

Staffordshire Health and Wellbeing Board Strategy Consultation 2018

Summary of findings



Living well in Staffordshire
Doing more for ourselves to live well for longer



Document details

Title	Staffordshire Health and Wellbeing Board (HWBB): Strategy consultation 2018 – summary of findings
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Introduction

Staffordshire Health and Wellbeing Board (HWBB) sought feedback from the public on its proposed priorities to support greater personal responsibility for staying healthy and well for longer.

As well as feedback on its proposed priorities, the Board sought views on what people could do themselves to stay well for longer and the support they would need to do this.

This report summarises initial analysis to identify key themes in the feedback. Further more detailed analysis may be undertaken to support development of the Board's strategy as appropriate

Method

A short electronic questionnaire (Appendix A) was created in collaboration with Healthwatch Staffordshire which was active between 16th April and 31st May, 2018, and promoted by:

- Staffordshire County Council with a supporting promotional campaign.
- Healthwatch Staffordshire
- A range of partners and stakeholders including Staffordshire Police, Staffordshire Fire and Rescue Service, Staffordshire Council of Voluntary Youth Services (SCVYS), Parish Councils and other local networks

Respondent profile

- There were 1231 responses from over 1000 unique postcode areas from all local authority areas in Staffordshire
- Respondents tended to be older with age 65-74 over-represented and 16-34 under-represented compared with 2016 mid-year population estimates for Staffordshire
- Respondents were disproportionately female (66%) compared with the overall population of Staffordshire (50%). 32% were males and 2% did not wish to say
- 15% of respondents said they had a disability compared with 19% in the overall Staffordshire population (as measured in the census 2011)
- 98% of respondents who gave their ethnicity were White which is in line with the Staffordshire population (98%). Other ethnic groups included Asian (0.95%), Black (0.35%), Mixed Race (0.61%), Oriental/Other (0.17%). 6.01% of respondents indicated they did not wish to give their ethnicity or did not provide this information

Headlines

- There was majority support for all of the Board's proposed priorities
- Main suggestions for personal responsibility were being active and eating healthily
- Principal suggestions for support to help with personal responsibility were:
 - Education, information, advice and guidance, particularly in developing healthy eating knowledge and skills
 - Accessible, affordable and engaging opportunities and amenities for healthy lifestyle pursuits that are inclusive and support diverse needs
 - Specialist support and expertise, where appropriate, including for mental health and addiction

HWBB Priorities (Survey Question 3)

More than 8 in 10 respondents agreed with each of the HWBB proposed priorities.

Proposed priority	% Completely Agree	% Strongly Agree	% Agree	% Overall Agree
Create a more healthy environment for people to make it easier to make healthy choices every day, e.g. more healthy food options, walking, etc.	61.06%	21.29%	12.95%	95.30%
Value Communities and help people to know what is available locally to help them stay healthy	58.90%	19.58%	14.70%	93.18%
Have a conversation with the public about how they can make healthy lifestyle choices and about the pressure that our public services are under	45.90%	17.87%	21.04%	84.81%
Use data to better target people at risk of ill health with the information and advice they need, e.g. by targeting smokers or inactive people	44.19%	16.65%	22.99%	83.83%

Question 1: In what ways can people take more responsibility for their health and help themselves to stay well and avoid long term health conditions for longer? (Total 1179 responses)¹

The most frequent suggestions related to exercise and being active (1011) and eating healthily (792).

It was identified that exercise should be maintained over a lifetime, can be practised in many ways and doesn't need to be too demanding or expensive. While some might need support, in general exercise can be facilitated by simple lifestyle changes:

“Exercising regularly - even if this is just getting off the bus one stop earlier and walking the rest of the way...” (Female, Age 16-24)

Healthy eating was often mentioned alongside exercise and fitness. This was seen as a multi-faceted challenge to be supported with education, information, advice and guidance (IAG), affordable healthy food options and responsible marketing and promotion of less healthy food and drink products.

The link between health and fitness and moderating or quitting use of alcohol (297), smoking (263) and drugs (35) was identified.

¹ Numbers in brackets represent the number of times the preceding theme was identified and coded for inclusion in this initial analysis from the more than 3,900 free text comments included in the feedback. (Many respondents identified more than one theme in their comments). Coding may be further refined in any subsequent analysis.

