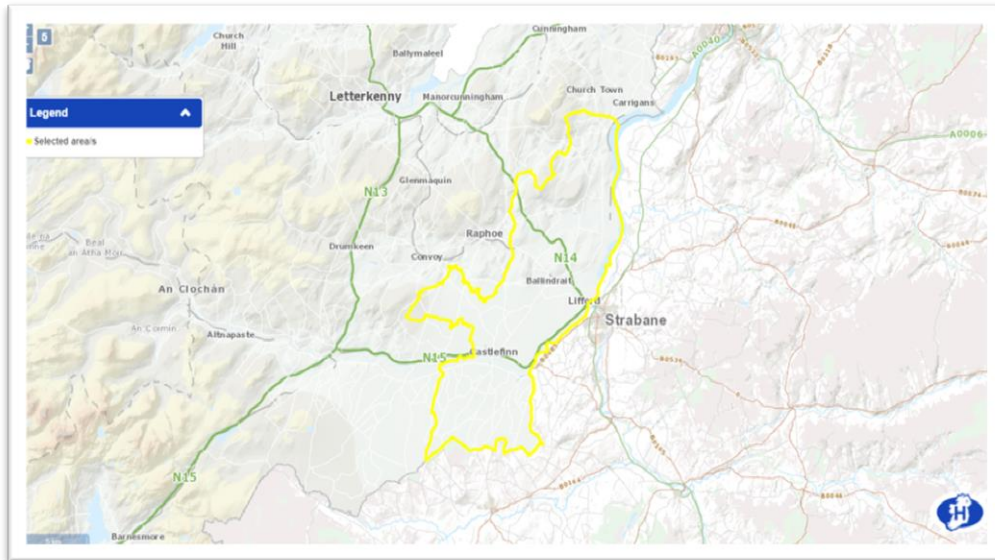


4.10 Lifford / Castlefin Primary Care Team Area Profile

1. Background

Lifford/ Castlefin PCT area is located on the eastern side of the County stretching along the Northern Ireland border. It runs from Carrigans in the north and beyond Castlefin in the south. It is bordering the Finn Valley PCT to the West and Lagan PCT to the north west.

Figure. 1: Lifford/ Castlefin PCT area



The Lifford/ Castlefin Primary Care Team has been in existence since 2003 and meets monthly. It has HSE administration support and an HSE Facilitator. Lifford/ Castlefin was one of the first areas in the country to pilot a new approach to community participation in the proposed new Primary Care Teams (10 Teams in total were established on a pilot basis in early 2000s). It was a partnership project between the Lifford/ Clonleagh Resource Centre and the North Western Health Board and funded through the Combat Poverty Agency's 'Building Healthy Communities Programme' in 2003 and 2004. Hence, the first Community Health Forum was established in Lifford/ Castlefin Primary Care Team area in 2004, and the others around the County grew out of this approach. The CHF is still operating in the area.

A number of projects have been undertaken by the CHF and PCT over the years:

- Carers Support Programmes
- Doneyloop Youth Club
- Castlefinn Parent and Toddler group
- Castlefinn 50 plus group
- Social Prescribing Project
- Lifford and Castlefinn Men's Sheds Projects
- Various Joint initiatives with the PCT

2. Overview of Area¹

Lifford/ Castlefin Primary Care Team area is one of the few areas of the County that does not touch the coast and is landlocked sharing a border to the east with the counties of Northern Ireland. It includes the towns of Lifford which is the County town of Donegal (linked to its close neighbour Strabane in the north via a bridge over the River Foyle). Castlefin is a smaller town located along the main N15 national primary road which runs from Bundoran to Lifford and it lies 6 miles from Lifford and 8 miles from Ballybofey and Stranorlar.

