

White City Neighbourhood Budget Pilot Project

Produced for

London Borough of Hammersmith and Fulham

Prepared by

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Section 1: Conclusions and Recommendations

1.1 Survey highlights

Social capital

- ❖ 68% of Opportunity Area residents agree the community pulls together to improve the neighbourhood.
- ❖ 84% of residents feel it is important to personally influence decisions affecting the area.
 - The Black and Asian communities agree more strongly than others; the White community is most cynical about the existence of local community spirit.
- ❖ Whilst 45% of residents feel their local area has improved in the last two years, older residents appear more negative in their views; 23% of those 55 and over suggest the area has got worse.
- ❖ As identified in previous studies, the lack of integration across ethnic groups indicates a strong local 'tribal' structure within and across the White City Estate.

Satisfaction with local services

- ❖ Seven in ten residents claim to be satisfied with local services. Just one fifth are very satisfied however
- ❖ 22% of residents believe that help and training for the unemployed is the single area most in need of improvement. Housing repairs and maintenance (19%) and schools and leisure services for children (11%) emerge as subsequent priority areas.

Feelings of empowerment

- ❖ Around two in three residents feel they can influence decisions within their local area (62%). One-third feels they have little to no influence.
- ❖ 50% of residents state it is 'very important' to have the ability to personally influence decisions that affect their local community.
- ❖ Time is the main barrier to being involved in decision-making (32%).

Access to trusted information on local services

- ❖ Health centres and GPs, local schools/nurseries and word of mouth discussions are the most trusted providers/ways of gaining information on local services.
- ❖ Neighbourhood police officers and housing officers are the least trusted sources of local information.

Interest in getting involved in Team White City

- ❖ Two-thirds of residents express an interest in becoming involved in Team White City; 31% to a great extent and 35% to some extent.
- ❖ Over one quarter dismiss the idea or show little intent in being involved (27%).
- ❖ Those expressing at least some interest in Team White City believe that suggesting new ideas for the area and helping to improve services would be their key motivations.

Communication preferences and use of online channels

- ❖ Local newspapers are most important to residents for regular access to local information (72%)
- ❖ One in three residents finds out local information via word of mouth.
- ❖ Social media does not resonate strongly as a means of learning about local topics; just 13% indicate they use this.
- ❖ Nine in ten residents have access to either a mobile phone, home PC or tablet computer.
 - 33% of residents have a smart phone.
 - Two-fifths have a home computer or tablet.
- ❖ There were very polarized views in interest levels of using an online resource to give views about local services: 57% are interested, 43% are not interested. Interest levels are higher amongst younger residents.

1.2 Recommendations and discussion

The recommendations outlined below consider the findings of both the quantitative survey and qualitative focus group conducted within the Opportunity Area. They also bring together previous studies undertaken locally and the experience of the NHS North West London Public Health team in advocating community engagement in the local area over recent years.

The report discusses recommendations for local civic engagement and involvement in devolution under two broad themes: **(1) information and feedback** and **(2) influence and shared decision making**.

Service priority areas and visible 'quick wins'

Firstly it is important to acknowledge that '**consultation fatigue**' is clearly evident amongst both residents and community group stakeholders. Whilst conducting the quantitative survey with local residents, the community researchers reported they had received numerous complaints about '*yet another survey*' and asked '*what happened to the last one?*' Respondents expressed frustration with '*never hearing back*' on previous consultations and demonstrated anger at '*nothing ever changing*'. Such expressions were also evident in the focus group by both residents and stakeholders.

We are of the opinion that it would be advantageous to the wider Team White City programme to deliver one or two high-profile, visible and positive 'quick wins'. These would provide clear recognition of listening to the priorities close to residents' hearts, while demonstrating empathy with local residents. We believe this would help shift the community's perception of the local authority and consultation processes from being apathetic to being proactive and sympathetic.

Two 'quick wins' were highlighted in Turning Point's Connected Care report published in January 2011 (see Appendix 2 – Literature review), which involved refurbishing the local AstroTurf, and creating a neighbourhood hub of local services support, advice and information.

We can report that the survey highlights the service areas for improvement are:

- **Housing maintenance and repairs**
- **Facilities for children and young people**
- **Unemployment training and information**

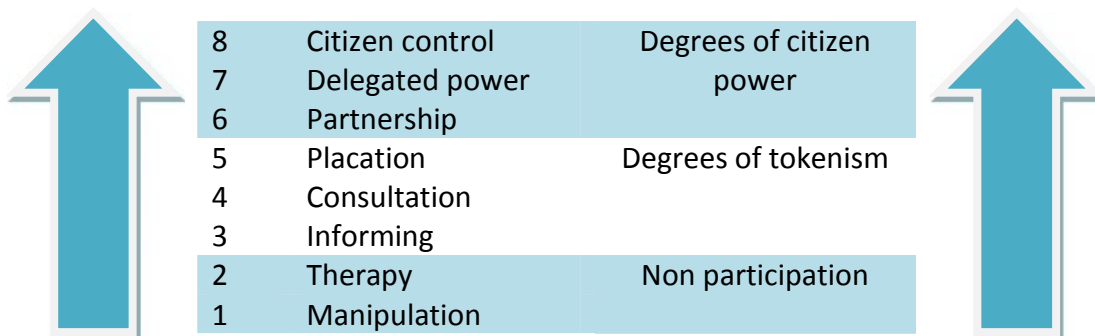
Housing maintenance and activities for younger children were particularly endorsed as areas of improvement in both the quantitative and qualitative research (see section 3.2).

A strong preference for a single point of contact with services across a range of needs was expressed in the focus group by both residents and community representatives who are supporting residents in navigating what was termed a “frustrating” customer service experience. Once again, there is a correlation between our findings and that of Turning Points’ findings and recommendations on the need for a tenant account manager who handles residents’ reporting of issues/complaints etc. This role also helps to devolve power to a more local role.

This idea of bringing services closer together to create ‘a service hub’ emerged in the focus group as something which both residents and stakeholders would welcome. It was also suggested that such an approach would avoid the duplication of service delivery and result in financial savings; this goes to the very heart of the Community Budget policy approach.

1.2.1 Engagement: information and feedback

Of those who expressed interest in getting involved, one half of Opportunity Area residents surveyed indicated that they would prefer to start by going to local meetings and open days rather than committing to an on-going panel or volunteering for a project straight away. This indicates that the enduring model of Arnstein’s ladder of citizen engagement¹ continues to be just as relevant today as it was at time of publication.

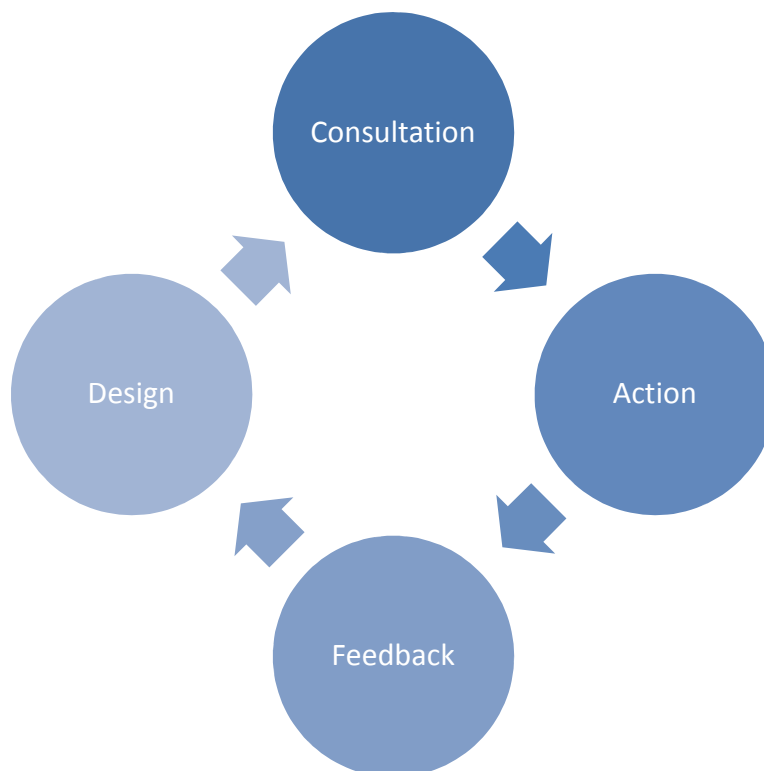


With this in mind, a strong focus on information provision to and receipt of feedback from local residents, groups and organisations is firstly required. Information and feedback not only creates a foundation for robust, two-way communication but can form the initial stages of informal engagement with a wider cohort of people if creative, local events are designed. This level and style of engagement will be sufficient for many. For others it may provide a ‘taste’ of

¹ A Ladder of Citizen Participation, Arnstein, Sherry R. JAIP, Vol. 35, No. 4, July 1969, pp. 216-224

what engagement means and feels like, and what their appetite for greater involvement in decentralisation activities as the project develops over time. Residents will then move up the ladder of engagement.

Our concern with the 'consultation fatigue' which is evident locally (see above) indicates there is a strong need to provide solid communication of the consultation findings and subsequent actions to residents and organisations. An on-going commitment is required strategically to embed this approach within engagement planning, therefore forming a continuous cycle of consultation and feedback. New consultation design should also take into account the feedback from previous exercises, involving residents in a genuine 'co design' model.



Satisfaction with local services is reasonably high across the Opportunity Area - 70% of residents, although just 20% are very satisfied. As a key measure of public satisfaction, this indicator should be **tracked on a regular basis** to understand whether greater devolution and resident involvement are having the desired local outcomes. The level of performance should be fed back to residents in the form of a highly accessible scorecard or similar.

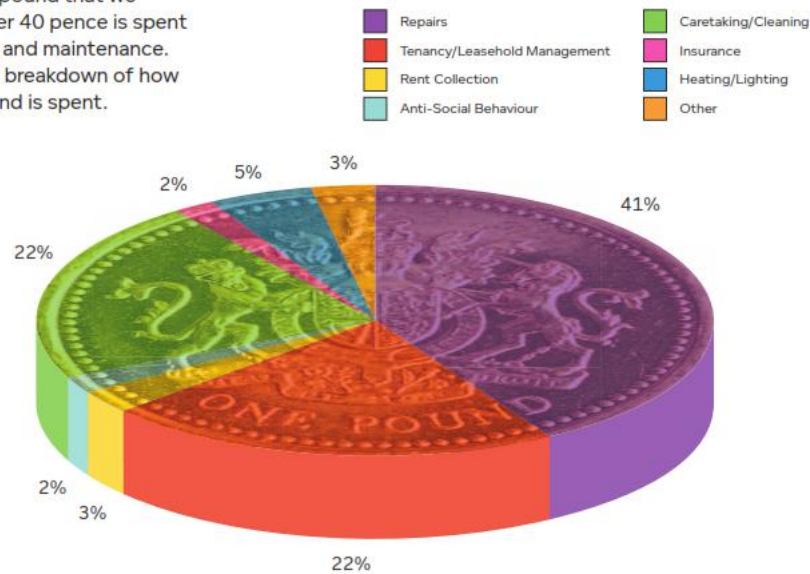
It has been incumbent upon both Primary Care Trusts and local authorities to feedback to its residents for a number of years through agendas such as World Class Commissioning and the Duty to Involve. Good practice in this area is often characterised as being short, action-orientated briefing document, such as the 'You Said, We Did' approach used effectively across NHS Tower Hamlets². We would also recommend the use of **infographics** as a tool for bringing survey results to life for residents (such as overleaf illustration). This will be particularly

² Tower Hamlets Involvement Network (THINK), Annual Report 2010-11

effective as feedback from interviewers suggested that residents did not respond well to 'lots of pages of boring text'.

Where does the money go?

For every pound that we spend, over 40 pence is spent on repairs and maintenance. Below is a breakdown of how every pound is spent.



a) Communication approaches

Imaginative and creative ways to communicate the complex concept of devolved decision-making and the activity of Team White City should be pursued. Results to our survey indicate that (lack of) awareness of the issues being considered is the second biggest barrier personal involvement in local decision making. Anecdotal evidence highlights that there is low awareness of Team White City or, at best, misunderstanding as to what Team White City is. Additionally, the term leads to some levels of confusion given that the Opportunity Area geography is wider than the White City estate boundary that everyone locally recognises.

The survey results show that residents' preferred communication channels are complex and differ depending on ethnicity and age. Therefore a co-designed communications strategy, created jointly with residents, is recommended to ensure messages reach the estates' different residents properly. Particular consideration should be paid to those with low English language skills, which are present amongst a significant proportion of residents. Media that do not rely on written English should therefore be developed and embedded within the Team White City communications strategy.

A report recently commissioned by NHS NWL into Child Oral Health³ researched and explored communications and engagement approaches amongst White City parents. The report highlights a number of fundamental considerations, which are underpinned by the Department of Health's Healthy Foundations Segmentation Model⁴, and include:

³ Understanding Child Oral Health on White City: Insight generation and recommendations, August 2012

⁴ Healthy Foundations Life-Stage Segmentation Model, Department of Health

- **Use trusted and known sources as message bearers**
- **Use community fun days to engage with residents and to provide communication around specific, relevant topics**
- **Co-create customer-orientated communications that are regarded by the recipients as for ‘people like me’**
- **Use peer testimonials to connect with the target audience**
- **Take messages out to residents and exploit existing outreach methods**

b) Communications preferences

The Opportunity Area survey highlights the following residents’ preferences for communication:

- **Local newspapers and newsletters**
- **Leaflets**
- **Word-of-mouth**
- **Community information and fun days**
- **Information hubs via trusted sources such as schools, health centres**
- **Online mechanisms**

A 360 degree communications strategy needs to be embedded which preferably includes all of these channels. A major consideration for communications outlined in both the NHS INWL’s Child Oral Health⁵ report and Department of Health’s Healthy Foundations Segmentation Model⁶ includes “creating customer-orientated communications that are regarded by the recipients as for ‘people like me’”. This is fundamental for any piece of communications approach to be effective in White City. Too often residents receive a leaflet, which they perceive as being ‘not for them’ with little regard to language skills, tone of voice or subject knowledge. To get communications right, we strongly recommend working with residents. Co-creating communications will lead to effective and succinct messages, a relevant level of detail, an appropriate tone and considered use of language. It will also lead to a greater understanding of your key message by the co-creators, who will subsequently act as ambassadors for the programme and ‘spread the word’.

Newspapers and newsletters

The ‘More than a community voice on White City’ states there is significant trust in the local council’s free newspaper ‘H&F News’. The high importance of local newspapers also emerged from our study; 72% of surveyed residents cite this as being a regular source of local information. It is regretful that there is not a specific local newspaper servicing the White City area. Building on existing relations with the Council paper to secure regular and positive coverage in the fortnightly free paper could support effective communications for the

⁵ Understanding Child Oral Health on White City: Insight generation and recommendations, August 2012

⁶ Healthy Foundations Life-Stage Segmentation Model, Department of Health

programme. This would also be a channel for publishing the ‘quick wins’ discussed earlier as well as being a recruitment and retention tool for community engagement and volunteers.

