

## Appendix 1

# Consultation on the building that was formerly Enfield Highway Library

## Consultation report

### 1. Introduction

The building that was previously Enfield Highway Library (258 Hertford Road, EN3 5BN) was officially opened in May 1910. Designed by borough architect Richard Collins and built by Henry Knight Builders of Tottenham, the £4,000 cost was donated by Andrew Carnegie. An enlarged lending library was added at the rear of the building in 1938. The building is not on the Historic National Heritage List for England although it is on the Local Heritage List for Enfield.

The Library is based in the Enfield Highway ward, close to the border with the Southbury ward. Library services in Enfield Highway were moved to the Business Centre, across the road from the original library, at the end of 2017. Although the original Library is in the EN3, it is only a short distance to EN1. The other closest postal districts are EN2 and N9.

In this consultation exercise, residents were presented with an opportunity to inform the Council how they would like to see the building, where the Library was based, be used for the benefit of the local community in the future.

### 2. Methodology

The objective of the research was to find out how residents would like to see the building be used for the benefit of the local community in the future.

This research objective lends itself to quantitative research. For this reason, it was decided to capture views by using self-completion questionnaires and carrying out face-to-face interviews.

There are mode effects in combining the data using these different methodologies (that is, self-completion and interviewing), which can impact on the precision of the findings. However, it was felt that it was best to employ both approaches to ensure a substantial number of people were involved in the consultation. The Council does not have the funds to involve many respondents through face-to-face interviews, while self-completion surveys generally deliver low response rates. Adopting a flexible approach has added value by making the consultation more accessible.

An online survey was made available in the Consultations section of the Council website. The consultation was promoted via:

- Local newspaper
- Council Twitter

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- Council Facebook
- Email sent to members of Enfield Highway Library
- Email sent to members of the Conservation Action Group and the Enfield Society

Hard copies of the consultation materials were made available in Enfield Highway Library, as well as at local GP surgeries. Returning responses was made easy, with the facility to hand them in at the new Library and the reception of the Business Centre. The consultation materials also contained details of how to access, as an alternative, the online consultation and the address and email of the Consultation and Resident Engagement Services Team. In total, 1,100 hard copies were printed and made available.

The questionnaire used to capture the responses was straightforward with only two questions being asked on the issue. To prevent bias, the questions simply asked for preferences using an open-ended style. No prescribed list of options was presented.

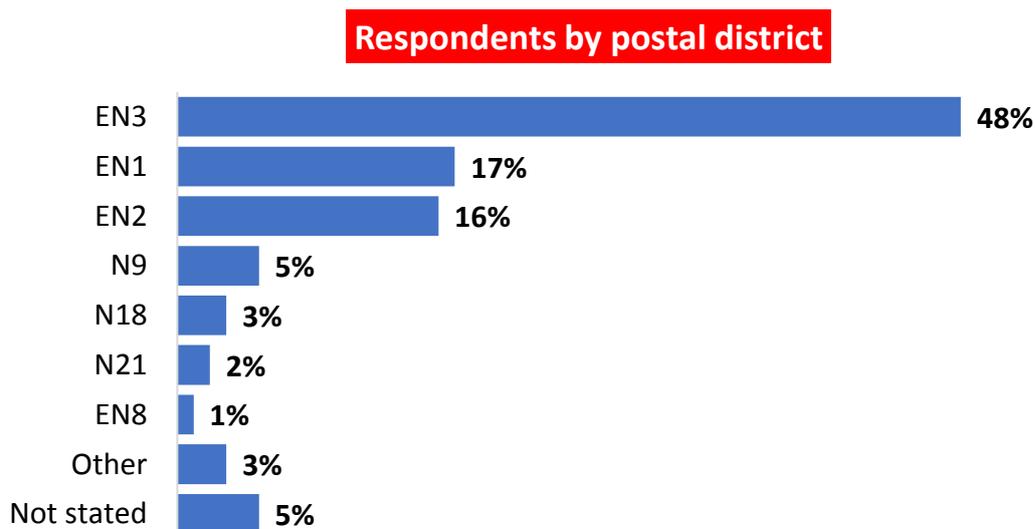
A post on the Council Facebook page signposting the online consultation received eight replies that included suggestions. These have been included as part of the analysis.