Services in the area include:

- 6 primary schools (no post primary school in the area)
- 1 library
- 1 day centre
- 2 Health Centres
- 4 Public Health Nurses
- 1 Council Public Services Centre
- 1 Social Prescribing Programme
- 2 Resource/Community Centres
- 1 Community Hospital

There is a Community Resource Centre in Lifford (Lifford-Clonleigh Resource Centre) which offers a broad range of community activities, supports and services. The PCT Social Prescribing Co-ordinator is based in the building and there is Good Morning Service and a Childcare Centre in addition to facilitating local community groups.

Castlefin has a large Community Resource complex established by local community and voluntary organisation, the Castlefin Partnership Initiative (CPI Ltd.). The facilities at the centre include a health centre, childcare facilities, enterprise units, and indoor and outdoor sports facilities.

Both areas are well served by sports/ physical activity groups, youth projects, arts and theatre groups, carers groups, a Men's Shed, womens groups, a community garden, mental health groups, addiction support groups and senior citizen groups.

Transport routes in the County have to take account of the border; on the Donegal side, Bus Eireann runs expressway services to Dublin and Galway; a number of other private operators run bus services to Letterkenny and other areas; the Local Link Inter-city and local bus services run through the town (bus station) as it is on the main (the N15/ N14) transport corridor between the north and south. The Local Link service also operates in the area with routes between Letterkenny and Derry, and Strabane/Lifford to Letterkenny going through the area. The City of Derry airport is less than an hour away by car.

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

Population Structure

The total population of the Lifford/ Castlefin PCT area was 7,832 in 2016 and the breakdown shows a relatively young population with one in five (or 21%) under the age of 14 in line with County and national averages. At the other end of the spectrum, 15% of the population were aged 65 and over which is lower than some of the other PCT in the area and lower than the County average (16%).

The area experienced significant population decline in the 0-4 year age group, falling by 27% which is one of the highest birth rate declines among all the PCTs (185 children). This is much higher than the decline experienced at County level (10%) and nearly four times the national average (7%). Significant declines were also experienced at the 20 – 39 age category indicating a loss of a young working population, the greatest decline being in the 25 – 29 age category at 23%. This is slightly higher than the County and national average (21% and 18% respectively) but the equivalent of CHO 1 figures.

At the other end of the age spectrum, the numbers are increasing with particular increases in the numbers of people falling into the 70+ age category. There was a 30% increase in the 75 – 79 year olds alone and in total, there were 1,123 people over the age of 70 in the Lifford/ Castlefin PCT area (accounting for 14% of the population) and 107 people over the age of 85 with most of these being women. These increases are much higher than what is seen at County or CHO 1 level.

Looking at the population projections for 2025, it is anticipated that the population will increase by 5% to 8,185. Much of the increases will be seen at the older end of the spectrum where the number of 85 years old is set to nearly double over the next ten years (increasing by 76% to a total of 188 people). Steep increases are also expected in the other older age categories which will result in a population of 1,485 people in ten years time or 18% of the population.

It is also projected that there will be increases in the 15 – 29 age category although these will be more modest. The under 14 age group will continue to decline with the greatest shift in the 5-9 year olds which is projected will decrease by 20%. By 2025, it is projected that there will be 1,498 children in the 0 – 14 age category accounting for 18% of the population.

Age Dependency

The age dependency rate is relatively low at 56% compared to other PCT areas reflecting the demographics above, and is lower than the County average (60%) but higher the national average (53%). In fact, the age dependency rate in Lifford/ Castlefin is one of the lowest among all the PCTs (outside Letterkenny) reflecting the greater proportion of a younger population and a smaller proportion of older people as a percentage of the people of working age in the area.

Nationality & Ethnicity

The numbers of people from other nationalities in the Lifford/ Castlefin area is relatively small compared to other PCT areas; 94% of people identify as Irish, 2% as being from the UK and a handful of people (67) from other countries.

There were 14 people from the Traveller Community living in Lifford/ Castlefin PCT in 2016 which accounts for 0.2% of the population, which is than County or national figures.