There are a number of newsletters which the Team White City project may wish to consider as communication options. The community champions produce a quarterly newsletter which is distributed across the White City estate and left at key community venues such as doctors’ surgeries, dental practices and community centres. The housing team also produces a newsletter for White City residents. Wider communications to incorporate the larger White City Opportunity Area would need to be considered. Working with the active Tenants’ Association in the Shepherd’s Bush area might be worthy of exploration.

Leaflets

Our survey results highlight that some residents (44%) regularly use leaflets and newsletters through their door with 19% citing this as their most preferred communications channel. We recommend exercising caution with leaflets in general, as experience of the Public Health team working on the White City estate indicates that brand recognition and message awareness does not increase significantly through door-to-door leaflet drops alone. Lack of interest and general disengagement from consultation activities would suggest one-to-one discussions would be more appropriate to promote the Team White City concept – particularly in the initial stages of the programme.

Door drop leaflets should not be pursued in isolation. Regular, concise update leaflets (2pp, A5 format) are excellent support materials for ‘community communicators’ at information days and fun days. They also support one-to-one communications by acting as a point of reference for key messages and can be given to residents to take home and read at their leisure. This communications approach has been tried and tested by the community champions in delivering public health campaigns including the local ‘*Be clear on cancer*’ and ‘*Child oral health*’ awareness raising programmes. The community champions worked closely with the campaign commissioners to co-design the public health information material and gave considerable input into the use of language, knowledge levels and cultural considerations. Taking this co-design approach meant that residents felt the piece of marketing collateral was for ‘people like me’ taking local language abilities and cultural issues genuinely into consideration.

Word-of-mouth

Our survey indicated word-of-mouth discussions are one of the most trusted sources of information about local services (Section 3.4); results also indicate that health centres/GPs and schools/nurseries are the most trusted to provide local information, well above other ‘official’ public sector bodies (as shown by this survey and the national picture). Word-of-mouth referral is also supported by a conclusion in the ‘More than a community voice on White City’ paper⁷ which states that ‘when considering culture, language spoken and ability in English, plus the importance of face-to-face communication, word-of-mouth is one of the most effective means of getting a message across’. The paper recommends using the network of community champions and expanding this to include “other connectors such as caretakers, gardeners, GP receptionists and school outreach workers.” There is a clear parallel here with the findings of the recent survey.

⁷ More than a community voice on White City, Martin Bontoft, December 2009

Community information and fun days

Must take into account of:

- Evidence of Community Champion's ability to organise successful events – diverse range of individuals, age ranges, cultural backgrounds.
- Promoting the fun element above the information giving – once residents are present, then engage with them about decentralisation.
- Emulating tried and tested formats – look to build on best practice to make engagement more substantial for all (explore techniques with Community Champions and officers).

Information hubs via trusted sources such as schools, health centres

As discussed above, trust in GP and education settings is high in White City. A knowledge and information 'hub' could provide targeted health and social drop in information support and awareness events. The hub would be a central place from which partnership working with pharmacies, local voluntary and community organizations and patient groups could be formed (the spokes). Other possible features of this collaborative model include:

- Health advice as well as advice on housing council tax benefits & children's services.
- Creation of space for English classes. Improved English links to better health outcomes if schemes such as Skills for Health are introduced.
- Working closely with NHS Direct to promote self care.
- Provision of signposting for local health and social care services
- Provision of community based health prevention / promotion workshops focusing on key local health priorities, for those where literacy and access to service rates are endemically low

Online channels

There is some modest appetite for using online channels although the results of the survey clearly indicate that this will not be a panacea to the programme's consultation/engagement needs. 57% of residents indicated that they would be interested in giving their views via an online service although just one-quarter said they were 'very interested'. Unsurprisingly, interest is higher amongst younger age groups, which illustrates the importance of offering a range of solutions appropriate for the range of local audiences.

How to do this?

Engaging community members in promoting health message has been advocated by the Altogether Better collaborative programme since 2008⁸. Working with local residents and trusted sources to become both message bearers and receivers for the Team White City

⁸ South, J., White, J. and Raine, G. Community health champions: Evidence summary. Leeds, Centre for Health Promotion Research, Leeds Metropolitan University, 2010

message will also lead to more effective and meaningful two-way conversations and engagement with local people about devolution. Not only will this deliver a more sustainable communications plan but will also encourage individuals and groups to explore moving up the ladder of engagement.

Appropriate infrastructure and support are essential to create a team of effective community communicators. The White City Community Champions can be commissioned to provide such a service within the borough, however, it must be recognised that significant resources and staff capacity have been invested, and continue to be, to sustain a team of qualified and experienced volunteer communicators.

Further capacity building is required to provide the skills for residents to become effective communicators for the programme. Co-designing personal development plans will enable individuals to identify their own training and skills needs to compliment core training. Time Banking could be explored as a model of skills exchange and/or transfer which has clear positive local outcomes⁹. Capacity building programmes which have been used previously include training in:

- **Motivational interviewing techniques** – these techniques are commonly used in behavioural change scenarios, such as smoking cessation, by empathising with individuals’ ‘starting points’ and understanding their values and perceptions to encourage lifestyle changes.
- **Effective communications**
- **Effective signposting**
- **Outreach methods**
- **Promoting key messages**
- **Understanding the local community**
- **Coping strategies** – to enable residents to cope with the potential pressures and tensions of working on a neighbourhood project can create when individual are also living and conducting their lives within the community.

Role of local organisations

Expanding the communications network to include local organisations is advised as there is considerable trust and regard towards the third sector, which services the local area. These groups are excellent connectors within communities and groups. Developing their capacity to play a key role in providing information to, receiving feedback from and engaging with residents would show a real commitment to working with these grassroots organisations and cement them at the heart of the programme. Capacity development may include:

- **Event co-ordination and management**
- **Volunteer support and management**
- **Developing volunteer induction and training programmes**

⁹ University of Salford, The Salford Time Banking Evaluation, Tony Warne and Keith Lawrence, June 2009

- **Effective community engagement and approaches**
- **Community intelligence and profiling**

Co-designing capacity building plans in partnership with local organisations is recommended to ensure effective development plans are created. Building on the networks of existing groups is also encouraged. The local council for voluntary sector CaVSA H&F (Community and Voluntary Sector Association in Hammersmith and Fulham) is able to assist with working with the third sector in the borough, and can support with training, information giving and advice as well as facilitate networking and engagement between statutory and private sector partners.

c) Clear communications

We feel it is important to highlight that during the surveying stage our researchers were frequently questioned about broader redevelopment plans for the area. We noted that the Afro-Caribbean community is particularly vocal around this subject and in sharing their understanding of plans for the estate, which are mostly negative in nature. We foresee this to be a reoccurring issue for the Team White City project amongst residents and stakeholders and a possible source for tension or conflict for the programme.

There appears to be little formal communication with residents on the subject and, as a result, word-of-mouth communication between residents is high and uncontrolled. Although we are unaware of the extent to which Team White City will be involved in any redevelopment plans, we would recommend clear communication to residents around this topic to help reduce community uncertainty. We would also suggest making clear residents' ability to influence any redevelopment plans at the onset to help manage residents' expectations in this regard.

1.2.2 Engagement: influence and shared decision making

Engaging residents in participatory regeneration requires a commitment from leadership at the outset. This senior buy-in will enable community engagement to be embedded throughout the whole organisation as a guiding principle. Adequate infrastructure and support mechanisms must also be in place as well as an appropriate capacity building plan to develop skills and confidence levels. This will then enable residents to effectively participate in decision making and to be involved as equal partners in Team White City. Capacity development is a learning point identified in the Top 10 Tips for engagement from the '*Be clear on cancer*' public health campaign¹⁰. We advise working with residents and communities to design their own development plans.

If Team White City is to take full advantage of the reasonable amount of social capital evident within the Opportunity Area then there are significant lessons to be learnt from other community engagement programmes. This includes the New Deal for Communities Programme (NDC)¹¹, which in its national evaluation suggests that "a clear strategy needs to be developed

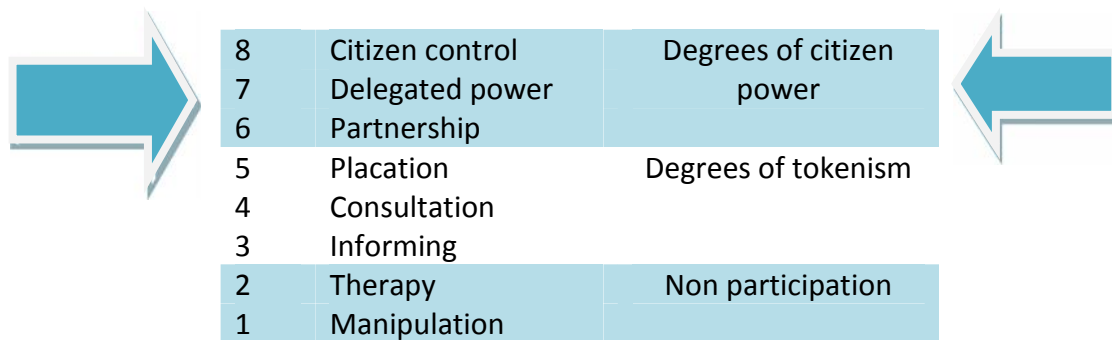
¹⁰ Raising Awareness of Lung Cancer Symptoms, Top 10 tips, NHS Hammersmith, White City Residents' Association, The HUB Marketing Ltd

¹¹ Involving local people in regeneration: Evidence from the New Deal for Communities Programme. The New Deal

early on, underpinned by community development and capacity building”. It continues, “the community engagement ethos needs to be embedded across the organisation and partnerships should work around a core group of properly supported residents, and build connections to existing networks.” A wider evaluation of NDCs explored the extent to which those who get more actively involved in community activities have greater levels of contentment with an area¹². It cautions however that lapsed engaged members tend to be most negative about outcomes for an area.

a) Residents as equal partners

A polarisation of interest in the Team White City programme is apparent so realistic expectations of the numbers of residents who will engage formally is encouraged. Addressing this with tiers of practical engagement solutions is recommended strategically. As highlighted earlier, of those who expressed interest in getting involved, one half indicated that they would prefer to start by going to local meetings and open days rather than committing to an on-going panel or volunteering for a project straight away.



In this context, the ‘gold standard’ of devolved power is the adoption of a participatory budgeting model. This was endorsed in 2011 by DCLG¹³ who stated “good decision-making processes need to be followed by the delivery of good projects. In other words, Participatory Budgeting works as part of a package of community engagement and empowerment; but in order for everyone’s confidence in the approach to be maintained, it has to ensure those who receive funds do what they said they were going to do, when they said they were going to do it.” The approach is best summarised by the adjacent process diagram¹⁴

for Communications National Evaluation, Final report, Volume 2

¹² Searching for the impact of involvement, Ipsos MORI seminar, July 2007 <http://extra.shu.ac.uk/ndc/>

¹³ Department Communities and Local Government report: Communities in the driving seat - a study of Participatory Budgeting in England. August 2011

¹⁴ CFE Report: Participatory budgeting from Brazil to Britain, 2008 <http://www.participatorybudgeting.org.uk/documents/CFE%20PB%20document.PDF>

In the White City context, residents and organisations must have the opportunity to co-design and co-deliver engagement activities, as well as being represented at them. Recommendations for engagement solutions include:

- **Decision-making boards and working groups**
- **Participatory budgeting events**
- **Open space meetings (world cafe methods)**
- **On-line and face-to-face surveys**
- **Focus groups**

How to do this?

With the commitment, resources and infrastructure in place, meaningful engagement can lead to fruitful results as well as make substantial financial savings. Tower Hamlets' Social Action of Health (SAfH) is an example of good practice in this area. Through grass-roots work SAfH promote access to public and community services and encourage local people to take more control of their lives and their health and well-being by teach people to manage their own health. SAfH 'Spiral of Participation' is illustrated below:



The community champions have significant experience of decision making and influencing with the development of Canberra Centre for Health - with encouraging results. The champions played a substantial role in designing and delivering consultation activities with residents and local groups, and facilitating discussions and generating ideas for the health centre on White City. The champions were also given equal weight in the procurement of a new Health Provider.

This collaborative approach with the community champions and residents has led to the recruitment of a Community Champion to the position of GP receptionist, the centre now enjoying a 100% patient satisfaction response on NHS Choices and having one of the lowest A&E admission rates by practice in White City. Inappropriate use of A&E is a significant issue for the

NHS nationally; this model of engagement has led to excellent satisfaction levels and as a result behavioural changes have occurred in how residents interact with the NHS; a corollary of which has been financial savings for the health service. This model may also help explain the high levels of trust identified in our survey with local health centres as an information provider.

b) Developing local capacity – residents

Overall, the survey indicates that a good level of social capital exists in the community and that two-thirds of residents surveyed agree that people in the White City community pull together to improve it (68%). However, previous research¹⁵ has exposed strong ‘tribal’ attitudes and behaviours within the ethnic communities living in the White City estate and an almost non-existent bond between communities. Qualitative research undertaken for this study also points to this, and should be considered when developing a community engagement plan to underpin the Team White City programme.

Whilst two-thirds of residents indicate they would be willing to get involved to some extent with Team White City, only around three in ten suggest they will be advocates and wish to get heavily involved. This is nevertheless a good starting base and these individuals should be provided with the necessary skills in order to effectively participate. Working with individuals to identify their own development needs is essential but may include training in:

- **Leadership development**
- **Chairing meetings**
- **Negotiation skills**
- **Motivational interviewing techniques**
- **Effective communications**
- **Promoting key messages**
- **Understanding the local community**

c) Capacity of community and third sector groups

Perhaps as importantly, a large, active and well-regarded community and voluntary sector that services the local community is evident in and around the White City area. Over two-thirds of residents display trust towards communities and groups within the area, and quickly turn to them for support when experiencing difficulties with service providers for advice and support. For example, the research team heard examples of residents turning to the Somali Women Support and Development Group for help addressing housing repairs.

“There are people who have barriers to local services because of language problems, we have to consider these things. The local council send out someone who doesn’t know what the problem is, he figures it out then goes off again and never comes back. It is difficult for a Somali family because they can’t communicate. The Council are not sensitive to the needs of the community.”

¹⁵ More than a community voice on White City, Martin Bontoft, December 2009

Despite this large and active third sector, previous reports and our research highlight that resources are poorly coordinated with statutory agencies and their initiatives. Furthermore there is a poor awareness of roles on both sides. As a first step in working towards better involvement with the third sector, it is recommended that all third sector projects, groups and organisations are identified and mapped, and that their roles and links into the community are clearly understood

A plan to develop the capacity of these groups so as to be able to play an active and equal role in Team White City is advised and would include looking at building:

- **Chairing meetings and negotiation skills**
- **Influencing and decision-making skills**
- **Leadership development**
- **Participatory budgeting education**
- **Building effective partnership and networks**
- **Understanding political processes and local provision**

We recommend that these 'grass-roots' community and voluntary groups are significantly involved in the Team White City programme. We believe this would lead to a greater, more engaged community and simultaneously provide a more cost-efficient and effective way of achieving sustainable community involvement. Building on the networks of the local council for voluntary sector, CaVSA H&F (Community and Voluntary Sector Association in Hammersmith and Fulham), is advised to support with training to the third sector.