In total, 326 surveys were completed, of which 42 were carried out face-to-face near the Library. Including the feedback received via Facebook, the total number of interactions was 334.

### 3. Respondents

Those who responded via the survey/interview were asked for details of their postcode to establish who has participated in the consultation. In total, 308 provided this information. The breakdown of responses by postal district is detailed below (see Chart 1).

Chart 1



Base: 326 respondents (survey/interview)  
Unweighted data

Almost nine out of 10 (86%) respondents reside in either the EN1, EN2, EN3 or N9 postal districts, with almost half (48%) living in EN3. It is encouraging that participation levels were comparatively high among people living in these areas.

With schools and shops close-by, and people interested in the historical significance of the building, there are those who do not necessarily live in the vicinity but who have an interest in the future of the building.

No responses were submitted on behalf of any organisations or groups.

## 4. Findings

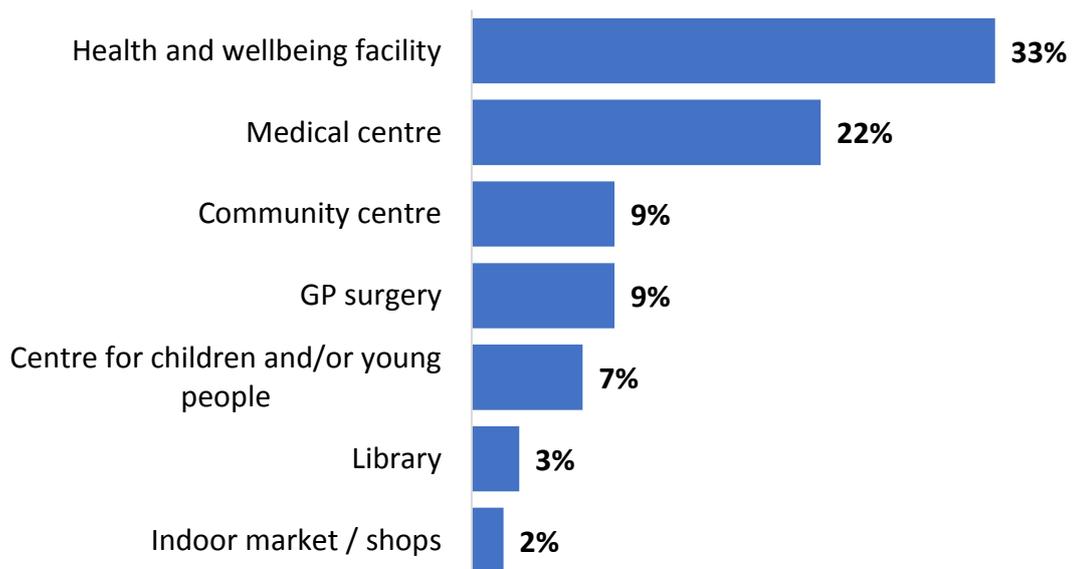
### Overall

The first question asked for a single preference, the next question was a follow-up asking for any further suggestions. As the questions were open-ended, the responses were coded. That is, grouped into themes.

The findings suggest the preference is for the building to be health-focused, with *health and wellbeing facility* (33%) being the most popular suggestion. The chart below shows the most popular responses (see Chart 2).

Chart 2

**What would you like to see the building become in order to be of benefit to the local community in the future?**



Base: 334 in total (326 survey/interview responses and eight Facebook posts)  
Unweighted data

*Health and wellbeing facility* (33%) was the most popular suggestion, followed by *medical centre* (22%). This was followed by *community centre* (9% - 31 responses) and then *GP surgery* (9% - 30 responses). Clearly, the preference is for the building to be utilised as a health-focused facility. With a health and wellbeing facility being more popular, this may reflect a preference for the building to provide a range of services rather than simply GP provision.

