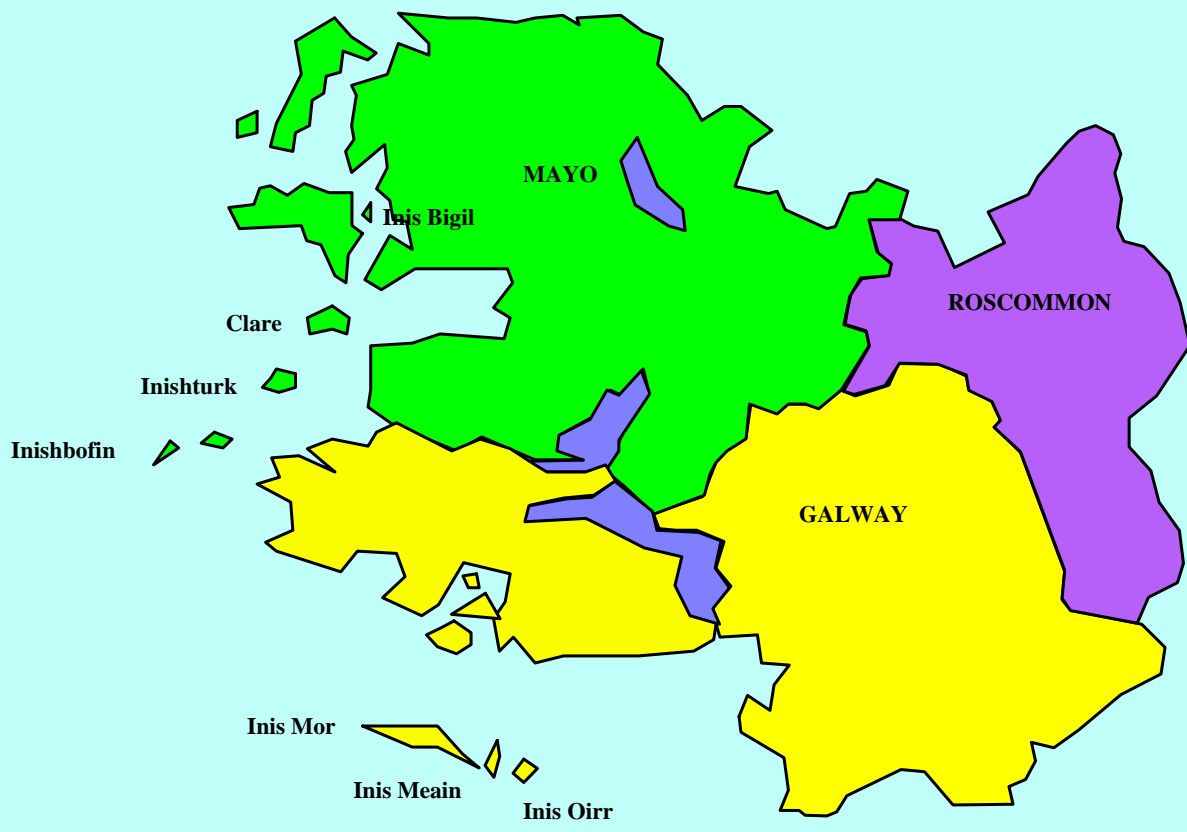


*Island Populations of the Western
Health Board
- A Report on the Health Needs -
Key Findings and Recommendations*



September 1997

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Department of Public Health

Western Health Board

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1. Introduction

In recent years, the Government has attempted to encourage the development and improvement of living conditions for people living on offshore islands. In 1996 an Interdepartmental Government Committee outlined a framework that formed the basis of Government policy for islands (Government Publications, 1996). Following this report, a Western Health Board regional working group was set up to assess the perceived health needs of island residents served by our Board (Western Health Board, 1997a). A consumer satisfaction survey was undertaken among a sample of Islanders. The working group also ascertained (by means of focus group interviews), the views of island residents and Health Service providers.

2. Research Results

Table 1 shows the percentage of respondents who are aware of, or use the services by Island. G.P. Services (86%) and Public Health Nursing Services (81%) exhibit the highest level of awareness or use, followed by Dental (59%), Community Welfare (55%), Eye (41%), and School Medical Services (44%). Only a small proportion of islanders are aware of or use the other listed services (10-34%). These services are more specialist by nature and it would be expected that they would be used by a lower proportion of the population. No doubt if such a survey was carried out on mainland dwellers similar results would be found.