We would also particularly encourage joint working with other key residents/spokespeople that are particularly well engaged within the community, such as the community champions. These people are evidently able to effectively mobilise large numbers of residents spanning multiple ethnic backgrounds and age groups. They have experience of working in close partnership with local service providers and commissioners to identify needs and priorities of residents, design solutions, alongside procuring and supporting the delivery of services.

1.3 Summary of recommendations

	Information and feedback	Influence and shared decision making
Residents	<p>34% of residents most prefer local newspapers for local information whilst 32% also regularly use friends, family and neighbours</p> <ul style="list-style-type: none"> • Track and monitor satisfaction amongst service users • Exploit power of word-of-mouth • Community info days/fun days • Newspapers and newsletters 	<p>84% of residents feel it is important that they have the ability to personally influence decisions that affect their local community</p> <ul style="list-style-type: none"> • Participation events (open space) • Participatory budgeting events • Decentralisation workshops/groups
Neighbourhood/ community (voluntary groups, third sector and local providers)	<p>88% of residents trust local health services and 84% trust local schools to provide information about local services</p> <ul style="list-style-type: none"> • Information hubs • Use of existing networks • Community info days/fun days • Decentralisation workshops/groups 	<p>66% of residents would like to get involved in Team White City to a great or some extent</p> <ul style="list-style-type: none"> • Decentralisation workshops/groups • Team White City Board • White City Neighbourhood Forum



Implementation key considerations:

- ❖ Secure leadership 'buy-in' from the top
- ❖ Invest capacity and resources long-term for effective engagement (2.5 budget)
- ❖ Create the appropriate infrastructure and support framework to deliver meaningful engagement
- ❖ Co-design and deliver robust capacity building programme for individuals and organisations
- ❖ Embed the principles of co-creation by working with individuals and groups to co-design and co-deliver events
- ❖ Consultation and feedback cycle – embed this cyclical approach throughout
- ❖ Create customer-orientated communications in collaboration with residents so they are perceived as relevant and for 'people like me' by recipients

Section 2: Background and introduction

2.1. Background to the study

A new funding strategy known as 'Community Budget' was launched during December 2011. This was designed to encourage councils, boroughs or neighbourhoods to team up with all public services in their area and to combine resources into a single locally coordinated 'pool and save' pot, thereby offering greater local control of improved services for local people.

In December 2011, The Secretary of State granted White City 'neighbourhood-level' Community Budget status – one of 10 neighbourhoods to be granted such status in England. These neighbourhoods have been selected to develop small-scale Community Budgets that will give residents a micro-level say over the service provision. It is foreseen that the community will play a leading role by working with the local council and other services to shape services from a customer's perspective. The Community Budget aims to:

- Make better use of its resources, including pooling the budgets of all agencies where it is effective to do so, taking into account local knowledge, community assets and voluntary effort
- Remove central rules and regulations so local professionals can deliver better services by more effectively redesigning them
- Give the community greater control over their local public services
- Establish appropriate local partnership and governance arrangements to create a unified approach that suits an area.

2.2. Background to the research

In June 2012 the London Borough of Hammersmith and Fulham commissioned NHS North West London Public Health and market research, planning and analysis consultancy, Research by Design Ltd (RbD), to explore residents' attitudes towards devolved decision-making as part of its development plans for delivering the Community Budget in the White City Opportunity Area.

The findings of the study will contribute to the borough's Community Budget Draft Proposal to the Department of Communities and Local Government (DCLG) in September 2012.

2.3. Research aims

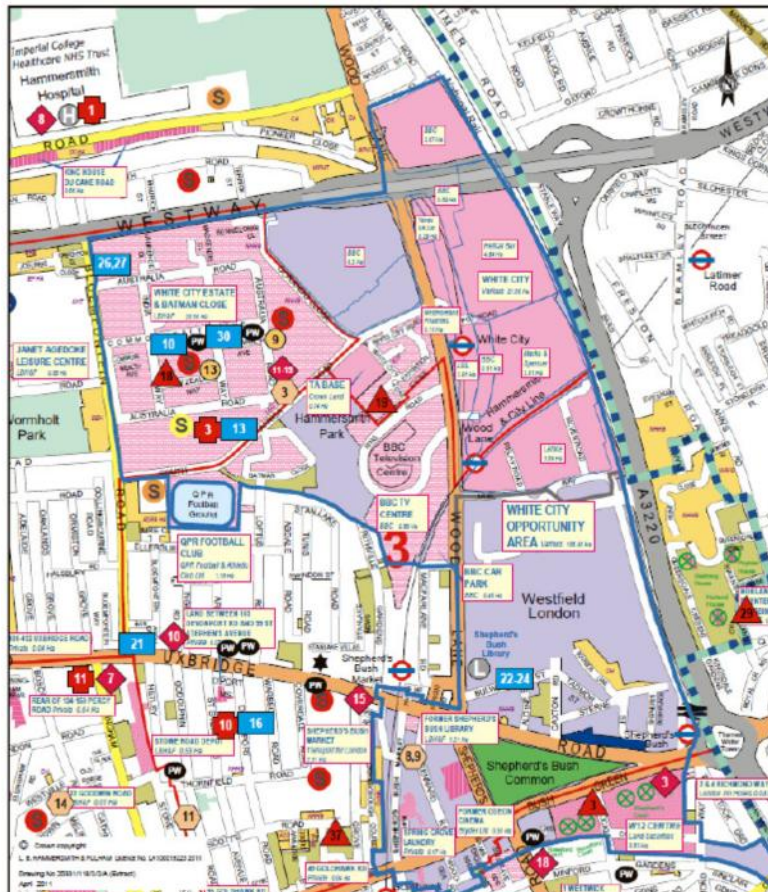
The aim of the research project is to bring a better understanding of:

- Current levels of engagement
- Appetite for local devolved decision-making
- Service usage, satisfaction levels and need for service redesign
- Local communications preferences
- Ways to encourage local civic engagement and decision-making

2.4. Methodology and sample

The agreed methodology was to conduct face-to-face quantitative interviews with around 5% of the resident population of the White City Opportunity Area. To support this, ten White City Community Champions were recruited to act as community researchers and work alongside five full-time market research interviewers. A broad range of interviews were required from across the Opportunity Area with quotas set on age and ethnicity. Fieldwork was undertaken between 20th July and 31st July 2012.

Figure 1: Map showing boundary of White City Opportunity Area



In addition to the quantitative survey, senior researchers attended and undertook qualitative interviews and discussions at the Team White City event on 21st July, held a focus group discussion with residents and community leaders on 8th August and attended the Community Information and Fun Day event held on 23rd August 2012, run by the Community Champions. These events were all held at the White City Community Centre. A fieldwork debrief was also held on 6th August.

This study also undertook a desk research and literature review of previous studies of the area (predominately within the White City estate, see Appendix 2) and the learnings from a number of health and regeneration initiatives in order to present a more rounded report, and offer the opportunity for Team White City to consider and build on recent initiatives.

The experience of NHS North West London Public Health team in community engagement and working on the White City estate (see Appendix 3) has also been considered in the writing of this report.

2.5. Report context

Whilst conducting our desk research and literature review, it became evident that two broad but significant factors should be considered whilst reading this report. We believe it necessary to highlight these at this early stage so as to provide relevant background and to contextualise our findings and the emerging recommendations from the study.

Survey fatigue

The White City area has been the focus of many initiatives and public consultations in recent years. Our quantitative findings indicate that 45% of surveyed residents feel the area has got better in the past two years, whilst 34% suggest it has not changed at all. In contrast, 18% argue the area has worsened and qualitative and anecdotal findings support this.

There is also an underlying perception amongst residents and stakeholders that, whilst their views have been sought, local opinion is not taken on board and things have not changed. Such a belief was also evidenced amongst local practitioners in the White City profile 08/10/2009¹⁶, which states that “practitioners in the local area recognise that significant programmes have targeted resources in the White City area over the past twenty years, which have achieved gains, but not provided a substantial and sustained improvement for residents in the area.”

The perception that significant and long-lasting change has not been secured appears to feed an underlying sense of disenfranchisement amongst local residents with consultation processes; many residents now appear to feel marginalised and not listened to. Our research teams were exposed to residents’ clear frustrations with having to complete ‘another survey’ on matters already consulted upon.

The Team White City project aims to hand over greater control to local people over public services and to engage residents in devolved decision-making. Having a greater understanding as to residents’ past experiences and perceptions of their role and ability to influence local consultations may impact upon their willingness and expectations to engage with the Team White City programme. We see this as a major consideration for developing the engagement plan to underpin the Team White City project.

Profile of the White City Opportunity Area and socio-economic factors

The second factor is the profile of the White City area and the key characteristics of the estate (see Appendix 1). The evaluation of the New Deal for Communities Programme¹⁷ highlights the following factors to consider when engaging with communities: “the intensity and persistence of deprivation; community cohesion; levels of stability or transience amongst local populations; mix of tenure; and previous experience of regeneration.”

¹⁶ White City Estate Profile, London Borough of Hammersmith and Fulham (08/10/2009)

¹⁷ Involving local people in regeneration: Evidence from the New Deal for Communities Programme. The New Deal for Communications National Evaluation, Final report, Volume 2

Our research highlights a reasonably strong sense of social capital; two-thirds agree that people in the neighbourhood pull together to improve it (68%). This was also identified in the White City profile report of 08/10/2009 which states, “a strong sense of community (identity and familiarity with the area and with others who live there)”. However, previous qualitative research and our own observations also reveal a strong ‘tribal’ nature to the communities living in the White City estate and that “the strength of bonds within an ethnic community contrasts starkly with the almost complete absence of bonds between communities¹⁸.” The “increased reliance on peer support and an African word ‘Sutura’ which was explained as a trust in things close to your culture¹⁹” also gives an indication as to some of the challenges Team White City may have in penetrating the ethnic communities to engage them in the programme.

Low-level mental health issues, including isolation, depression and anxiety are prevalent and are contributing factors to social problems and marriage breakdowns, particularly in the Somali community. New entrants are also struggling with multiple pressures such as poor English language skills and poor knowledge, leading to few economic opportunities, isolation and depression²⁰.

The socio-economic factors facing many residents have significant implications on the methodologies and approaches developed for encouraging resident participation within the Team White City programme. They are considerations for capacity development, communications planning and engagement strategies. Recommendations around encouraging greater local civic engagement with the broader communities are given in this report, and highlight partnership working and devolving powers to the third sector and community groups.

2.6. Profile of residents participating in the quantitative survey

In total, 486 interviews were conducted with residents that live within the Opportunity Area.

Figure 2. Participant profile

Gender	Age	Ethnicity	Residence	Employment
Male 48%	16 to 24 15%	White 37%	<12 mths 4%	Working full time 23%
Female 52%	25 to 34 21%	Black 44%	1 to 2 years 9%	Working part time 21%
	35 to 44 26%	Asian 8%	3 to 5 years 24%	Looking after home/family 13%
	45 to 54 19%	Mixed 3%	6 to 10 years 16%	Student 11%
	55 to 64 10%	Chinese 1%	11 to 20 years 18%	Retired 12%
	65+ 9%	Other 3%	21+ years 26%	Unemployed, looking for work 12%
			Not stated 2%	Unemployed, not looking for work 4%
			Other 1%	
			Not stated 4%	

It should be noted that the majority of residents participating within the survey live within the White City estate. It should also be noted that Community Champions most typically engaged

¹⁸ More than a community voice on White City, Martin Bontoft, December 2009

¹⁹ More than a community voice on White City, Martin Bontoft, December 2009

²⁰ More than a community voice on White City, Martin Bontoft, December 2009

with their own network of community members and from within their own faith or ethnicity groups. By comparison, Research by Design interviewers used more of a 'free find' approach, interviewing a more random sample selection of resident that met the specified quotas.

2.7. Reporting

The output from the quantitative survey is in the form of conventional cross-tabulations. These provide results for the total sample and various sub-groups (e.g. gender, age, ethnicity, etc.).

Within the main body of the report, where figures are not shown in the charts, these are 3% or less and where percentages do not sum to 100% this is due to rounding or multiple coding (more than one answer being given).

The 'base' figure referred to in each chart and table is the total number of residents responding to the question.

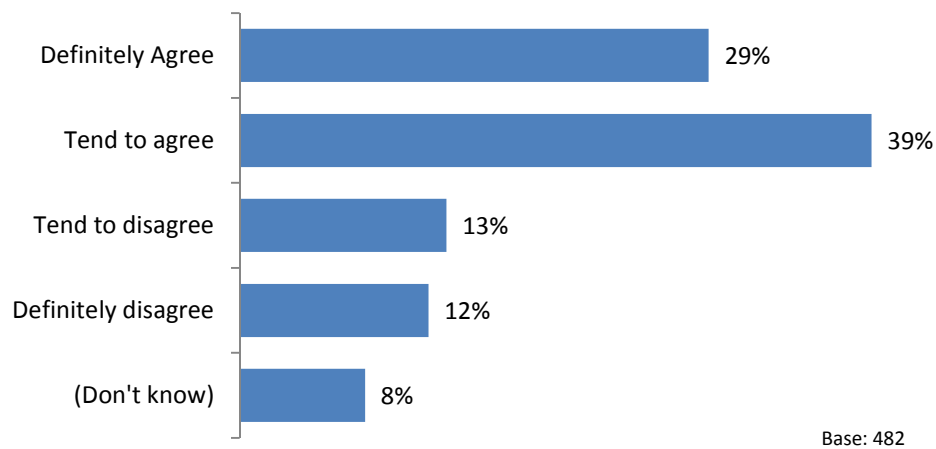
Section 3: Study findings

3.1. Social capital

Social capital is reasonably strong within the Opportunity Area, with 68% agreeing that people within the community pull together to improve their neighbourhood. Of these, one in three definitely agree, suggesting a segment of residents with a strong view of community spirit. Black and Asian communities agree more strongly than those from other ethnic backgrounds.

Whilst one quarter of residents feel that communities do not pull together, it is those from a white ethnic background that are the most cynical (31%).

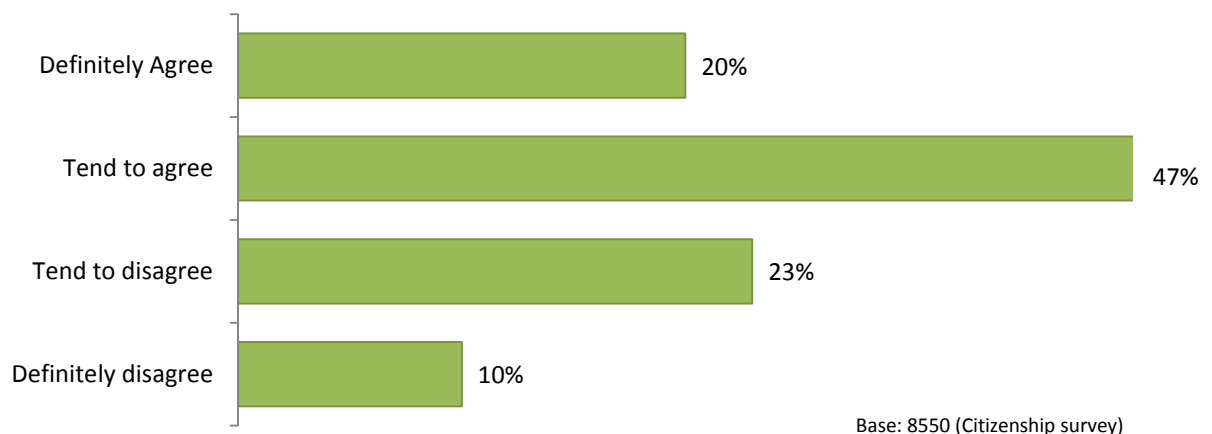
Figure 3a. Extent agree that people pull together to improve the neighbourhood



"I have moved here 6 months ago and one thing I have noticed, when walking around especially after school, is that everybody seems to get along, there seems to be community spirit between the parents. When all the parents get along it transfers to the children."