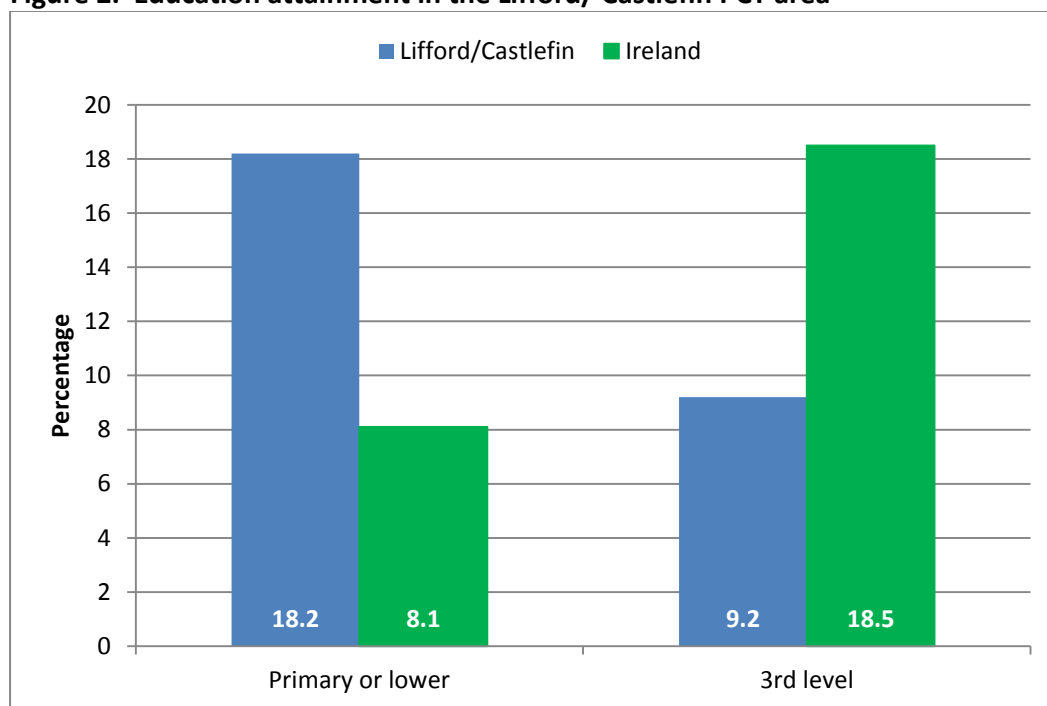
Socio-Economic Profile

One in every five people (20%) in the area falls into either the 'semi-skilled' or 'unskilled' work category. This is one of the highest proportions across all PCT areas (outside of Killybegs). It is also higher than the County figure of 16.6% and the national figure of 14%. Conversely, the proportion of the population falling into the professional category is low compared to other areas at 4% (County figure is 5.6% and national figure is 8.1%).

Educational Attainment

The percentage of the population educated to primary level only is also relatively high compared to other areas at 18% and may account for the high proportion of unskilled/ semi-skilled workers in the area. This is the lowest educational attainment level out of all the PCTs and higher than the County figure where 13.4% have a primary education only, and nearly double the national figure of 8.1%. One in ten people (9%) have a third level qualification which is again the lowest level of attainment when compared to the other PCTs in Donegal, lower than the County attainment level of 14% and the national attainment level of 18.5%.

Figure 2. Education attainment in the Lifford/ Castlefin PCT area



Unemployment

The unemployment rate in Lifford/ Castlefin stands at 10%, the second highest rate recorded across all PCTs (Derrybeg/ Bunbeg being the highest at 11%). It is also higher than the County (7.3%) and national (5.6%) figures. 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 along with an increase in the

number of people ageing into retirement and the number of people on Government (DSP) schemes that remove people from the live unemployment register.