As well as individual behaviour changes respondents identified the importance of social interaction (132) as a contributor to good health and wellbeing, especially for the elderly and those who are vulnerable:

“Older people can become totally cut off from social interaction, and this allows their health (mental & physical) to suffer and their problems (which would be less serious if caught early enough) are not flagged up...” (Female, Age 75 and over)

There was direct support for the principle of personal responsibility (129). Other suggestions included health checks (110), mindfulness (79), accessible facilities and services (58), hobbies (56), moderation (51), community support (36) and affordability (32).

It was recognised that some people might need support to help themselves.

“Everyone is aware that a healthy lifestyle is achieved by a good diet and exercise. However to achieve this you must be educated on what constitutes a healthy diet, how to buy, cook and store food. With exercise we need safe areas for children to play, good public transport to reduce the need to use cars. We also need time and energy to do the above. Mental health has a massive effect on our ability to care for ourselves but accessing help is not easy, especially when people are working or in a caring role” (Female, Age 45-54)

“They need to work with knowledgeable professionals who have integrity and advanced communication skills to enable key messages to be understood” (Female, Age 55-64)

Question 2: Building on your answer to Q1, what help and support do people need to do this? (Total 1162 respondents)¹

The most frequent suggestions were Education (249) and IAG (241).

The main focus for education should be healthy eating and fitness. Schools were frequently identified as the foundation but it was also recognised that education and activities could be delivered outside of schools, in communities, and should engage all ages.

“Education about healthy eating and how to prepare healthy meals is key and needs to start in school and continue through adulthood. These should be accessible and tailored to audiences - held in community centres or places where groups gather e.g., young mums or older people. Demonstrations and then have a go sessions would be good...” (Female, Age 45-54)

It was highlighted that IAG should be:

- Accurate, reliable and relevant
- Delivered in many ways not just through traditional media and channels
- Produced/available in a range of formats to make it as useful, attractive and widely appealing as possible

“...Access to information that is easily understandable - various formats/mediums should be used so individuals can choose what is right for them...” (Female, Age 45 to 54)

Support should be affordable (151) and accessible (94) and provide:

“Access to enabling services that don’t cost the earth” (Male, Age 45-5)

Services and amenities should be:

- **Local** through development and use of community assets and opportunities (139)
- Should explore how healthy food could be made more price competitive and possible subsidies for free or cheaper access to local gyms, clubs and other amenities/activities (106)
- Inclusive and suitable for a diverse range of needs and capabilities, for example those who are isolated, elderly and/or otherwise vulnerable and those who otherwise find it difficult to access healthy lifestyle options (73)

There should be a clean, healthy, attractive environment for healthy pursuits (89) including:

- More green, attractive spaces where parents could spend time with their children
- A well maintained environment where light exercise, such as walking, is made easier and more appealing
- An environment where it is safe for people to walk and cycle
- Both indoor and outdoor amenities that meet a range of preferences and physical capabilities so that a commitment to healthy pursuits can be sustained all year round
- An environment that is facilitated to support health and fitness pursuits:

“Just come back from Pasaia in Spain. They had by the roadside a fitness park, absolutely brilliant equipment that the four of us, in our mid 60s and mid 70s had loads of fun on for 15 minutes. It comprised a walking machine, various arm machine, a see-saw etc., about 6 items altogether. Www.grupfabregas.com check it out!” (Male, Age 55 to 64)

Suggestions identified a range of potential community support developments including:

- Local community groups, clubs and networks (121)
- Peer support and role models (45) (*“...people can relate to someone like themselves achieving goals...” (Female, Age 45-54)*)
- Volunteering (33)

Barriers to a healthy lifestyle included demands of work (62) and lack of time (55).

Suggestions for support included:

- More accessible/affordable child care and parent-child groups/activities

“...more childcare cost of fresh food too high time restraints with young family” (Female, Age 25-34)

“Organisations to provide more family orientated physical activities. Would be helpful also if there were more of these in the school holidays. Have community groups of like-minded people set up the wellness groups - who can then possibly exercise etc., together. Would be useful if some of these were available early morning before work etc. and in other cases groups could again be set up to include family activities” (Female, Age 45-54)

- Exercise facilities on work sites
- Allowing time for exercise during work hours
- Assistance with sports club or gym membership

“Assistance paying for Gym or sports club membership could help encourage people to exercise. This may be seen as an unnecessary financial burden being placed on the Employer... it could be argued that the Employer should encourage activity outside of the work-place by paying for Gym or sports club membership” (Male, Age 45 to 54)