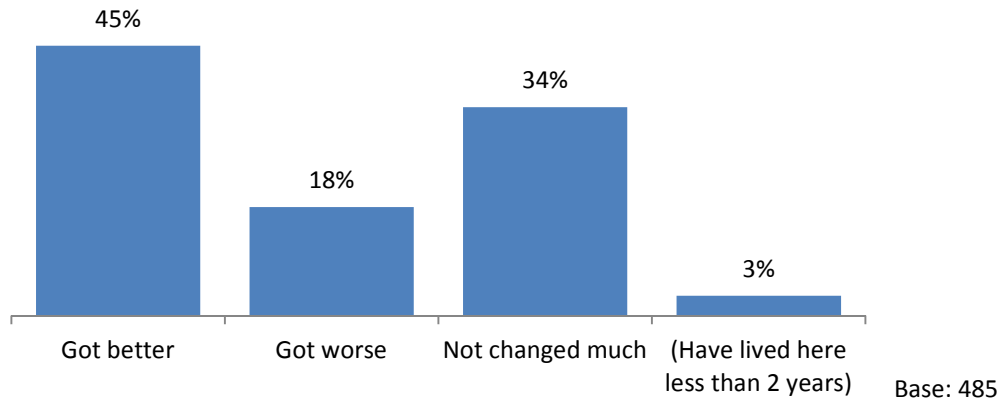
The results compare favourably with the national picture obtained via an identical question asked on the Citizenship Survey. This study showed in 2009-10 that 67% of respondents in England and Wales agreed that people in their community pulled together in their neighbourhood (excluding those who didn't know). Interestingly, slightly fewer (20%) definitely agreed that this was the case compared with White City (29%).

Figure 4b. Extent agree that people pull together to improve the neighbourhood (national picture) excluding don't know



45% of residents say the area has got better over the past two years, while 18% felt it is now worse. 34% think it has not changed much. Overall it is members of Black and Asian communities that are most positive; 48% and 58%, respectively, suggest the area has got better.

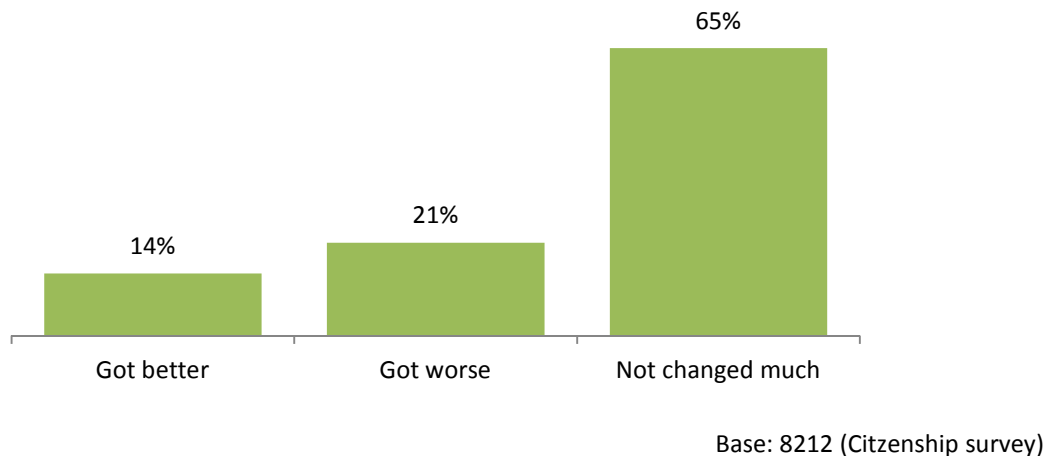
Figure 5a. Perception of area improvement/decline in last 2 years



It is the older residents, those aged 55 and over appear most negative in their views of area changes.

The White City results compare particularly favourably with the national picture obtained via an identical question asked on the Citizenship Survey. Just one in seven national respondents (14%) said that they thought their local area had got better in recent years.

Figure 6b. Perception of area improvement/decline in last 2 years (national picture) excluding don't know



Residents' views on social capital

The 2009-10 Citizenship Survey concludes that community spirit is intertwined with a sense of 'belonging' to an area and a high level of satisfaction with the area as a place to live. In summary, the survey found that nationally the likelihood of someone having a sense of community is increased if:

- They **trust many** people in their neighbourhood;
- They feel that **people pull together** to improve the neighbourhood;
- They feel that **ethnic differences** are respected in their area; and

- They perceive or experience **no racial or religious harassment** in the area

White City Opportunity Area residents told us that community spirit is conveyed by getting involved and though supportive neighbours. Whether residents have actually experienced the support of the community or simply see it in action, it is the sense of helping one another that primarily makes residents feel their community pulls together as one.

“I’ve helped and I’ve been helped.”

“I owe a lot to my neighbour and my community for their support.”

“I can see that everybody is working together in the neighbourhood.”

“Because we are happy to look out for each other in the bad times.”

“A perceived lack of interaction is the most common reason for residents who feel there is little community spirit.”

Participants within the focus group also suggest that local community activities can lead to a greater sense of community spirit and integration, although these activities need to be cross-cultural in order to engage participation.

“We look at this area as a close knitted community. I am talking from an organisation perspective... I don’t live here but I have created events where I have seen people come together and from those events we have developed friendships... let me give you an example, (names) have lived next to each other for 10 years and never spoke to each other. Once we had these activities, since then they start saying hello to each other which has not happened (before).”

By comparison, comments relating to poor community cohesion show a perceived lack of integration across the diverse ethnic groups within the area, highlighting the previous research findings of a strong ‘tribal’ structure across the area (and particularly within the White City Estate itself)²¹. There is also a sense that some residents prefer to keep to themselves, with little concern for the wider community as a whole.

“It’s a mix of people and races, and they don’t pull together.”

“There is a lack of community interaction, and lack of social activities in terms of cultural orientation.”

“People just mind their own business and they keep themselves to themselves.”

“We’ve tried, but no one wants to get involved.”

During discussions with residents in the focus group and one-to-one discussions at events, this sentiment was frequently expressed by older and longer term residents, particularly from within the Afro-Caribbean community. These residents suggest that the influx of immigration into the area is affecting community spirit and that services are being deflected to other community and ethnic groups making it harder for ‘their community’ to access services.

“Afro-Caribbean’s do not mix with the Somali community.”

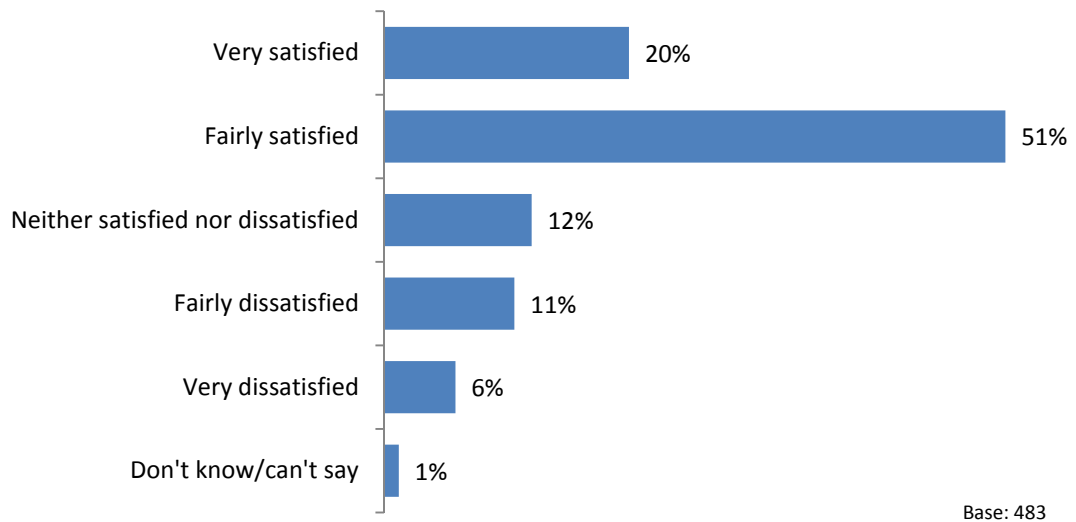
²¹ More than a community voice on White City, Martin Bontoft, December 2009

3.2. Satisfaction with local services

3.2.1. Satisfaction with services generally

Overall satisfaction with local services is a key performance indicator and, moving forward, will be a key mechanism to track possible changes in the impact of greater involvement. There already appears to be high levels of satisfaction with local public services; overall seven in ten residents claim to be satisfied.

Figure 7. Levels of satisfaction with local public services



Whilst not statistically significant (due to the relatively small base sizes), there are differences in satisfaction levels across the different age and ethnic group. Again, it is older Black residents that are the least positive; just 39% of those aged 65 and over claim to be satisfied. By comparison, more than six in ten of all other age and ethnic groups are satisfied.

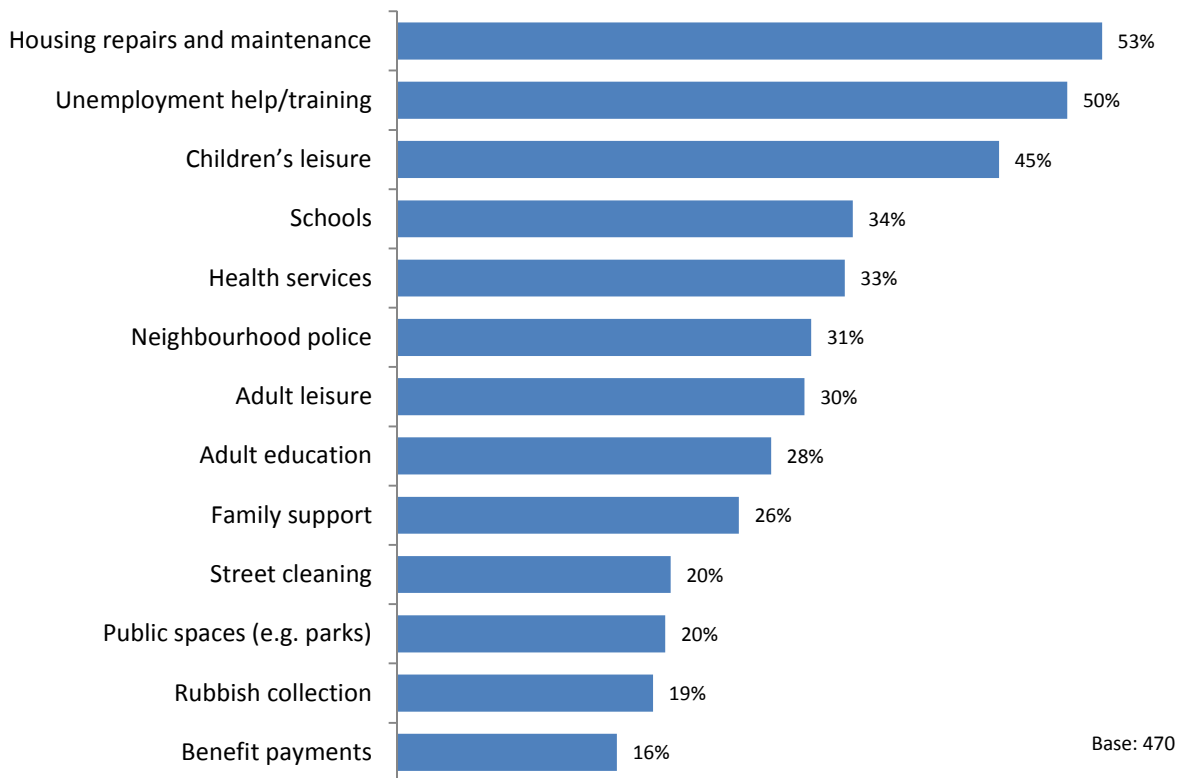
	Proportion of residents stating 'very' or 'fairly' satisfied					Base:
	18 to 34	35 to 44	45 to 54	55 to 64	65+	
White	72%	61%	63%	65%	93%	181
Black	74%	61%	65%	81%	39%	215
Asian	80%	90%	86%	100%	100%	41

These findings are supported by comments received from residents during the events and focus group discussion.

3.2.2. Improvements required to specific local services

Whilst overall satisfaction with local public services is generally high, it is housing repairs and maintenance that tops the list when residents are prompted for services that need improvement. This is closely followed by the provision of help and training for the unemployed; both are identified by around one half of residents.

Figure 8. Local services that need to be improved



Some four in ten residents feel that children's leisure services need improving, whilst around three in ten identify schools, health services, neighbourhood policing, adult leisure and adult education.

When asked to identify the single service area most in need of improvement, then 22% of residents indicate help and training for the unemployed. 19% opt for housing repairs and maintenance. Schools and leisure services for children follow at 11%.

3.2.3. Views from focus group participants

Unemployment related services did not feature as an area for service improvement amongst local community groups and residents during the group discussion. For these groups and residents, the focus needs to be on children's leisure provision and housing repairs and maintenance.

Children's leisure provision

The community groups and residents claim that there is a particular need to broaden services for children and young people in the evenings. Whilst there are activities and activity centres

that cater for children, such as the Fatima Centre, there is limited (if any) provision after 9:00 pm.

“One thing I have learnt since I have been here is that there is not a lot of provision for children... in terms of playing provision.”

It was suggested by some that the current time of 9:00 pm is a suitable time for children and young people to go home. However, others felt that this watershed is only really suitable for younger children. They argue that ‘teenagers’ would simply congregate in the local parks and streets after this time, looking for something to do, rather than return home.

“At night time there are lots of boys who hang around and in the park who have no where to go. For the young people it’s difficult, you either stay inside and deal with house tensions or you go outside and deal with people complaining about you being outside.”

It was further proposed that the lack of suitable activities beyond 9:00 pm leads to some young people engaging in anti-social behaviour, criminal activity and drugs. To counter this behaviour, one suggestion is to encourage arts and cultural activities, such as music, amongst children and young people. Drawing and music in particular is argued to be cross-cultural, and given the multi-cultural background of residents in the area it is believed these activities would assist in breaking down barriers and counter the ‘tribal’ nature of the area.

The Community Information and Fun Day event run by the Community Champions on Thursday 23rd August shows how this type of ‘grass roots’ led activity can engage with families and young people. The ‘Street Dance’ element proved wildly popular with both pre-teens and teenagers.

Housing repairs and maintenance

Similar to comments received from residents in the face-to-face survey, those participating in the focus group discussion suggest that repairs and maintenance take too long to complete and that the quality of workmanship is often questionable. They suggest that repairs and maintenance is often simply ‘a short-term fix’, rather than an investment for a long-term solution.