Occupations

The total number of people at work in the Lifford-Castlefin PCT area in 2016 was 1,706 accounting for 55% male and 45% female. The greatest numbers work in Professional Services, Commerce and Trade and Agriculture, Forestry and Fishing (outside of the 'Other' category).

| Industry | Total | Male | Female |
|--------------------------------|-------|------|--------|
| Agriculture, Forestry, Fishing | 217 | 207 | * |
| Building & Construction | 120 | 114 | * |
| Manufacturing Industries | 193 | 132 | 61 |
| Commerce and Trade | 316 | 160 | 156 |
| Transport & Communication | 68 | 52 | 16 |
| Public Administration | 100 | 45 | 55 |
| Professional Services | 399 | 82 | 317 |
| Other | 293 | 150 | 143 |

Note: * As the number of women working in Building & Construction and in Agriculture, Fishing & Forestry in the Lifford-Castlefin PCT area is 10 or less, this has not been reported above to protect privacy and confidentiality.

Family Structure

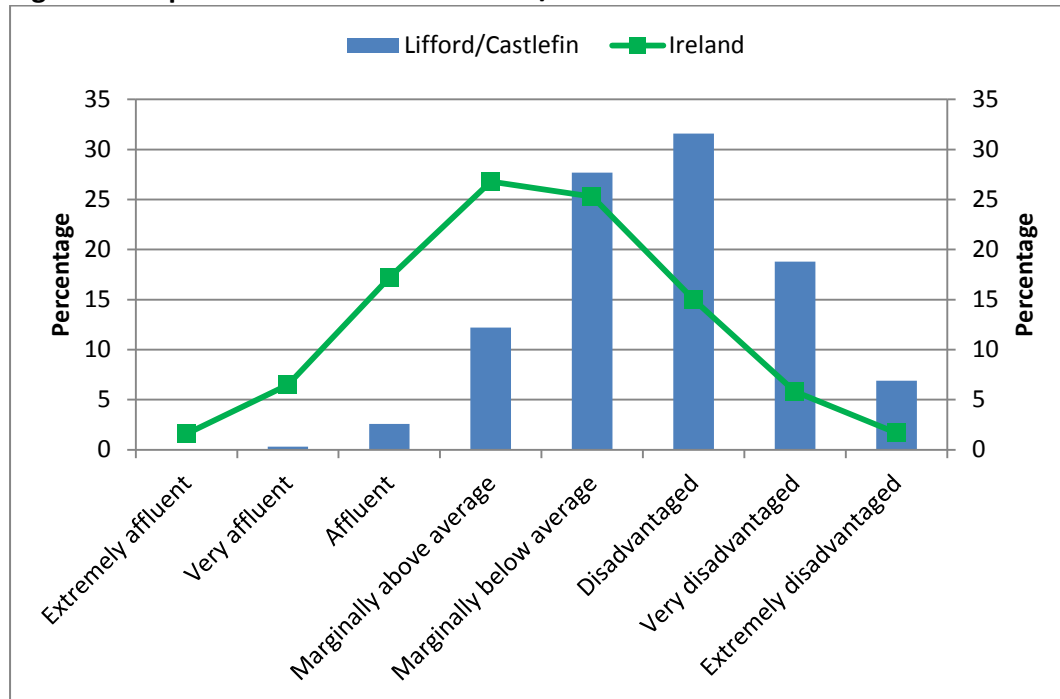
There are 1,021 families with children in the Lifford/ Castlefin area. A quarter of them (24%) are 'empty nesters' or 'retired' and 29% of them have children in the primary or secondary education system with a further 8% at pre-school.

Looking at the type of family unit, 14% are one parent families which is one of the lower rates when compared with other PCT areas and lower than the County and national figure of 18%.

Deprivation

Deprivation data is informed by a number of key variables, including educational attainment, unemployment rates and socio-economic grouping. Given the data presented above, it is no surprise to see that Lifford/ Castlefin records one of the highest deprivation rates across all PCT's with 57% of the population considered either disadvantaged (31.6%), very disadvantaged (18.8%) or extremely disadvantaged (6.9%). This is essentially one in every two persons living in the area. It is much higher than the County average of 38.6% and twice as high as the national rate of 22.5%.

