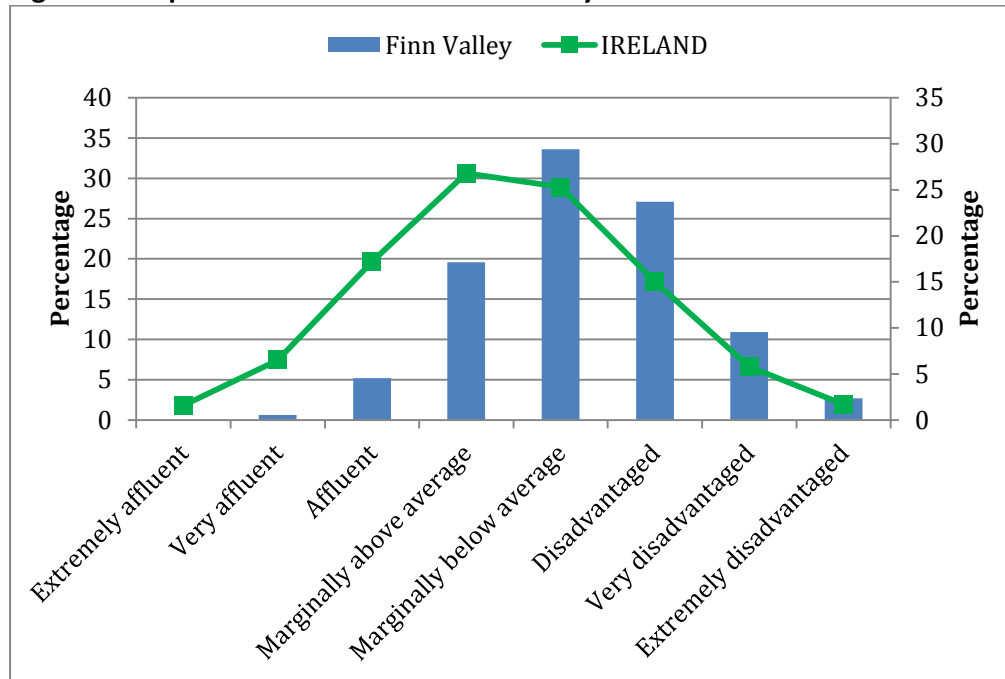
There were a total of 2,032 families in the Finn Valley area in 2016. A quarter of those (23%) fall into the 'empty nest', 'retired' family cycle category. There are significant number of families in the pre-adolescent, early-adolescent phase (25%) and 8% of the family population in pre-school which is similar to County and national figures.

Looking at the type of family units, 17% are one parent families with the majority of these being single mothers. This is in line with CHO 1 figures but slightly lower than County and national figures (18%).

Deprivation

Forty one percent (nearly one in every two people) are categorised as 'disadvantaged' in the Finn Valley Area (combining 'disadvantaged' 'very disadvantaged' and 'extremely disadvantaged'). This is higher than the figure for the County (38.6%) and nearly double the national figure (22.5%), One in ten of these people are 'very disadvantaged'.

Figure 3. Deprivation Levels in the Finn Valley PCT area



Health Indicators

Two hundred and eighty five people in the Finn Valley area rate their health as ‘bad’ or ‘very bad’ (2% of the population). This corresponds to County and CHO 1 figures and is higher than the national figure of 1.6%. The Finn Valley area records one of the highest proportion of people with disabilities (16% or 2,273 people), higher than the County (14.4%) and national figure (13.5%). It is one of the highest recorded across all the PCTs (Derrybeg/ Bunbeg, Derryveagh and Fintown & the Rosses record higher figures at between 17 – 18% of the population). The percentage of carers is also high at 5% or a total of 662 people in the area.

Connectivity

A particularly stark figure in this area profile is the proportion of people who do not own a car at 17%. This is the highest rate recorded across all PCT’s and is essentially nearly one in every 5 households having no access to their own transport. It is also higher than the County figure of 14% and the national figure of 15%. This has significant implications for transport provision in the area and access for people to services and supports. The proportion of the population who have broadband is 61% corresponding generally with County wide figures and one in five people do not have access to the internet.

4. Consultation Findings

This section presents the findings from the Focus Group meeting with the Community Health Forum members (11 participants). It was not possible to organise a consultation with the Primary Care Team so members were invited to give their thoughts via the online survey in which four people participated. It also incorporates relevant findings from a previous Needs Analysis carried out in the area in 2011, and although the information is rather dated, some of the issues identified during that research project are still valid today and will be referenced where relevant throughout the section. Finally, the consultations held as part of the Healthy

Donegal Community Engagement Process with the 5 Municipal Districts in the county are also included (the consultation with the Stranorlar MD the most relevant here).