Residents also suggest that customer service is poor and claim that this is due to the outsourcing of work to third-party contractors that simply do not care about the customers they are serving.

“Sub contracted services are worse! Not personal, not customer service orientated.”

“No return calls are made, locals have to chase up services to help them. No one seems to care.”

In a similar way, staff changes and staff attitude at the local housing office are said to be problematic. Residents complain that there is no single point of contact when dealing with repairs and maintenance and that they have to continually repeat themselves when chasing progress. In addition, those whose first language is not English often struggle to get themselves understood. Many agree that they are simply told they cannot be helped from the local office and are referred to the main office in Hammersmith.

“There are people who have barriers to local services because of language problems... (and) we have to consider these things. The local council send out someone who doesn’t know what the problem is, he

figures it out then goes off again and never comes back. It is difficult for a Somali family because they can't communicate. The council are not sensitive to the needs of this community."

"The housing officers change every 6 months and nobody knows... whoever is affected by it should be informed of their numbers and how to contact them. As soon as we need some help to check something it is always arranged to suit them, people shouldn't have to wait and miss out on a days' employment. Our intelligence is mocked when a contractor turns up... not on time... and tells me that he needs to take this bit of pipe away and order in the parts when I know I can just walk down the local merchants and buy it; only after I have complained do they carry on the work."

"The service is poor... when you go for satisfaction, there is no satisfaction... we are pushed from pillar to post."

Interestingly, there appears to be an element of increased social capital when neighbours chat together about their experiences regarding local public services, particularly when there is recognition of mutual challenges and feelings of shared adversity.

"Whenever there is an outside agency that comes in to do stuff, like fix an outside aerial or something... especially if it's a commercial package and they get it wrong... that's when the residents will come and knock on my door... 'when are they doing yours?', 'well they didn't do this'... then we will all talk and commiserate with each other and while we are at it 'by the way did you get your boiler fixed?', 'by the way is your window fixed?', 'did you understand this and did you understand that?'... so in that respect, sometimes when things go wrong it sets us up to talk to each other."

"Keep calm and carry on – comrades in adversity."

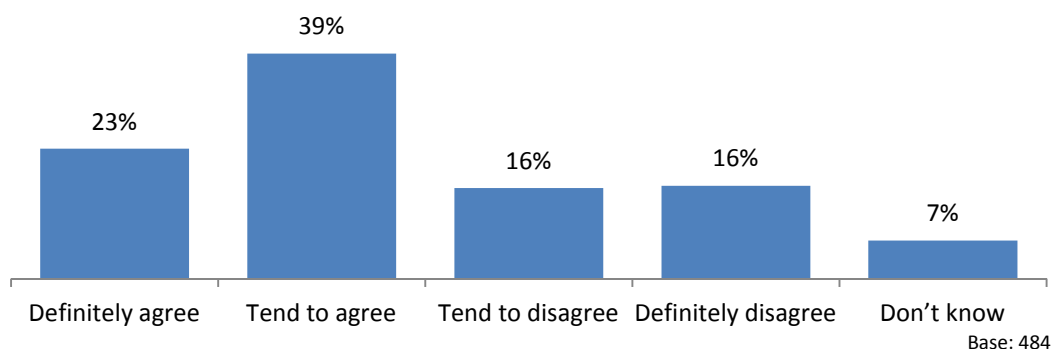
3.3. Feelings of empowerment

Nationally, the proportion of people who feel able to influence decisions affecting their local area has been falling steadily for some time – falling from 44% in 2001 to 37 in 2009-10 according to the Citizenship Survey.

In the White City Opportunity Area, 62% of residents agree that they can influence decisions within their local area, whilst one in three feel they have little to no influence. This feeling of empowerment is higher than the equivalent national figure even after taking people who 'don't know' into account.

Residents within the 35 to 44 age bracket suggest they have the most influence (overall 73% agree) whereas it is the over 55's that feel the least influential by far (46% disagree).

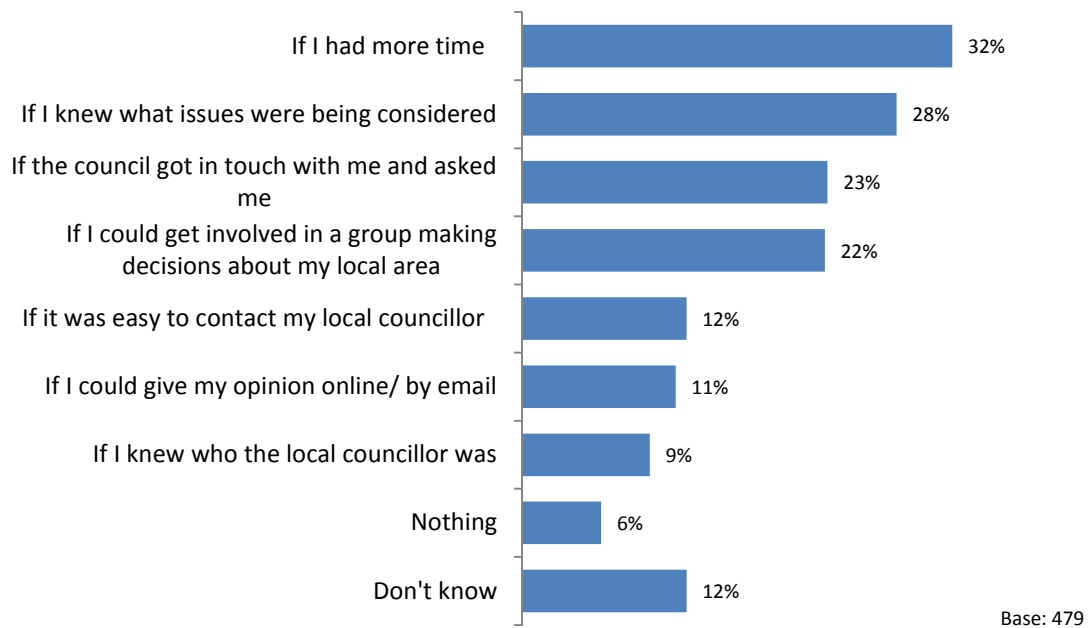
Figure 9 . Extent agree that can influence decisions affecting local area



Having the ability to personally influence decisions that affect their local community is important to 84% of residents overall; 50% state it is 'very important'. Women are more concerned with having personal influence compared to men (90% vs. 78%, respectively), although there is very little differentiation across the remaining demographic profiles.

Residents suggest that personal involvement in local decision making might be possible if they had more time and if they were aware of the issues that were being considered; around three in ten indicate this.

Figure 10. Enablers to influencing local decisions



Around two in ten residents suggest that they would be willing to get involved in local decision making if they are asked to do so by the council and/or if they could get involved in a local decision making group.

Being more knowledgeable about what is happening in their local area would also enable residents to influence decisions; their comments suggest they simply do not know what is going on, and therefore are unable to participate.

“Let us know what going on and work around the local people that go to work.”

“Making people more aware so that they can have a greater say in their area decision making.”

“A place locally that I could go to find out about things going on in the area.”

“Should be more consultation with the residents... (advertise) by posters and (hold) meetings.”

By comparison, residents spoken to at the events and focus group discussion indicate that they have previously been involved in local consultation exercises, similar to this one, and that they have yet to see any tangible improvements and/or implementation of their ideas and suggestions.

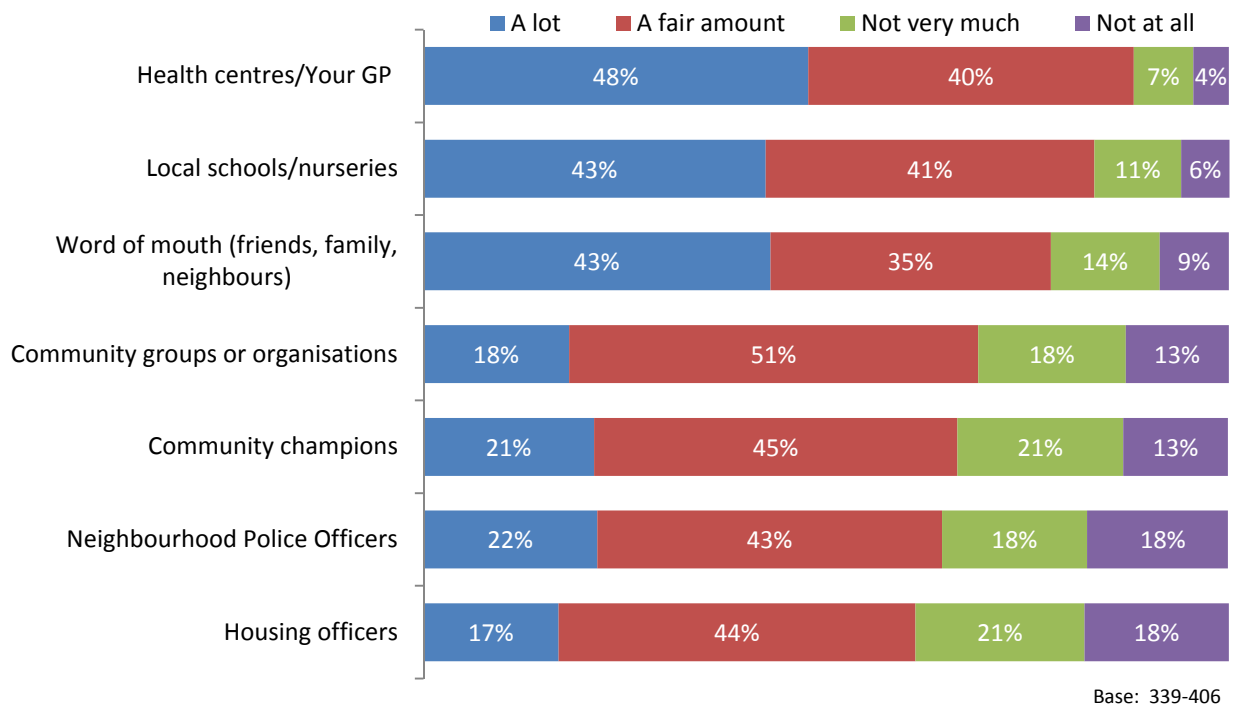
“They always come to us to ask for our opinion then never come back to implement it.”

“I think this is the problem with local services. They come to us saying they are going to do something. If they do it they should tell us, if they don’t they should tell us... unless we have a relationship with our council... like a forum to meet and discuss some of the issues that have been raised and why it has not been addressed.”

3.4. Trust in local places or people to provide information

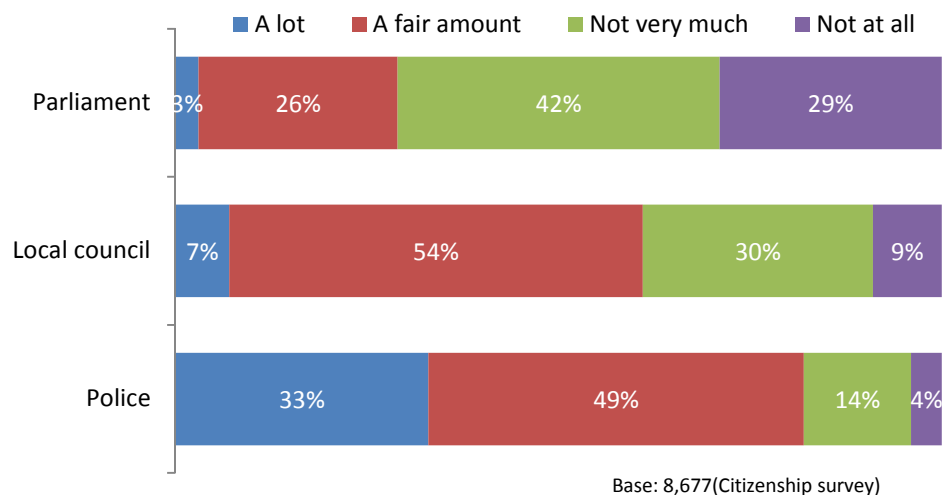
Health centres and GP’s, local schools/nurseries and word of mouth discussions are felt to be the most trusted sources of information on local services; some eight or nine in ten Opportunity Area residents suggest they trust these structures locally (Fig 11a). These results look even more favourably when put into the context of general levels of trust in key organisations nationally (Fig 11b) 38% for instance saying that they do not trust their local council.

Figure 11a. Extent trust places and people to provide information about local services



By comparison, neighbourhood police officers and housing officers are the least trusted sources of local information; around four in ten residents indicate this. Given residents’ views on housing repairs and maintenance (as seen in section 3.2) and on their views of the local housing office (section 3.2.3), it is perhaps not surprising that housing officers fall to the bottom of this list.

Figure 12b. General levels of trust in institutions (National Citizenship Survey)



During discussions with community group representatives it was suggested that, given the multi-cultural nature of the area and English often not being the first language, local hubs/community groups and organisations provide a vital support network for specific cultural communities. The focus group discussion also identified that key 'spokespeople' also provide support and open up opportunities to access to local services. These spokespeople are able to empathise with their community, speak the native tongue, and can subsequently make contact with the relevant service in order to progress matters or initiate a service.

We noted that the term Community Champion had limited formal brand recognition with respondents, with residents living outside of the White City estate not being familiar with the programme.

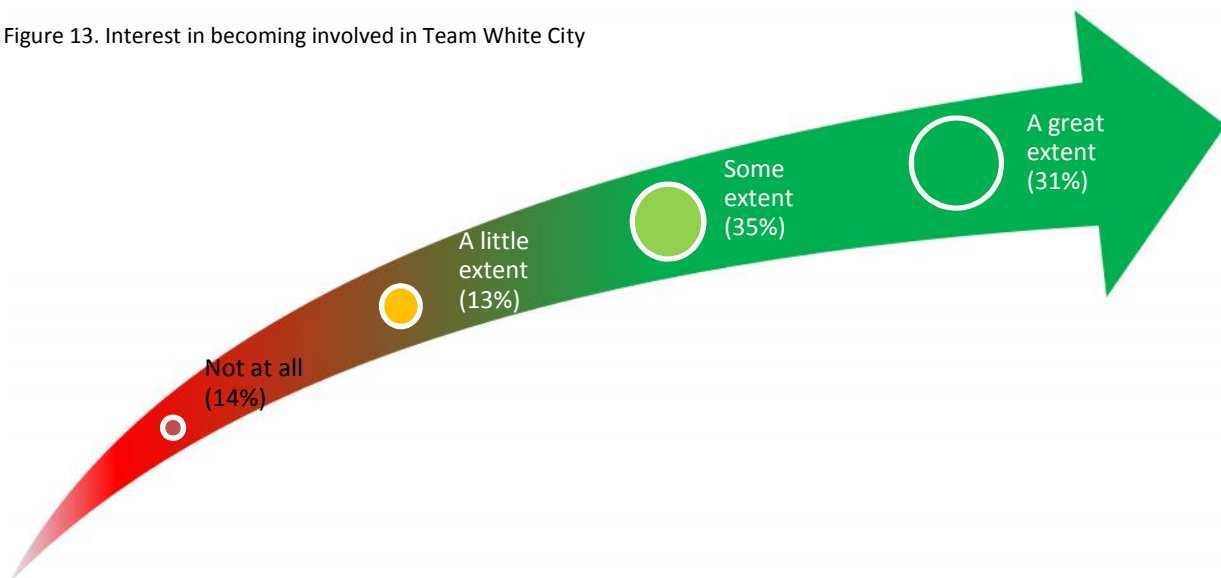
3.5. Interest in getting involved with Team White City

3.5.1. Interest in becoming involved

Residents were told that the Government has awarded the area ‘Community Budget status’ which means that local residents, like themselves, the Council, and other local organisations they work with will all be working jointly to decide on local service provision and spending.