Figure 3. Deprivation Levels in the Lifford/ Castlefin PCT area



Health Indicators

One hundred and seventy one people (2% of the population) rate their health as ‘bad’ or ‘very bad’ in the area. This is in line with County and CHO 1 trends but higher than the national average. The disability rate is 15% (accounting for 1,156 people) which is higher than the County figure (14.4%) and the national figure (13.5%). The number of carers in the area number 306 accounting for 4% of the population which is in line with County and national averages.

Connectivity

Access to transport, as in all other PCT areas, is essential for connecting to services and supports and essential to a person’s health and wellbeing. A total of 9% of the population (134) do not own a car in the area which is lower than the County (14%) and national (15%) figure. The percentage of the population with access to broadband in the area is relatively lower than other PCT areas coming in at 58% and a further one in four (or 27%) do not have access to the internet.

3. Consultation Findings

Overview

This section presents the findings arising from two consultation meetings held in the area; one with the Primary Care Team members (7 participants) and one with the Community Health Forum members (7 participants). It also incorporates findings of the Healthy Donegal Community Engagement process where meetings were held across the 5 Municipal Districts (MD of Stranorlar the most relevant here) on health and wellbeing issues.

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

Transport. The public transport options are very limited and connectivity is poor between services to and from Letterkenny. Access to transport is very important for the engagement of the community in terms of access to facilities, appointments and activities. The Local Link service does operate in the area but the routes are limited; Ballybofey via Letterkenny to Derry, and Strabane – Lifford – Letterkenny. It doesn't access routes in the rural areas to bring people into the urban centres.

One of the central problems lies in timing and connectedness. As a result it is difficult to get to either Dublin or Galway. In relation to access to local services such as the Day Centre, in some cases the bus will arrive before the Home Help appointment so people are not out of bed, washed and ready to go.

If someone has to go to the hospital in Letterkenny for an appointment, the bus stops in the town and it is a difficult uphill walk to the hospital. It is approximately €60 return to Letterkenny in a taxi, and many people have to plan for this cost and may have to go without other necessities. Getting to the local Day Centre is difficult for some and many people are reliant on family or taxis for this journey.

There are few accessible spaces for young people with disabilities in the area, and they have to travel to Letterkenny or Donegal Town to engage with activities. For anyone with disabilities or mobility problems getting out and about is difficult because the footpaths either don't exist or are in a poor state of repair. It is not safe to walk especially if pushing a buggy or minding children. There is too much traffic to safely walk to school. All of these factors mean people remain stuck in their house or using the car all the time, and this has an impact on mental health and wellbeing generally.

Services and Community Connectivity

The Social Prescribing Programme is a great asset to the area, but the coordinator is not able to make home visits which limits the scope, breadth and potential impact of the service.

Children are not encouraged to take risks, and this is linked to lack of resilience and coping skills and increased anxiety levels. There is also an overuse of screens and social media among young people. Very young children are allowed to access unsuitable apps/online material. This restricts their time for natural play, part and parcel of which is taking risks and this is what builds resilience and coping skills.

There is a gap in facilities and activities for the under 14 age group. If a child does not enjoy sport, options are limited. Lifford is the 'poor relation' compared to Strabane in terms of facilities, where there an affordable gym and leisure centre. Concerns were expressed about the impact of Brexit and how this will affect access to these facilities.

There is no Family Resource Centre in the area. The Lifford-Clonleigh resource centre (a Community Development Project) is excellent but it receives no state funding, and its sustainability is at risk as it is getting harder to generate income and reserves are being used up.

The lack of Community Welfare Support with local understanding and knowledge of the issues facing local people is having an impact on people accessing appropriate information, and people are not necessarily aware of the services that are available to them locally.