It is important to note that this section directly reflects the views of the people who attended the focus groups, and has not been filtered in any way. Where possible fact checking has taken place, but there is the possibility that some feedback reflect personal viewpoints which may or may not be wholly accurate. However, people's perceptions reflect their own reality so if views are considered 'inaccurate' then this can be taken as a communication issue that needs to be addressed.

Access

The limited transport options is linked to issues of isolation. The Local Link focus is on getting to Letterkenny but there are rural areas around the PCT where people cannot get in or out to the urban centres. The MD consultation pointed to the problems community projects have with transport as they cannot get people into their service or they cannot get the service out to the people, particularly in the most isolated communities.

Services and Community Connectivity

There is an issue in the local area about a disconnection within the community and between community groups themselves. Outside of the CHF meetings, it is very difficult to find out what is going on. The reason for this is cited as a lack of community spirit e.g. landlords will increase rent if they hear that a 'funded community group' is looking for premises. There seems to be have been an increase in anti-social behaviour in the area with many people afraid in their own homes and this cannot be good for community engagement and connectivity.

Housing or the lack of it, also gives rise to concern and much like other PCT areas, people reported a shortage of social and private housing in the area. The perception was that the Council was 'picking names out of a hat' and allocating inappropriate accommodate to people and families. The lack of communication about the imminent arrival of the resettled Syrian families was criticized as it has the potential to create resentment as they will be prioritised for housing. This is something that could have been dealt with easily at the outset with proper communications to ease the transition for both the families and the local community.

There are gaps in community service provision which include:

- There is no Social Prescribing Programme, as no budget is available and there was no location for the Co-ordinator to be based. This will hopefully change when the FRC comes on board
- Planet Youth is a great service good but it has a small capacity and the only other youth group in the area is in Killygordon (4m from Stranorlar)
- There is no befriending service for older people in the area
- There are not enough non-accredited life skills courses available, everything course seems to be linked to labour activation

The volume of paper work, new rules and regulations is taking its toll on voluntary community groups who find it far too onerous with too much stress and pressure involved to apply for and then comply with grant conditions. It is one of the reasons people think it is so hard to get volunteers. People just want to do some good and give back to their community and they say

the state is making it really difficult and not supporting them in that objective. Accessing funding is getting more difficult resulting in competition between groups when they should be working together. Funders are now looking for impact assessments, but the impact of the work of many community groups is intangible and hard to measure, yet the evidence points to the fact that an active well connected and engaged community is more positive for health and wellbeing.

Economy and Disadvantage

Issue was taken with the 2016 unemployment rate and, much like in other areas, participants felt that the numbers were massaged through labour market schemes so they would look more favourable. Account is not taken in these figures of the loss of young working population from the area.

The 20 – 30 year old age group who have not moved away and don't have a job see little future for themselves with fewer opportunities. This has a significant impact on their mental health and self-esteem and is potentially storing up problems for the future. The abolition of apprenticeships during the recession did not help the situation and now it is like there is a lost generation with minimal employment and career opportunities.

Farmers are also a concern (35 – 40 age group). Farming is a very difficult, challenging and not very profitable job, and farmers are often isolated and have many pressures. Recently efforts have been made to link with this group through the Mart in order to raise awareness of health prevention and screening services and supports. There are further plans to link again around mental health issues.

Health Services

Issues related to Health Services include:

- There was concern about the continuing reduction of GPs and a worry that there will be a shortage in the future
- The threat of closure of St. Joseph's Community Hospital hangs over the area and the number of beds was reduced by 10 in 2017. The population is ageing and there appears to be no future planning to address this demographic change
- There are waiting lists for places in the Day Centre
- It is difficult to get the required equipment for people with physical and sensory conditions, and the issue of access to buildings and information for this group is also a concern. It is reported that some people with disabilities are resorting to sleeping on their sofa as they can't upstairs to their bed, while they are waiting to get their houses adapted
- People with fibromyalgia and arthritis have the same issues in relation to access, equipment and transport
- There is a need to strengthen community health via a functioning Primary Care Team (this arose at the MD discussion), linking community supports and clinicians to plan local supports that are needed (a 1 hour lunch time meeting is not adequate to do this)
- There is the need for county wide support and co-ordination of community health and wellbeing interventions, training, ideas and methods
- The waiting lists for Physiotherapy are too long
- Many people are unaware of the health supports and services available to them
- More supports for obese people are required

The issue of homecare was raised as in all other PCTs. It was felt that it was a long bureaucratic process and people are stuck in hospital waiting to be discharged (unfairly labelled 'bed blockers'), as the support needed for them to go home is not there. Communication between client, the service and the family is poor and the time allocated is too little. The Home Help barely has enough time for each client and no time for any social interaction which, if factored in, could have a significant positive impact on mental health and isolation issues facing many people. It makes no economic sense as home help costs are low compared to the cost of residential care. More needs to be done to support people in their homes e.g. Meals on Wheels, Befriending services, phone contact service, activity groups etc.