Table 1.

Percentage of Respondents who are Aware of or use the Services by Island

<i>Health Service</i>	<i>Inismore</i>	<i>Inisman</i>	<i>Inisher</i>	<i>Inisbofin</i>	<i>Inisturk</i>	<i>Inisbiggle</i>	<i>Clare Island</i>	<i>Total</i>
Chiropody Service	38	47	100	76	80	21	43	53
Community Welfare Service	64	46	57	41	60	100	36	55
Dental Service	47	54	51	47	70	80	64	59
Environmental Health Service	22	34	37	12	60	20	50	34
Eye Service	34	46	48	35	80	60	57	54
GP Service	87	96	92	88	100	100	93	86
Health Education Service	16	25	29	0	30	20	36	22
Home Help Service	29	25	29	0	21	20	36	22
Home Management Service	7	17	20	0	10	0	36	13
Mental Handicap Service	15	21	17	0	10	0	21	12
Occupational Therapy Service	15	17	11	6	20	0	29	14
Physical Handicap Service	15	17	11	6	20	0	29	10
Physiotherapy Service	17	25	11	0	50	20	29	22
Public Health Nurse Service	60	75	83	88	90	80	100	81
Psychology Service	15	17	28	6	10	0	14	13
School Medical Service	42	41	43	59	70	0	57	44
Social Work Service	11	37	28	24	30	20	29	26
Speech and Language Therapy	11	54	23	18	40	0	36	26

Figure 1, and tables 2 and 3 show satisfaction levels for health services and facilities provided by the Western Health Board for those who are aware of or use these services/facilities.

Public Health Nursing (98%), GP (76%), School Medical (75%), and the Community Welfare Service (63%) exhibit the highest levels of satisfaction. Satisfaction levels for the other 14 services listed are considerably lower (ranging from 6 - 50%).

Figure 1.