When asked about the extent to which they would personally like to be involved in this process, two-thirds of residents expressed an interest in becoming involved; 31% said they would like to be quite heavily involved and a further 35% suggested they would be happy to be involved to some extent. Proportionally more women would like to be involved than men (72% vs. 59%, respectively).

Figure 13. Interest in becoming involved in Team White City



The key motivators for becoming involved are the ability to have a real say in local changes and improvements. There is a sense that, as residents they know best. They are keen to ensure that resources are allocated effectively:

“We live here, so we would like to have a say on what gets done.”

“I would want to ensure the money is spent properly.”

“We have more knowledge on what things need spending on, so we can better inform the council on how the money should be spent.”

“It’s my local area, and I’d like to decide where the money is going.”

By comparison, the main reasons for not wanting to be involved are a perceived lack of influence and a perceived lack of time; some residents are doubtful that their opinions would have any impact when it comes to financial planning.

“It doesn’t matter what you say, they will just do what they want.”

“They don’t do what the community says, and they don’t keep their promises.”

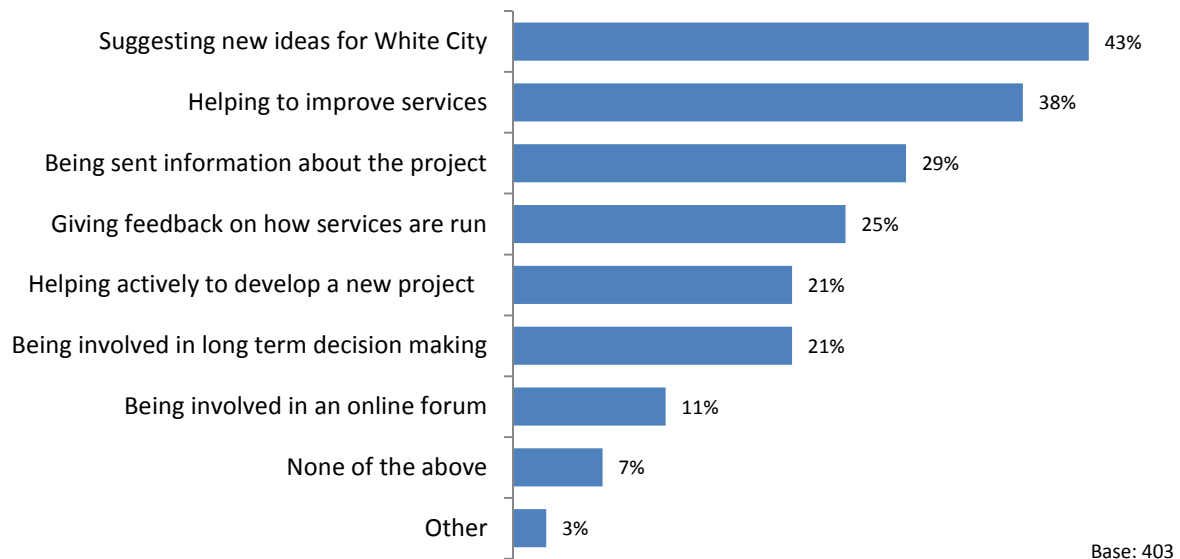
“Because I know they will not do what they are supposed to do.”

“I don’t really have enough time, since I have to work to support my family.”

These views are again reflective of those aired during qualitative discussions around the perceptions (or realities) that consultation simply does not lead to service implementation or service improvements.

For those expressing at least some interest in becoming involved, suggesting new ideas for the area and helping to improve services score most strongly; around four in ten residents indicate these.

Figure 14. Means of involvement



Views are broadly similar across each of the demographic sub-groups.

3.5.2. Children and young people

Residents and community group representatives suggest that any consultation exercise that focussed on the provision of leisure services for children and young people should also encompass their views. However, they are also aware of the difficulty in engaging with this particular group and suggest that relationship building is key, through continued interaction to build up their trust.

“I think you have to develop relations with kids, you can’t just ask them because they won’t tell you straight away, you have to spend some time with them.”

“Relationship building, age specific.”

“Maybe the way we try and pass on information to youths, as adults we need to recognise we may not be saying it in the right format so we may need to actually listen to them or give things to them for them to settle the way they think about it, try and find a way of giving back.”

3.5.3. Tiers of engagement

When residents were asked to what extent they would like to be part of Team White City, the results display quite a polarised picture. As seen in this section, almost one-third of residents claim they would like to be part of the programme ‘to a great extent’ (31%) although over one quarter reject the idea or showed little intent (27%).

The NDC evaluation cites such polarisation towards involvement as common: “evidence suggests that future regeneration programmes should ensure that a variety of opportunities for participation are offered at a range of levels, accepting the fact that only a minority of residents will engage in formal decision making processes.²²”

The Team White City project should have realistic expectations of the numbers of residents who will become involved at a formal level. Efforts should be made to develop a wider programme of interventions, which offer a menu of ways to engagement for local residents. Opportunities to be involved would range from frequent, formal involvement within working groups to less formal involvement through one-off events.

‘Tiers of engagement’ which compliment and support each other will present levels of opportunities to be involved and enable people who cited time as a major barrier to influencing decisions (32%) to engage in the programme.

Reflecting on the results of the quantitative survey, on-line (44%) and face-to-face (34%) methodologies are suggested as relatively popular ways in which to consult with local people. If such methods are included as a possible ‘tier of engagement’ we would suggest careful consideration and planning of consultations over the lifetime of the programme so as to avoid further ‘survey fatigue’ – a perception already clearly present within the community.

Where consultations are to be held, we would also suggest communicating progress either immediately prior to or simultaneously, providing residents with ‘proof’ that they are being listened to and highlighting the changes and/or developments that have been implemented as a direct result of a previous consultation.

It should also be noted here that ‘grass-roots’ led activities appear to hold far greater sway with residents than activities that ‘appear’ to be council or other authority body led. This was evident from the two events held during the fieldwork period of this study, with the Community Information and Fun Day being hugely popular with residents from a wide range of multi-cultural backgrounds. This compared to a relatively low turnout at the Team White City event.

Participation events that present one-off opportunities to engage with decision-making will encourage wider involvement with sections of the local community who do not feel they have time to commit formally. Methods such as ‘world cafes’, ‘21st century town meetings’ and ‘appreciate enquiry’ present informal approaches to engaging with larger numbers of participants. The NWL Public Health Team has experience of planning and facilitating such events.

Residents and stakeholders participating in the focus group discussion highlight the myriad of groups and initiatives (Big Local, Team White City, Community Champions, Neighbourhood Forum, Horn of Africa, etc) now operating within the local community and a level of confusion as to ‘who does what’.

²² Involving local people in regeneration: Evidence from the New Deal for Communities Programme. The New Deal for Communications National Evaluation, Final report, Volume 2)

These stakeholders believe it is important, therefore, to map out the community groups and organisations that are operating within the area so that effective dissemination of information can occur.

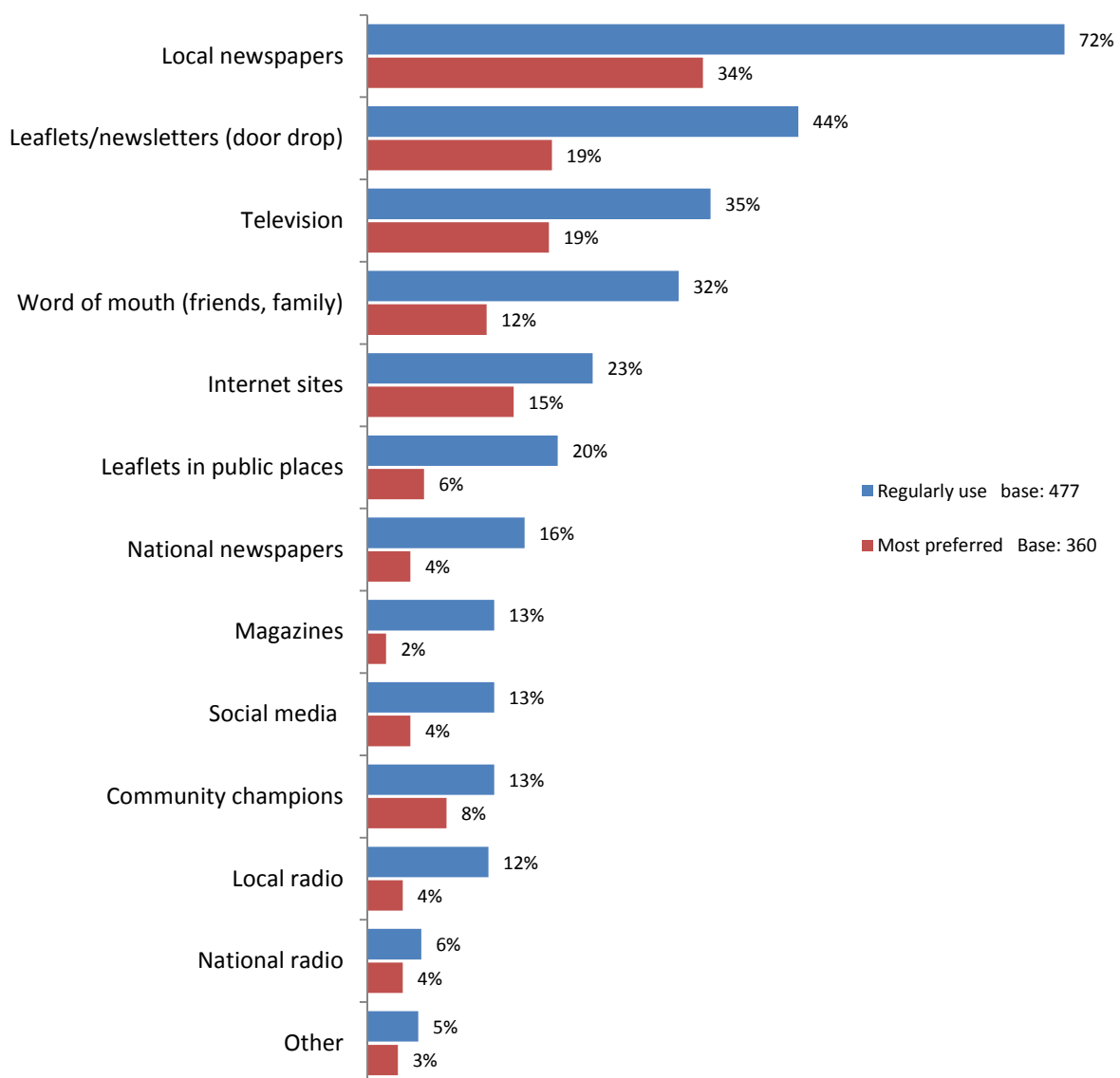
3.6. Communication preferences and use of online channels

3.6.1. Types of media regularly used to access local information

Local newspapers are most important to residents when it comes to regularly accessing local information (72%) followed by door dropped leaflets and newsletters (44%). Interestingly, around one in three residents find out about local information through word of mouth, suggesting local people can be effective communicators in the area.

Local newspapers are also the **most preferred** way to access local information.

Figure 15. Regular access to local information

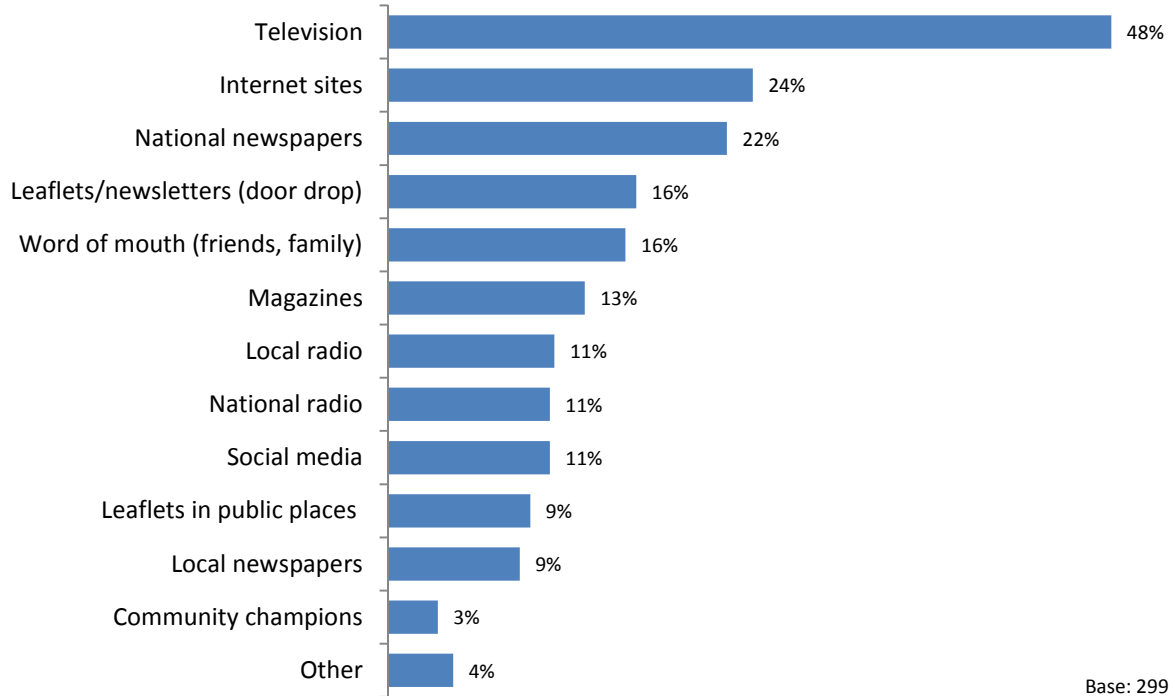


Views are broadly similar across each of the demographic sub-groups.

3.6.2 Access to other sorts of information (non local)

When it comes to accessing other information, television is by far the most important source of reference for residents. The internet and national newspapers are also key information sources.