It is difficult to get people involved in community activities and it is usually the same people volunteering all the time. Related to this is the issue that volunteering has become so 'over-regulated' and people risk losing their social welfare benefits if they volunteer as they are 'not available for work'.

Health Services

Homecare. This is a big issue in the area. It is difficult to access this service, with waiting times of up to 5 months. The Public Health Nurses have to continually justify their applications and feel there should be more trust in their professional judgement. The timing of the visits is too limited, they are often not long enough and there is no social element anymore, which is as important to older people to reduce the risk of loneliness and isolation. In the absence of/low level of home care support the responsibility of care for the older person falls on the family, but this is not always possible with people leaving the area or trying to juggle their own young families. The caring responsibilities can become too much.

Primary Care Team. There is a lack of interest from HSE management in making the Primary Care Teams work as envisaged. It has got steadily worse over the years and an over-reliance on the community sector to deliver services and projects is the norm. There is the feeling that the sector is taken for granted with no parity of esteem.

Waiting Lists:

- Speech and language waiting lists are too long with people often having to go to Letterkenny for an appointment (see transport issue above).
- There is a 2 year waiting list for the Psychology service
- Mental Health Services waiting times (both CAMHS and AMHS) are too long
- Bereavement counselling waiting lists are too long

Day Care for Older People. The Hapentag Centre is a Daycare Unit for older people and people and people with physical disabilities. When it was open it provided a very good service, but the HSE moved staff from this centre back to Lifford Community Hospital three years ago. The HSE response to questions about reopening the centre are met with the reply that there 'are no staff to manage the service' The Daycare space at the community hospital is not fit for purpose; it is very small, unwelcoming and with no low windows (it used to be the morgue). Consequently attendance numbers have fallen.

Other issues that arose during the consultations include:

- The difficulty some families have with just coping with day to day tasks. The GP reported increased requests for valium to get people through events such as communions and weddings

- There are too many pilot projects that are never mainstreamed even if they are very good and get positive evaluations
- GPs are seeing a high rate of applications for DSP disability support
- The Primary Care Social Worker role has gone from the area. There used to be two in the area but the Community Social Work role was subsumed into the HSE in 2014 and now there is nothing at a local level
- There used to be an adolescent Health Nurse but this role just disappeared after 6 months. The PCT tried to find out what had happened to the role but did not receive a response from the HSE
- To be eligible to receive early intervention supports for children, you have to be in receipt of 5 different services; SLT, OT, Physio, Psychology and Dietician. This access threshold is far too high and means many families who need support are not able to get it

Economy and Disadvantage

The unemployment rate, while higher than other PCT areas, does not reflect the true picture. People are moving away for jobs and this in itself has an impact on the family and community. Some are going back to education, others are on labour market schemes which is not reflected in the figures. There is no sense that there are any new jobs or job opportunities in the area. Long term unemployment in families is a real issue and impacts on mental health with some people now referring to benefits as their 'wages'.

Mental Health

- Long waiting lists for primary and secondary mental health services (as above)
- Lack of local mental health services, especially counselling. Counselling in Primary Care service has a 4 month waiting list and people cannot afford to go privately
- Lack of services for younger people e.g. Jigsaw, with no local Outreach service

Healthy Ireland Priorities

Physical Activity:

- More green spaces and affordable exercise/leisure opportunities are needed.
- The Riverine Project (a Lifford/Strabane Cross Border SEUPB Project) aims to create a local river park. It fell at the last funding hurdle but the Lifford Clonleigh Resource Centre are appealing the decision.

Substance Abuse:

- Drugs are too easily accessible and there is a strong link with Mental Health problems and substance misuse

Vulnerable Groups

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

- Carers in terms of lack of respite and risk of isolation

- People who misuse drugs/alcohol. This has a significant impact on their life, life of family and on mental health
- Young families. There are minimal local parks or open spaces to explore and run free and meet other children and families (Drumbo Woods is very good but it is a 20 min drive away)
- Young people with disabilities, both ID and Physical. Families can be over-protective and the young people are not given the opportunity to reach their potential. This is linked to lack of services and supports, and parents don't feel confident to let their children 'fly'.