Percentage Satisfaction with Services Provided

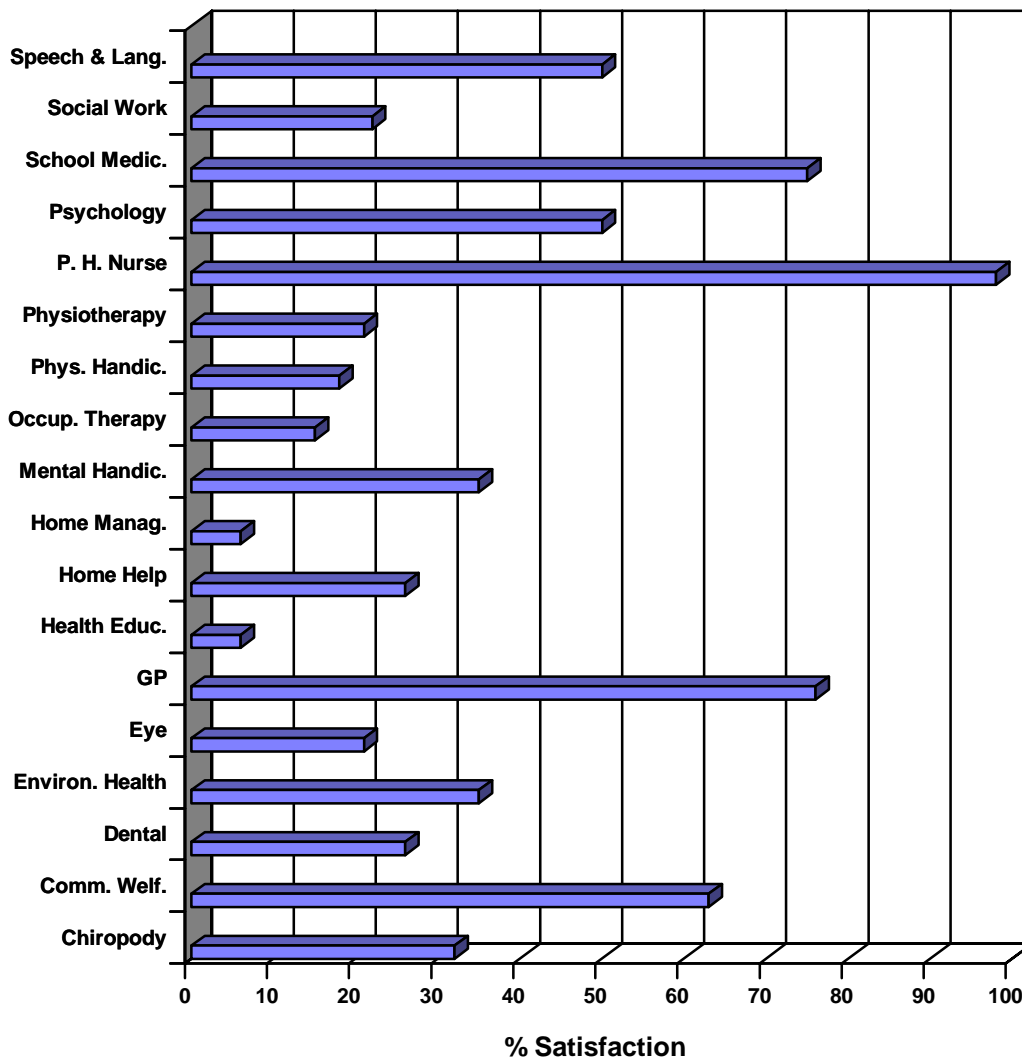


Table 2.

Percentage Satisfied with Services by Island

<i>Health Service</i>	<i>Inismore</i>	<i>Inisman</i>	<i>Inisheere</i>	<i>Inisbofin</i>	<i>Inisturk</i>	<i>Inisbiggle</i>	<i>Clare Island</i>	<i>Total</i>
Chiropody Service	14	22	34	50	75	0	67	32
Community Welfare Service	71	67	65	67	50	60	0	63
Dental Service	23	39	22	14	57	27	0	26
Environmental Health Service	17	50	38	100	33	0	67	35
Eye Service	21	33	29	0	0	0	75	21
GP Service	90	50	47	92	90	100	67	76
Health Education Service	0	20	10	0	0	0	0	6
Home Help Service	44	20	18	0	0	0	33	26
Home Management Service	0	0	14	0	0	0	0	6
Mental Handicap Service	38	50	33	0	0	0	0	35
Occupational Therapy Service	0	33	0	100	50	0	0	15
Physical Handicap Service	0	0	0	0	50	0	0	18
Physiotherapy Service	11	20	0	0	0	100	0	21
Public Health Nurse Service	94	67	72	100	89	100	86	98
Psychology Service	75	33	50	0	0	0	0	50
School Medical Service	74	75	67	88	86	0	75	75
Social Work Service	0	25	40	25	33	0	0	22
Speech and Language Therapy	33	70	25	67	75	0	33	50

The majority of respondents were satisfied with health centre facilities. Highest satisfaction levels were recorded for location (85%), cleanness (83%), toilet facilities (74%), and access (73%). Lowest levels were recorded for waiting time (47%) and privacy (48%).

Table 3.

Percentage Satisfied with Health Centre Facilities by Island

	<i>Inismore</i>	<i>Inisman</i>	<i>Inisheer</i>	<i>Inisbofin</i>	<i>Inisturk</i>	<i>Inisbiggle</i>	<i>Clare Island</i>	<i>Total</i>
Access	70	93	70	82	na	60	na	73
Cleanliness	23	84	100	82	na	100	na	83
Consulting Room	53	79	59	65	na	20	na	55
Heating	29	68	69	53	na	75	na	54
Comfort	37	56	52	65	na	93	na	55
Location	98	78	68	94	na	80	na	85
Privacy	66	53	34	53	na	20	na	48
Toilet Facilities	84	68	59	88	na	80	na	76
Waiting Area	40	68	50	77	na	40	na	52
Waiting Time	21	53	32	77	na	100	na	47

The results for each service provided by the Western Health Board are now described in more detail, with particular reference given to the findings of the in-depth interviews with islanders and health service providers.

2.1 Chiropody Service

Only 32% of islanders were satisfied with chiropody services. Inishmore, Inishmaan, Inisheer, and Inisbofin currently do not have a chiropody service (except for foot care by the Public Health Nurse). Islanders and health service providers stated that a service was badly needed, particularly for at risk groups such as the elderly, the housebound, and diabetics. Inisbofin, Inisturk, and Clare Island only have a once yearly service. These islanders were generally satisfied with the service (50-75%) although it was emphasised both by islanders and health care professionals that they were not satisfied with the frequency of the service (once yearly), stressing the need for at least a twice yearly service.

2.2 Community Welfare Service

63% of islanders were satisfied with the Community Welfare Services. The focus group interviews with islanders and health service providers also confirmed this, although some improvements were suggested, such as more information on financial entitlements, and the timing of medical care reviews to suit the vagaries of weather and transport.