Figure 16 . Accessing other information

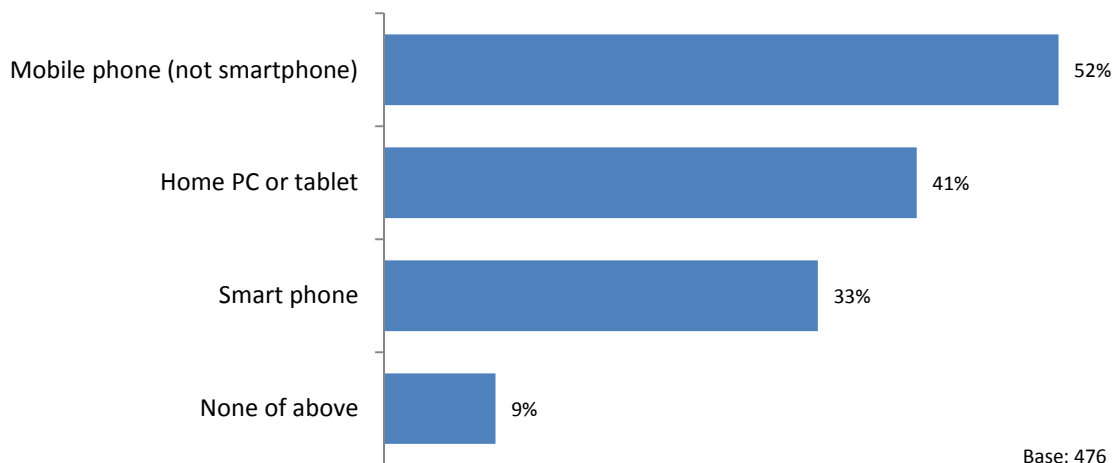


Interestingly, but perhaps unsurprisingly, those age 55 and over prefer leaflets and newsletters dropped through their door, or finding out information from family, friends and neighbours than using the internet or reading the national newspapers.

3.6.3 Technology ownership

Overall, nine in ten residents have access to a mobile phone, home PC or tablet computer. 85% have a mobile phone; 33% have a smart phone. Two fifths have a home computer or tablet.

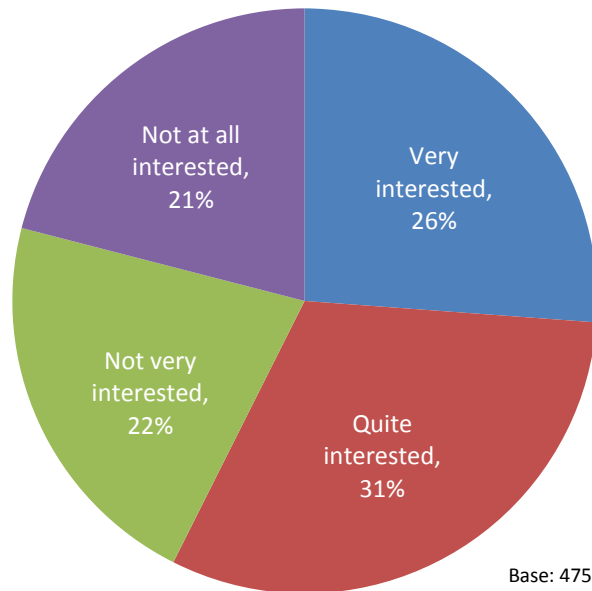
Figure 17. Technology ownership



3.6.4. Interest in giving views via an online service

Interest in using an online service where residents can give their views and opinions about local services is split; 57% who are interested compared to 43% who are not. Overall interest rises to 72% for owners of smart phones and 82% for those with a home PC or tablet device. This falls to 29% for those without a mobile phone or one of these devices.

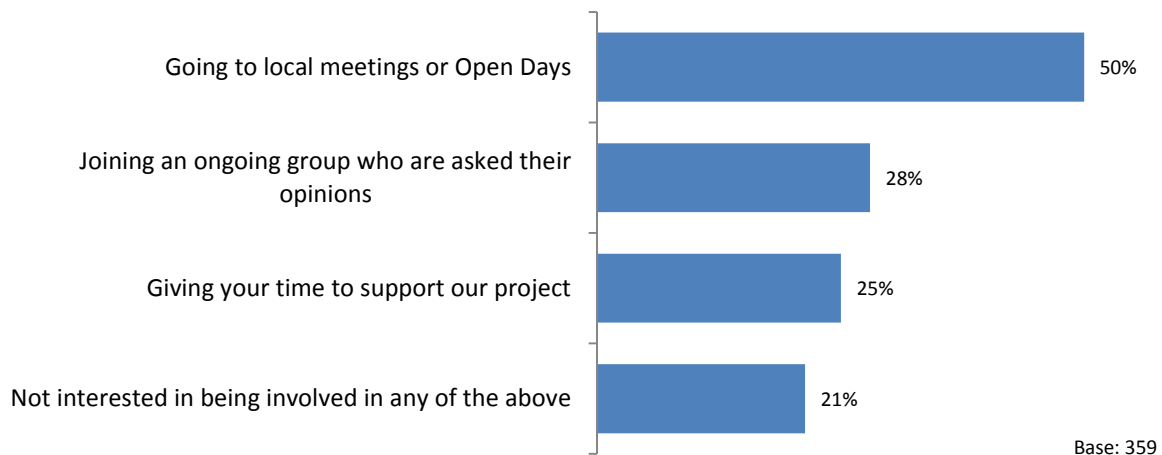
Figure 18. Online service interest



3.6.5. Future contact and participation

For those residents who have indicated at least some interest in becoming involved in the Team White City project, one half would be interested in attending local meetings and open days. Almost three in ten would be willing to join an ongoing group that asks their opinions (rising to 38% amongst those from a white ethnic background) and a quarter would be willing to give their time to support the project in other ways.

Figure 19. Preferred route to participation



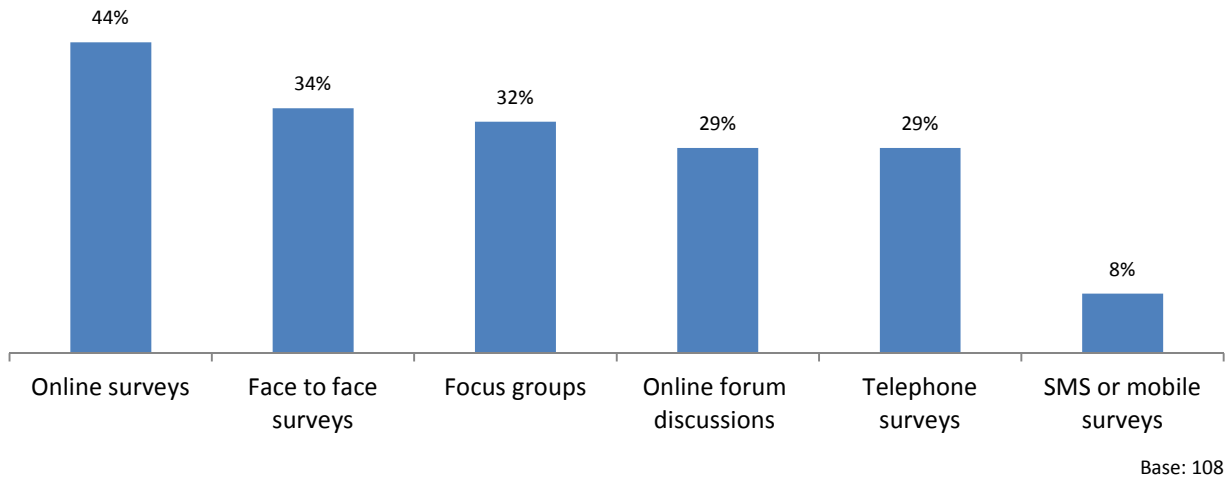
However, whilst one fifth have indicated they might be willing to support the Team White City project, they are not interested in being involved in the ways described above. This figure rises to 36% for those expressing 'a little extent' in being involved.

3.6.6. Membership of an ongoing opinion group

For those residents willing to give their views in an ongoing way, some two-fifths suggest they would complete online surveys whilst around a third would be happy to participate in face-to-face surveys and focus group discussions.

Three in ten would be willing to give their views via online forums and telephone surveys.

Figure 20. Preferred routes to share opinions



Appendices

1. White City Opportunity Area: a short profile

The wider White City Opportunity Area covers a total of 111 hectares in the North Hammersmith area. In the south are Shepherd's Bush town centre and the Westfield shopping development. North of that is the core area for future development which includes the Ariel Way industrial estate, former dairy and warehouse sites, and various BBC properties; together with the BBC TV Centre and Media Village. In the west are three housing estates, the largest of which is the White City estate. Unless otherwise stated, the statistics in this section relate to the wider White City Opportunity Area.

The White City Estate Profile (London Borough of Hammersmith and Fulham, 08/10/2009) states the White City estate is the second most deprived neighbourhood in Hammersmith and Fulham. There is a high concentration of young people (30% of residents aged under 18 years and 2:1 adult to child ratio) and a predominance of family households (51%) with a much higher proportion of single parents with dependent children (20%) than the Borough average (7%).

- The area's population stands at 9,500 residents and there are 4,200 households.²³ Within this, there are 2,050 households on the White City Estate.
- The largest groups are 'single adult' households accounting for 29% of all households, 'lone parent' with one or more dependent children accounting for 15%, 'couple family' consisting of one or more dependent children 13% and single elderly households 11%.²⁴
- The predominant resident segmentation is 'Deprived Families in Public Housing'.²⁵
- There is a high concentration of young people in the area as 28% of residents are aged under 18 years and 2.5:1 Adult to Child ratio.²⁶
- The area is ethnically diverse with 46% of residents coming from minority (non-white) backgrounds, predominantly Black African (Somalian and Eritrean) and Black Caribbean. Some 5% of residents are of Irish ethnic background.²⁷
- On the White City Estate, 29% of working age residents receive Income Support, Job Seekers Allowance or Employment and Support Allowance / Incapacity Benefits (WCOA 22% and borough 13%).²⁸ Job Seekers Allowance (JSA) claimant rate on White City estate is 9.9% which is more than double the borough average at 4.2% (WCOA 7.5%).
- Long-term unemployment (over 6 months) is a key issue and accounts for 53% of all claimant residents (borough average 46%). Youth unemployment represents 25% of all JSA claimants (borough average 21%).²⁹

²³ ONS Mid-year population estimate, 2010

²⁴ Census 2001

²⁵ LBH&F Customer Segmentation, 2010

²⁶ ONS Mid-year population estimate, 2010

²⁷ Census 2001

²⁸ DWP 2011

²⁹ JSA Claimant Count 2011

- 10.0% of the working age population is claiming Employment and Support Allowance (Incapacity Benefit) compared to the borough average of 6.6% Figure 1).
- Residents in the area have poorer general health compared to both the borough and London averages, with 32.5% in the WCOA not reporting to have good health compared with 27% in H&F as a whole.³⁰ There are 17.1% of residents suffering from limiting long-term illness, which is at the higher level than the borough as a whole with 14.7%.³¹

2. Literature review

The White City area has been the focus of a number of research studies over the past five years. There is also a wider body of general research and evaluation on community engagement readily available. We believe it would be important to review these studies and highlight key, relevant findings and appropriate learning points for devolved decision-making and community engagement for Team White City.

The main studies which the research team has been made aware of and we believe have relevance are listed below:

- Connected Care Hammersmith and Fulham, produced by Turning Point (January 2011)
- More than a community voice on White City, produced by Martin Bontoft (December 2009)
- Healthy Foundations Life-Stage Segmentation Model, Department of Health
- Top 10 tips for engagement, Raising Awareness of Lung Cancer Symptoms, produced jointly by NHS Hammersmith and Fulham, White City Residents' Association and The HUB Marketing Ltd.
- Involving local people in regeneration: Evidence from the New Deal for Communities Programme Final report volume 2, produced by Sheffield Hallam University for Communities and Local Government (March 2010)
- Communities in the driving seat: a study of Participatory Budgeting in England. Final report, Department for Communities and Local Government (August 2011)

Connected Care Hammersmith and Fulham

In 2009, Turning Point was commissioned by NHS Hammersmith and Fulham, the London Borough of Hammersmith and Fulham and the Department of Health to carry out a Connected Care project for 16 months. The report commissioners were keen to support innovative joint-working across health, housing and social care services with the aim to deliver better outcomes for the population and put the community at the heart of commissioning.

The report puts forward 10 recommendations derived from the headline findings and consultation with commissioners, stakeholders, community researchers and other residents. The recommendations include two 'quick wins,' which would bring high-profile, positive changes to the White City area in line with the community's views and demonstrate that residents are actually being listened to:

³⁰ This figure - those not reporting to have good health - includes responses of 'fairly good'

³¹ Census, 2001

- The Astroturf in White City is an important resource for local residents, particularly young people. It is in a degraded condition and in need of significant repair. For local people it symbolises their disengagement from local decision-making; despite numerous complaints its condition has continued to be allowed to deteriorate. The report recommends working with the local community to ensure their requirements for the Astroturf are reflected in the tendering process, prior to any competitive dialogue stage of a procurement process.
- Residents on neighbouring estate Edward Woods Estate were particularly dissatisfied with the quality of services available and the closure of a local housing office. The degradation of services has caused resentment and contributed to a sense of abandonment by service providers. The report recommends that service providers have an active presence on the estate, potentially at the local community centre, and that this centre should become a neighbourhood hub and location of service surgeries with signposting, advice and support. Setting up a working group to oversee the development of the hub would open a three-way dialogue between management, estate residents and the council.

Other recommendations include:

- a more enhanced role for the local community and voluntary sector
- local hubs for services support
- single contact for services across a range of needs
- redefined remit for housing officers

More than a community voice on White City

A small qualitative research study was commissioned by the Communications and Community Engagement teams of NHS Hammersmith and Fulham in December 2009. The purpose of the study was to provide insight and an evidence-base for communicating better with residents. Ultimately this was expected to provide better information for people with low literacy levels, giving them an understanding of how the NHS works and how to access services and treatment to which they were entitled. Ethnographic methods – observational and conversational – were used which centred on interviewees’ experiences of healthcare locally, but was largely determined by what they wanted to say. The team spent time with the interviewees in their homes and listened to their problems, issues, motivations and beliefs.

To achieve better engagement and communications within the community, the key findings were to consider:

- the ‘tribal’ nature of the communities living in the estate
- multiple pressures which new entrants struggle with
- sophisticated use of information and communications technologies to keep in touch with home communities
- low-level mental health issues including isolation, depression and anxiety
- increased reliance on peer support: ‘Sutura’ – a trust in things close to your culture
- a polarisation of trust – very few organisations were trusted, individuals were more readily trusted.

Healthy Foundations Life-Stage Segmentation Model

The Healthy Foundations Life-Segmentation Model uses consumer insight to inform local and national health improvement activities, and deliver interventions that will support the achievement of the key public health priorities. The deeper level of understanding of both motivations and environmental influences provided by the Healthy Foundations survey can also be used to:

- develop local area agreements;
- develop NHS and local authority capacity to deal with identified local health needs; and
- provide a key tool in delivering excellent commissioning.

The model is a sophisticated tool that will:

- deliver more tailored and cost effective interventions
- deliver better targeting of efforts and resources
- inform and assist commissioning
- help the population to make positive behavioural changes
- identify early interventions to prevent unhealthy behaviours.

Top 10 tips for engagement

The White City Community Champions were commissioned to deliver the national public health campaign, *'Be clear on cancer'* at a local level in Hammersmith and Fulham. This paper highlights some of the lessons learnt deriving from the project for future engagement with the Community Champions and commissioners to lead to better engagement, co-design and communication with the local population. The core recommendations include:

- Consider local communities as co-designers: involve them from the start of the process
- Use local people to deliver messages to ensure sustainability
- Public health campaigns need to be an ongoing process to realise meaningful impact
- Appreciate the value of community engagement work
- Adequately equip, train and resource community engagement projects
- Establish two-way communication channels with end-users.