- Regular assessments of the mental and physical health and wellbeing of staff

Suggestions on how to encourage people to make healthy lifestyle choices (190) included:

- Stronger messages about the benefits of leading a healthy lifestyle and the consequences of not doing so, but delivered in ways that does not come across as ‘preaching’

“People need to be persuaded not ‘talked at’ or ordered to do things...” (Female, Age 55 to 64)

- Making information easy to understand and interesting
- Better promotion of local groups, clubs, activities, etc.
- Incentives and rewards such as vouchers, cash savings, prize draws, loyalty cards and penalties for misuse of health services, for example charges for missed appointments
- A diverse range of **engaging** support options as often those on offer appeal only to particular types/groups of people

Encouraging people to exercise is all very well but the cost of joining gyms is often prohibitive. Encourage people to do something they really enjoy. It's no good telling them to walk/cycle/ swim etc., if they don't enjoy it...” (Female, Age 55 to 64)

Improvement to existing health services was highlighted including:

- Access to appropriate expertise when required (65) in particular for mental health (35) and addiction

“Mental health awareness has increased dramatically in recent years, but despite having greater recognition very little appears to be put in place to support people with this. It would be beneficial if people could access a mental health worker on an ad hoc basis, a drop in clinic in local areas which people could visit during their lunch breaks to discuss strategies about how they can cope as an individual. This would impact on the regular alcohol drinkers, smokers, binge eaters and also those with eating disorders to look at alternative strategies that impact on their physical and mental health...” (Female, Age 35 to 44)

- Improved access to GP and professional health services (53)

“It is getting increasingly difficult to get to see a GP in a timely manner so what about Walk in Heath Clinics in town centres?...” (Female, Age 55-64)

- Regular health checks (40)

“A department specifically for checks, any issues would then be referred to the normal hospital for treatment” (Male, Age 65-74)

Respondents also identified the need to engage the commercial sector and explore:

- More regulation of fast food outlets and processed food content (82)
- Retailers/supermarkets promoting healthy food options and making them more price competitive (31)

“Make take away portions less enormous; provide healthy take aways - people are never going to stop buying them, so improve them instead...” (Female, Age 55-64)

“...The supermarkets are full of healthy food options, fruit, veg, fish, promote these and make them price competitive with less healthy options” (Male, Age 65-74)

Question 4: Is there anything else you feel the Health and Wellbeing Board should include in its list of priorities to help achieve its ambition to help people stay well and in good health for longer? (Total 832 responses)¹

In general respondents reinforced suggestions given in previous questions including:

- Education and relevant an impactful IAG
- Recognition of healthy food and exercise as achievable personal responsibility goals
- Accessibility and affordability of food, exercise amenities and health services
- A conducive environment that is safe, appealing and facilitates healthy pursuits
- Incentives and rewards to encourage personal responsibility
- Improved health services and encouragement of behaviours focused on prevention
- Appropriate support notably for mental health conditions
- Support for the principle of more personal responsibility

Question 5: What else should the HWBB take into account in developing its strategy for health and wellbeing in Staffordshire? (Total 736 responses)¹

Responses included useful suggestions on how the Board might develop and implement its strategy (102) including that it should be:

- Simple, easy to understand, practical and implemented quickly
- ‘Joined up’ involving all relevant partners and stakeholders, ***including the public***
- Led and managed by people who can genuinely deliver change
- Based on a project/performance management approach so that its overall effectiveness can be measured
- A more long-term approach
- Supported by making the Board and its work more widely known

“I’d never heard of the board let people know you’re out there, social media facebook ads doctors’ surgeries etc.” (Male, Age 55-64)

Summary

- Overall, results provide strong support for the proposed HWBB priorities and include useful suggestions as to how these might be delivered
- Although there is bias towards females and more senior people in the respondent profile findings still have value for development and implementation of the Board’s strategy
- However, it is suggested that the Board consider encouraging systematic, ongoing dialogue with the public across health and wellbeing agencies to obtain genuinely

representative feedback on the strategy and how well it is being delivered. The following comments illustrate why this might be useful:

“Actually listen to the residents of the whole of Staffordshire. The county is very diverse and therefore has different needs”. (Male, age 35-44)

“The Health and Wellbeing Board will have consulted with the local population in developing its strategy but regular feedback to the population and the provision of opportunities for people to engage with the strategy and provide feedback of their own and new ideas too will help the strategy feel more real and “alive” to individuals and communities”. (Female, age 55-64)