2.3 Dental Service

Of those who are aware of or use the dental services, overall only 26% of islanders were satisfied with the level of service provided, with Inishturk recording the highest satisfaction ratings (57%). Currently the only dental clinic which exists is at Inishmore Health Centre and this is provided on a fortnightly basis. The service covers the three Aran Islands. G.M.S. adults receive treatment for relief of pain only. There is no private Dental Service to any of the Islands. There are no treatment facilities provided on any of the Islands except for Inishmore. A fortnightly fluoride mouth rinsing service is provided by the local public health nurse on four islands and most adults have to travel to the mainland to receive dental services. The cost of such travel was particularly problematic in Inisbofin. As a consequence of the inadequate service, five out of the seven islands are developing a three year dental action plan which will resolve some of these problems. A dental screening service is provided in all primary schools.

2.4 Environmental Health Service

Only 35% of islanders were satisfied with the Environmental Health Services. The focus group interviews identified the inadequate water supply (particularly in the summer), poor quality and infrequent testing as the main areas where there was scope for improvement. In addition, rodent infestation was a serious concern on Inisbofin. This matter was referred to the Local Authority by the working group.

2.5 Eye Service

Eye services were rated as satisfactory by only 21% of islanders. The focus group interviews revealed that eye services were either non-existent, infrequent, or inadequate. The need for eye services was stressed, particularly for screening of both children and adults, and especially screening for glaucoma in older people.

2.6 GP Service

The majority (76%) of islanders were satisfied with GP services. It was agreed in all focus groups interviews that an excellent level of care and commitment was provided by GP's. Some improvements however were suggested including better communication systems, transport and equipment, and the frequency of visits to clinics to clinics. In addition an extra GP has been appointed to serve the three Aran islands through funding received from the Department of Health. The service now being provided is on a weekly basis, and this extra staffing helps to provide a more satisfactory service during the summer months when the population increases significantly (Western Health Board, 1997b).

2.7 Health Education Service

Only 6% of islanders were satisfied with the Health Education Service. The focus group interviews revealed that none of the islands have a Health Education Service, although some information is provided and workshops and summer schools are organised. Health service providers and islanders stressed the need for health promotion in particular the need for action to prevent the abuse of alcohol and drugs among young people.

2.8 Home Help Service

Only 26% of islanders were satisfied with Home Help Services. The focus group interviews revealed that Home Help Services were perceived as being inadequate. A key difficulty identified was the fact that payments are not made to carers who are relatives. This is a significant problem on the islands as a large proportion of the population are related to each other.

2.9 Home Management Service

Only 6% of islanders were satisfied with Home Management Services. It was stated at the focus group interviews that no Home Management Service was provided on any island and it was suggested that a Home Management Advisor be appointed, resource materials be developed (e.g. video, booklets), and information provided.

2.10 Mental/Physical Handicap Service

35% of islanders were satisfied with the Mental Handicap and 21% with the Physical Handicap Service. The majority of islands do not have a Physical/Mental Handicap Service. There is currently little demand for these services and no improvements were suggested. This service is by its nature needed only for a minority of people and therefore awareness / use of the service is limited.

2.11 Occupational Therapy Service

Only 6% of islanders were satisfied with Occupational Therapy Services. Services were perceived by focus group interviewees as non-existent or inadequate, and the need for a service was stressed particularly for at risk groups such as psychiatric patients and physically handicapped persons.

2.12 Physiotherapy Service

Only 21% of islanders were satisfied with community Physiotherapy Services. The Physiotherapy Service was generally perceived by focus group interviewees as being inadequate/non-existent and the need for a service was stressed for Inisheer, Inisturk and Inismore. On Inishmore a particular need was expressed for rehabilitation services and ante-natal classes.

2.13 Public Health Nursing Service

The vast majority (94%) of islanders were satisfied with the Public Health Nursing Service. There was agreement at the focus group interviews that the level of commitment given by Public Health Nurses and the quality of service was excellent. On Inisturk however, the need to expand the service by providing a clinic which would operate full-time as opposed to part-time was stressed. On Inisbofin and Clare Island it was stated that Locum Public Health Nurses were often newly qualified and inexperienced. Health service providers also emphasised the need for additional resources for equipment such as ambulance and transport facilities for use by the Doctors and Nurses.