Involving local people in regeneration

The New Deal for Communities (NDC) Programme aimed to 'reduce the gaps between some of the poorest neighbourhoods and the rest of the country.' From the outset, the NDC Programme had a strong focus on community engagement informed by a theory of change, which assumes that the multiple deprivations experienced by residents in the areas leads to social exclusion and low levels of social capital. A participative approach would help to overcome these problems and make services more responsive to local needs. Lessons from the national evaluation suggest:

- A clear strategy needs to be developed early on, underpinned by community development and capacity building
- A variety of opportunities for participation is offered at a range of levels

- An acceptance that only a minority of residents will engage in formal decision-making process
- Developing capacity from the 'bottom up' may help to encourage more residents to participate

3. Community Engagement and the White City Community Champions

In North West London, the community engagement approach in Public Health is based on the assumption that the staff do not necessarily have the solutions. Instead they facilitate the process of empowering residents and communities to articulate the problems and come up with their own solutions. As a result, the principle aims of the team have been capacity building of local estates, neighbourhoods and individuals to work together with local providers and commissioners to design and develop local services so that these services are able to respond effectively to the increasing demands of local health and social care needs.

This approach directly reflects the Government's emphasis on community involvement and local ownership as highlighted in the Localism and Big Society proposals for 'promoting and enabling local autonomy and supporting local people so that they are able to take a proactive role in identifying issues, co-designing solutions and supporting the delivery of services in their local area.' NICE Guidance (2008) highlights the effectiveness and financial savings of community engagement and also suggests that this approach may lead to improvements in health and wellbeing. The Marmot review³² also emphasises that "effective local delivery requires effective participatory decision-making at a local level which can only happen by empowering individuals and local communities."

The Community Champions' Programme (formally the Well London Health Champions) recruits and trains local volunteers to help connect residents with local services. The champions work closely with local organisations such as the NHS, council, and charities to undertake research, gather insight, communicate health messages and signpost residents to local services, helping organisations to understand their communities better. The work of the champions includes:

- Shaping and influencing local service delivery
- Encouraging community cohesion
- Developed an information hub
- Stimulating volunteering
- Building knowledge and skills
- Generating employment opportunities

The Community Champions' Programme was initiated in the White City estate and is now currently being extended to four other estates across the North West London region in particular, Edward Woods Estate as well Church Street and Mozart Estates in Westminster.

³² Marmot et al, 2010

4. White City initiatives

The scale of deprivation and health problems that exist on the White City estate is reflected in the number of initiatives in the local area over the recent years. The list below does not attempt to be an exhaustive list but indicates the level of attention the area has seen from health and regeneration initiatives:

- Well London programme – The Well London programme focused on promoting health and wellbeing, healthy eating choices and promoting access to open spaces and increasing physical activities. The programme engaged with local residents in White City by talking with them to finding out more about life in their neighbourhood – what’s good about the place and what they would like to see improving. Local volunteers were then involved in the designing and running local projects.
- Connected Care model - Turning Point is a social care organisation, which provides services for people with complex needs. In 2009, Turning Point was commissioned by NHS Hammersmith and Fulham, the London Borough of Hammersmith and Fulham and the Department of Health to carry out a Connected Care project for 16 months to reconfigure health, housing and social care services to meet local needs more effectively. A team of 16 community researchers consulted with over 900 residents in 2010.
- Canberra Centre for Health – a health centre, which opened in January 2010. The Centre was developed as an interim arrangement to provide health services in the White City area. It is expected that the Health Centre will be incorporated into the White City Collaborative Care Centre once built.
- White City Collaborative Care Centre – A £15 million state of the art facility to be located in White City in Bloemfontein Road. The centre will provide a wide range of health and social care services, and have an initial GP capacity to register 10,000 patients. Construction work started in summer 2012, with the centre opening in January 2014. A series of consultation and engagement events will be developed to help inform and shape services within the Centre.
- White City Opportunity Area – the area stretches from White City to Shepherd’s Bush and has been identified as a major reservoir of brownfield land with significant capacity to accommodate new housing, commercial and other developments linked to existing or potential improvements to public transport accessibility. As a result, the London Borough of Hammersmith and Fulham, the Mayor of London (GLA) and Transport for London (TfL) have produced a planning framework for the area. The draft framework underwent two public consultations in 2011.
- Big Local - £1million of Lottery funding will be invested in the local area over the next 10 years. The charitable trust set up to administer the fund is currently asking residents how they would like to spend the money to improve the local area.

5. Quantitative questionnaire



Team White City Survey 2012

This survey is designed to find out how residents feel about getting more involved in how their local area is run.

It is being administered jointly by a team of local volunteers called Community Champions and an independent market research company called Research by Design Ltd. The project is being run on behalf of the Council. All information on this questionnaire remains confidential and your identity will not be disclosed to any person outside the research team.

Q1 SHOWCARD 1

Within which age band do you fall please?

- 16 to 24 1 35 to 44 3 55 to 64
 25 to 34 2 45 to 54 4 65+

Q2 SHOWCARD 2

Which one of the following best describes your ethnic origin?

- White - British/Irish/Other 1 Mixed - White & Black/Asian/Other
 Black - Caribbean/African/Black British/Other 2 Chinese
 Asian - Indian/Pakistani/Bangladeshi/Asian 3 Other (please state)
 British/Other

Q3 CODE Gender

- Male 1 Female

INTERVIEWER: CHECK QUOTAS

Q4 And before we carry on, can I just check that you currently live in the White City Opportunity Area (SHOW MAP)

- Yes 1 No (CLOSE)

Q5 SHOWCARD 3

To what extent would you agree or disagree that people in this neighbourhood pull together to improve their neighbourhood?

- Definitely agree 1 Definitely disagree.....
 Tend to agree 2 (Nothing needs improving)
 Tend to disagree 3 (Don't know).....

Q6 And why do you say that?

Q7 On the whole, do you think that over the past two years this area has got better or worse to live in or would you say things haven't changed much?

Got better 1 Not changed much
Got worse 2 (Have lived here less than 2 years)

Q8 SHOWCARD 4

How satisfied are you with local public services? By services, we mean everything that the Council or other public agencies provide such as bin collection, health services, schools and leisure facilities)

Very satisfied..... 1 Fairly dissatisfied
Fairly satisfied 2 Very dissatisfied
Neither satisfied nor dissatisfied 3 Don't know/can't say

Q9 SHOWCARD 5.

I will now show you a list of local services. Could you take a look at the list and tell me which you think need to be improved. MULTICODE.

And secondly which of these MOST need improving? SINGLE CODE

	All that need improving	One <u>most</u> in need of improving
Schools	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Children's leisure	<input type="checkbox"/> 2	<input type="checkbox"/> 2
Health services	<input type="checkbox"/> 3	<input type="checkbox"/> 3
Adult leisure	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Adult education	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Unemployment help/training	<input type="checkbox"/> 6	<input type="checkbox"/> 6
Housing repairs and maintenance	<input type="checkbox"/> 7	<input type="checkbox"/> 7
Benefit payments	<input type="checkbox"/> 8	<input type="checkbox"/> 8
Neighbourhood police	<input type="checkbox"/> 9	<input type="checkbox"/> 9
Rubbish collection	<input type="checkbox"/> 10	<input type="checkbox"/> 10
Public spaces (e.g. parks)	<input type="checkbox"/> 11	<input type="checkbox"/> 11
Street cleaning	<input type="checkbox"/> 12	<input type="checkbox"/> 12
Family support	<input type="checkbox"/> 13	<input type="checkbox"/> 13

Q10 And why do you say { } needs most improvement? INSERT SERVICE THAT NEEDS MOST IMPROVEMENT

Q11 SHOWCARD 6

Do you agree or disagree that you can influence decisions affecting your local area?

- Definitely agree..... 1 Definitely disagree..... 4
Tend to agree 2 Don't know 5
Tend to disagree 3

Q12 How important is it for you personally to feel that you can influence decisions in your local area? Would you say it is...READ OUT

- Very important 1 Or not at all important 4
Quite important 2 (Don't know) 5
Not very important 3

Q13 SHOWCARD 7

Here are some things that other people have said would make it easier for them to influence decisions in their local area. Which, if any, of these might make it easier for you personally to influence decisions?

MULTICODE. PROMPT IF NECESSARY: For instance, local people were able to influence the services in the new Health Centre Development

- If I had more time 1
If the council got in touch with me and asked me 2
If I could give my opinion online/ by email 3
If I knew what issues were being considered 4
If it was easy to contact my local councillor 5
If I knew who the local councillor was 6
If I could get involved in a group making decisions about my local area 7
Nothing 8
Don't know 9

Q14 Can you think of something else - that is not on the list I just showed you - that would make it easier?

The government has awarded our local area Community Budget status. This means local residents like you, the Council and the organisations they work with will be working jointly to find ways of deciding how local money is spent.

Q15 SHOWCARD 8

To what extent would you like to be part of this?

- A great extent 1 Not at all
- Some extent..... 2 (Don't know)
- A little extent 3 (I would need more information)

Q16 Why do you say that?

ASK IF Q15=1,2,3:

Q17 SHOWCARD 9

In which of the following ways would you be interested in getting involved? MULTICODE.

- Helping to improve services 1
- Suggesting new ideas for White City 2
- Being sent information about the project 3
- Giving feedback on how services are run 4
- Being involved in an online forum 5
- Helping actively to develop a new project 6
- Being involved in long term decision making 7
- None of the above 8
- Other (specify) 9

Q18 SHOWCARD 10

Thinking generally, which of the following do you use to regularly access (a) local information or (b) other

sorts of information? MULTICODE.

And which of these is your MOST preferred overall? SINGLE CODE

	Used for LOCAL	for	Used for OTHER	SINGLE most preferred
Local newspapers	<input type="checkbox"/> 1		<input type="checkbox"/> 1	<input type="checkbox"/> 1
National newspapers	<input type="checkbox"/> 2		<input type="checkbox"/> 2	<input type="checkbox"/> 2
Magazines	<input type="checkbox"/> 3		<input type="checkbox"/> 3	<input type="checkbox"/> 3
Television	<input type="checkbox"/> 4		<input type="checkbox"/> 4	<input type="checkbox"/> 4
Local radio	<input type="checkbox"/> 5		<input type="checkbox"/> 5	<input type="checkbox"/> 5
National radio	<input type="checkbox"/> 6		<input type="checkbox"/> 6	<input type="checkbox"/> 6
Social media (e.g. Twitter, Facebook)	<input type="checkbox"/> 7		<input type="checkbox"/> 7	<input type="checkbox"/> 7
Other Internet sites	<input type="checkbox"/> 8		<input type="checkbox"/> 8	<input type="checkbox"/> 8
Leaflets or newsletters through door	<input type="checkbox"/> 9		<input type="checkbox"/> 9	<input type="checkbox"/> 9
Leaflets in public places (e.g. GP surgeries, library)	<input type="checkbox"/> 10		<input type="checkbox"/> 10	<input type="checkbox"/> 10
Community champions	<input type="checkbox"/> 11		<input type="checkbox"/> 11	<input type="checkbox"/> 11
Word of mouth (friends, family, neighbours)	<input type="checkbox"/> 12		<input type="checkbox"/> 12	<input type="checkbox"/> 12

Other (please specify):

13

13

13

Q19 SHOWCARD 11.

I would like to ask you a question about trust. How much do you trust the following people and places to provide you with information about local services? Do you trust them a lot, a fair amount, not very much or not at all?

	A lot	A fair amount	Not very much	Not at all
Local schools/nurseries	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Neighbourhood Police Officers	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Community groups or organisations	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Community champions	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Housing officers	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Health centres/Your GP	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Word of mouth (friends, family, neighbours)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

Q20 SHOWCARD 12A

Which of the following do you personally use on a regular basis? READ OUT. MULTICODE

Smart phone 1 Home PC or tablet..... 3
Other mobile phone 2 None of above..... 4

Q21 To what extent would you be interested in using an online service where you could give your opinion about local services? SINGLE CODE

Very interested 1 Not very interested 3
Quite interested 2 Not at all interested 4

ASK IF Q21=NOT INTERESTED

Q22 Can you tell me why you say that please?

ASK IF Q15=1,2,3: (THOSE INTERESTED IN GETTING INVOLVED)

Q23 We are currently in the process of building up a list of residents who want to help. Would you be happy for us to recontact you about getting involved in the following ways...? READ OUT. MULTICODE

Going to local meetings or Open Days 1
Joining an ongoing group who are asked their opinions 2
Giving your time to support our project 3
(Do not contact me about any of above) 4

ASK IF Q23=2 (ONGOING CONSULTATION):

Q24 SHOWCARD 12B

In which of the following ways would you like to give your opinions in an ongoing way? MULTICODE

Online surveys 1
Online forum discussions 2
Focus groups 3
Face to face surveys 4

- Telephone surveys 5
- SMS or mobile surveys 6

ASK IF Q23=YES TO ANY:

Q25 In which way would you most like to be contacted about being involved? READ OUT. SINGLE CODE

- | | | | |
|------------------------------------|----------------------------|---|-----------------------------|
| By telephone | <input type="checkbox"/> 1 | } | Ask for telephone: _____ |
| By text message | <input type="checkbox"/> 2 | | Ask for email: _____ |
| By email | <input type="checkbox"/> 3 | → | |
| By letter | <input type="checkbox"/> 4 | } | Ask for full address: _____ |
| Face to face (at home) | <input type="checkbox"/> 5 | | _____ |
| Face to face (at event or meeting) | <input type="checkbox"/> 6 | | _____ |
| Other (specify) | <input type="checkbox"/> 7 | | _____ |

Q26 What is your home postcode please? _____

Q27 SHOWCARD 13

How long have you lived in the local area?

- | | | | | |
|--------------------------|----------------------------|--------------------|----------------------------|---------------------|
| Less than 12 months..... | <input type="checkbox"/> 1 | 3 to 5 years..... | <input type="checkbox"/> 3 | 11 to 20 years..... |
| 1 to 2 years..... | <input type="checkbox"/> 2 | 6 to 10 years..... | <input type="checkbox"/> 4 | 21+ years..... |

Q28 SHOWCARD 14

How would you describe your employment status?

- | | | | | |
|---------------------------------|----------------------------|---------------------------------|----------------------------|---|
| Working full time | <input type="checkbox"/> 1 | Student..... | <input type="checkbox"/> 4 | Unemployed and not looking for work |
| Working part time | <input type="checkbox"/> 2 | Retired..... | <input type="checkbox"/> 5 | Other |
| Looking after home/family | <input type="checkbox"/> 3 | Unemployed and looking for work | <input type="checkbox"/> 6 | |

May I take your name and phone number so that my supervisor from Research by Design can check that I have conducted this survey in an appropriate way? **IF NO PHONE, ASK FOR ADDRESS.**

Q29 Name _____

Q30 Phone _____

Q31 Would you also be interested in attending a focus group to further discuss the findings from this survey?

- Yes..... 1
- No..... 2

Thank you very much for taking part in this survey.

I confirm that I have carried out this interview face-to-face with the above named person and that I asked all the relevant questions fully and recorded the answers in conformance with the survey specification and within the MRS Code of Conduct.

Q31 Signature
Q32 Date