It is not clear what is meant by 'medical centre'. However, a few respondents who suggested this referred to facilities for taking blood samples, physiotherapy and other services that are not necessarily provided by GP surgeries. It appears 'medical centre' is regarded as similar to a health and wellbeing facility.

In reporting the findings, the different suggestions relating to health (that is, health and wellbeing facility, medical centre and GP surgery) were separated as they can mean different things to different people.

Other suggestions, were put forward but these were not as popular. These included:

- Arts space
- Museum/gallery
- Function rooms for use by the community
- Managed workspace
- Advice centre
- Housing
- Support centre for vulnerable people (such as, those with learning difficulties or mental health services users)

Some of these could be considered as activities that could be functions of a community centre (for example, an advice centre and the availability of function rooms), in the wider sense or possibly a health and wellbeing centre (for example, support for mental health service users). However, for the purposes of analysis, it was felt these should be separated. The suggestion of a 'community facility' appeared to be a preference among those who were interviewed (see following section on feedback from interviews).

It should be noted that some respondents expressed a preference for the building to become a library once more (3%).

Responses to this question can be analysed by postal district but with around half (48%) of respondents being from EN3, and a further 38% from EN1, EN2 and N9, the overall findings reflect the views of those who live closest to the building.

A follow-up question asking for further suggestions, was responded to by just 38 respondents. Some of these responses provided by individuals were often further information about their initial suggestion. Responses to this question did not highlight any further suggestions that had not been identified by the analysis to the first question.

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Aggregating the suggestions in the second with those highlighted in the first question, would not have an impact on the order of preference and only a marginal impact on the scores.

N.B. 58 hard copy responses contained the responses of either “Enfield Health and Wellbeing” or “Health and Wellbeing”.

### **Feedback from face-to-face engagement delivered by Consultation and Resident Engagement Services Team (CREST)**

Feedback was collected on the high street near the original Library, with one of the team stood outside the building. Following this activity, the team visited several local properties to interview local people. This data has been included in the analysis in the section above. However, it is felt some of the key issues are worth highlighting as these individuals live in the area and because the data collection method was face-to-face interview, some respondents provided more in-depth responses.

In this phase of the research, the key issue appeared to be that the area seemingly lacks a feeling of ‘community’. Some stating that since the demolition of the large public house, close to the Library, there are a lack of facilities for people to gather. The issues of ‘community’ and ‘community facilities’ were common themes. As was the need to provide facilities for young people, particularly as a diversionary activity from anti-social behaviour.

This was reflected in the findings in which out of 42 people interviewed, 15 stated a preference for a community centre/facility. The discussions highlighted the need for the centre to deliver for the whole of the local community rather than, for example, specific age groups.

In addition to the suggestions, it was noticeable that several residents were not aware the Library had opened in the Business Centre. Being in the local area, there are clear and legible signs outside the original Library building and the Business Centre, making it clear the Library has changed location and is open for business. As the Library only opened around two months before this research exercise took place, it may well be that the message has not yet been received by all in the local vicinity. It may well be that Library Services consider additional promotion of the Library.

## **5. Recommendations**

In addition to the findings, there are other sources of insight available, such as ward forums and councillor surgeries, that may help to further understand the views of residents. Additionally, any research from the health sector about the provision of health and wellbeing services in the area, as well as the needs of the community in relation into these issues, may enable the Council to make a more informed decision on the future use of the building. Additionally, discussions with social service teams at the Council may identify gaps in provision of support services in the area, that could possibly be catered for if the building was to become a health and wellbeing facility.

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It appears that a health and wellbeing facility is the most popular option. Such a facility that enables some space to be utilised by the community for a variety of purposes, as well as a GP service and other medical services, may appeal to the majority of those in the local area.

Consultation responses are only one part of the decision-making process. Further consideration will need to be given to other aspects, such as those highlighted above, and finances.