2.14 Psychology Service

50% of islanders were satisfied with the Psychology Service. The focus group interviews revealed that only on Inishmore was the service perceived as being inadequate. The main concern for the majority of islanders was the need to issue travel vouchers to cover the cost of travel to the mainland to avail of this service and any other service not currently provided on the islands.

2.15 School Medical Service

The majority of islanders (75%) were satisfied with the School Medical Service. This was confirmed at the focus group interviews. On Inisturk and Inisbiggle the fact that children have to travel to the mainland for this service was highlighted but not identified as a major problem.

2.16 Social Work Service

Only 22% of islanders were satisfied with the Social Work Service. A wide variety of comments were given at the focus group interviews with no overall pattern emerging. This service would also be required only by at risk groups who may not have been represented at the focus group sessions. Therefore the low level of satisfaction must be treated with caution as with other services which are not known or provided.

2.17 Speech and Language Therapy Service

50% of islanders were satisfied with the Speech and Language Therapy Service. The recent appointment of an Irish Speaking Speech and Language Therapist on Inishmaan and Inisheer was commended at the focus group interviews. On Inisbofin, Inisturk, and Inisbiggle, it was noted that there was no demand for the service.

3 Discussion

The results indicate that the services that are used by the majority of islanders record the highest satisfaction levels, whereas those used by only a minority of the population exhibit the lowest satisfaction levels. Thus whilst the “core” health services provided by the Western Health Board are perceived as being satisfactory, the remainder are perceived as being inadequate. This finding might be accounted for by the fact that there is general dissatisfaction or because of lack of awareness of the service.

It is evident that where there is low demand for a particular service there is a problem in delivering a satisfactory service from the perspective both of islanders and health service providers both logistically and economically.

Although some of the services identified as being deficient or absent are also not being provided to the desired level on the mainland (e.g. dental services), it is clear that there are inequities especially in terms of access and cost of transport in the provision of services to island dwellers which require examination and correction. It was on this basis that the committee drew up a series of recommendations.

4. Recommendations

From analysing the research findings the committee produced a number of general and specific recommendations which are summarised as follows:

4.1 General Recommendations

1. A acceptable level of core service provision to all islands should be provided including medical, nursing, home help and financial support. If patients have to travel to the mainland in order to obtain specialist type services, they should be supported and facilitated to do this by way of funding of transport and by increasing the flexibility of clinic appointments.
2. Clear, user-friendly information on health service eligibility and availability should be provided to all islands as a matter of urgency. This information should be bi-lingual as appropriate.
3. There is little difference between dental services being provided to island and mainland dwellers. However because there is no dentist practising in a private capacity on the islands, non-GMS patients are obliged to travel to the mainland for treatment and are therefore at some disadvantage in terms of availability and cost of transport. It is recommended that a detailed examination of possible ways of dealing with this problem be carried out.
4. A more comprehensive chiropody service should be provided on the islands for those islanders who are most at risk and for whom travel to the mainland is particularly difficult e.g. frail or elderly residents.
5. Effective means of communication should be provided to all primary health care providers on the islands. In some instances the extension of the mobile phone service will suffice. In other areas it will be necessary to provide a two way radio system.
6. Medical card reviews by the Community Welfare Officers should take place in the summer months when transport is easy/possible. This applies to all relevant islands where there is no resident Community Welfare Officer.
7. The arrangements in place at out-patients clinics in order to allow islanders some flexibility to attend to suit the availability and vagaries of travel should continue and be reinforced
8. Funds should be provided without delay to renovate health centres on all islands with a view to improving security, structure, comfort and accessibility. The difficulties encountered in securing satisfactory contractors and the increased costs in carrying out maintenance on islands are understood.

9. A follow-up survey in two years time to assess if the recommendations included in this report have been implemented should be undertaken.
10. A suitable and satisfactory water supply should be provided on each island by the responsible County Council.

4.2 Specific Recommendations

1. The Irish College on Inisheer should provide its own occupational health service to meet the needs of the students.
2. The length of time spent by the GP on Inisbofin during any one visit should be addressed by the relevant providers so that a satisfactory transport service be provided in order to allow the doctor to have a longer visit.
3. The nursing service provided to Inisheer and Inisturk is funded to the level of a half time equivalent, although the Public Health Nurse gives a 24 hours a day service. It is recommended that this issue be addressed and a satisfactory resolution to the problem be reached.
4. The cost of transport for children travelling to Clifden and Castlebar for dental treatment should be subsidised in order to ensure equity for these island children.

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