Mental Health

As in other PCT areas, the long waiting list for CAHMS was raised. There is a local 'Listening Ear' service in the community but it is not enough and it gets many more requests than it can manage. There is no access to mental health information or supports after 5pm and people are told to go to the ED at Letterkenny University Hospital if they need assistance, which is not the right place for someone in a mental health crisis. The MD consultation anecdotally reported high suicide and self-harm rates in the area.

Children and young people are more stressed than they used to be as a result of exam pressure, social media, body image, sexual health and orientation. Younger children are also exhibiting signs of anxiety, and where there is substance misuse issues in the family, this can exacerbate the issue.

Participants working with older men reported that they had 'never seen so many men with depression'. The men are hesitant to go to the GP and prefer to come to the Men's Shed instead, where leaders do not have the capacity to deal with their issues.

Healthy Ireland Priorities

Physical Activity. There are no green areas in the area for outdoor/leisure activities; no town park, only 1 small playground and no cycle paths. It is vital to have and maintain accessible, low cost family facilities that positively impact on health and wellbeing such as parks, cycle tracks, walking routes and park runs.

Substance misuse. Substance misuse and addiction is seen as a real issue and was also identified in the 2011 Needs Assessment. There are no HSE addiction services in the area (the closest is Letterkenny) and yet the supply of drugs and alcohol is increasing.

Vulnerable Groups

A number of groups were singled out for special attention as being more vulnerable and at greater risk of health inequalities:

- Younger people with mental health problems
- 20 – 30 age group of long term unemployed people
- LGBTI+ young people
- Carers and young carers

- Young lone mothers
- Farmers
- People with substance misuse and addiction issues

Positives identified in the Finn Valley area

- The new FRC will be a hub to help to link people and community groups and be a platform for securing additional services in the community
- The Friday Club (over 55 years) is good and does not struggle for volunteers. This is a very active group
- The Ballybofey and Stranorlar Women's Group is very active with more than 65 members

4. Recommendations from Finn Valley Consultation

Mental Health

- Reduce CAMHS waiting lists
- Improve 24 hour access to Mental Health services for emergency cases (not through the ED)

Primary Care Team

- Invest in the Primary Care Team so that proactive planning can take place linking community supports and clinicians so they can combine their knowledge, skills and resources to address the needs of the local population

Clinical Services

- Reduce waiting lists for Physiotherapy

Community Health Initiatives

- Implement a Social Prescribing Programme in the area (linked to the new FRC)
- Ensure mPower (Social Prescribing for older people) is implemented in the area and linked to Long Term conditions, and to the CHF
- County wide support is needed for the support and co-ordination of community health and wellbeing interventions e.g. skills, training, projects

Community Hospital

- Keep St. Joseph's Community Hospital open and adequately funded to meet local need.
- Provide sufficient spaces at the Day Centre(s)

Home Care

- Undertake a review of homecare in the area to improve the service to meet identified needs

Access

- Review current transport provision in the area and see what can be provided, not just along main route to Letterkenny but other rural routes, and explore other creative options around rural transport such as volunteer driving etc.

Physical Activity

- Ensure the Health and Wellbeing goals in the Local Economic and Community Plan (LECP) include outdoor amenities planned for the Finn Valley area capitalising on the natural resources and ensuring they are accessible and affordable for people
- Ensure health promotion messages and supports offered through health and wellbeing services are linked into local mart and other farmer information meeting points

Positive Mental Health

- Provide training to Men's Shed managers to have the capacity to support men and/or provide them with information on where to access help/services for anxiety and depression
- Set up a Men's Walk and Talk Group
- Ensure the resettled Syrian families are given the support they need and a proper communications mechanism is put in place to bring the communities together around this. The Syrian Resettlement Worker should link in with CHF around the arrival and support to the new families coming to the area

Community Connectivity

- Provide more affordable and accessible activities for young people in the area (the leisure centre is expensive) that are not just focused on sport
- Work with the Donegal Education and Training Board to see if they can offer more life skills learning opportunities
- While labour market schemes are beneficial to the local community, what is needed is support for small and local indigenous businesses so that permanent jobs can be sustainably created
- Review the barriers to volunteering with a view to addressing these in order to encourage more people to become involved and connected with their community
- Provide a local Community Welfare Support Worker and local career guidance supports

Positive Ageing

- Set up a befriending service for older people in the area

Healthy Eating

- Provide improved local supports for people who are obese