Positives identified in Lifford/ Castlefin

- The Alzheimer's Café works well (operates on a monthly basis)
- The Good Morning Service is very good
- The Befriending service works well. It has now been taken over nationally by ALONE (Good Morning Donegal and local befriending service subsumed into this) and local input is not being encouraged
- It is good to have Strabane nearby where local facilities are much more affordable. However, there is concern over how this will be changed by Brexit
- The Lifford-Clonleigh Resource Centre linked in to a PEACE IV funded cross-border 4-year youth project for 14 – 25 age group which has been very positive.
- The Castlefin Monday Club for Older People (over the age of 60) is great and offers a broad range of activities
- The Social Prescribing Programme is very positive, but more effort is required to engage GPs with the service
- The Castlefin Group for older people is very active and provides a great service with activities and regular outings

4. Recommendations from the Lifford/ Castlefin Consultations

Review and improve approach to Home Care packages:

- This is particularly important given the ageing population; this service needs to be resourced properly. Also there is a need to look at attracting more men into the service (the Home Help role), and emphasis should also be placed on social care as well as personal care.

Look at Sustainability of Hospital and local health facilities:

- Make better use of the Hapentag Centre and review the adequacy of the Lifford Community Hospital (LCH) Day Centre
- Increase the number of respite beds at LCH
- Provide clarity on LCH as its future has been 'in discussion' for the past 9 years

Waiting Times:

- Enable the Community Physiotherapist to make Home Visits as this will help reduce waiting lists
- Look at ways to reduce bereavement counselling waiting lists
- Resource the children's early intervention service properly so that waiting lists can be reduced and look at the criteria for accessing this service

Invest in Primary Care Administration Supports:

- Establish an electronic system where Primary Care (PC) staff can write up contemporaneous notes that all PC staff can see and the persons history can be accessed in one electronic place. This would save time and errors
- Invest in PCN/PCT structures as this is supposed to be national policy, and make it work
- Consider the idea of patient held records (taking into account new data protection regulations)
- Provide guidance on GDPR requirements for PC staff and C&V groups

Primary Care Services:

- Provide a community social work role in the area
- Provide local speech and language therapy service

Mental Health

- Look at ways of reducing Mental Health waiting lists in Psychology, Children and Adult Mental Health Service

Access:

- Improve public transport connectivity to make travel within and beyond the County more accessible
- Improve transport in the area including provision of wheelchair accessible taxis
- Work to ensure that the secondary services in Dublin and Galway make appointments for Donegal in the mid-morning/ afternoon to allow people to arrive on the same day rather than incurring additional costs of an overnight stay

Physical Activity:

- Support the Riverine Project (Donegal County Council DCC) and improve outdoor spaces in the area (DCC) as it is vital to have and maintain low cost family facilities such as parks, walks, cycles that positively impact on health and wellbeing

Community Health and Wellbeing Supports:

- Reinstate the Community Welfare role back into the local community
- Raise awareness of local supports and services and how to access them (HSE and community)
- Explore if and how Social Prescribing Coordinators can make Home Visits to access people who really need the support and service, and look at how GPs can have greater engagement in the service
- Resurrect the Carers Support Group and provide support/respite so the carers can attend
- Offer structured support/activities for < 14 age group
- Make volunteering more accessible to support improved mental health, removing the current barrier in the form of impact on welfare payments
- Provide a Community Support Worker in the Castlefin area
- Improve supports for young people with disabilities

Positive Ageing:

- Ensure ALONE works with a local advisory group when they take over the Good Morning and Befriending services

Positive Mental Health:

- Provide parental guidance and support on internet safety and age appropriateness of apps
- Reduce Jigsaw waiting listing, extend the age group from 12 – 25 and improve outreach supports. Money needs to be invested in the service to make it fit for purpose.