



# Fylde Coast Self-Care Strategy

## Communications and Engagement Report

Placing you at the heart  
of everything we do on  
the Fylde Coast

**your care**  
**our priority**

## Overview

Organisations across the Fylde Coast are working together via the vanguard programme to not only transform people's experiences of healthcare services but also improve the health and wellbeing of all local residents.

As part of this we are developing a 'Self-Care Strategy'. In developing this strategy we are working to the following definition of self-care as provided by the Department of Health:

*“The actions that people take for themselves, their children and their families to stay fit and maintain good physical and mental health; meet social and psychological needs; prevent illness or accident; care for minor ailments and long term conditions; and maintain health and well-being after an acute illness or discharge from hospital.”*

This Self-Care Strategy is a collaborative approach to supporting individuals, families, carers and communities across the Fylde Coast to develop the knowledge, skills and self-confidence they need to care for them and their conditions effectively.

However, in order for this strategy to be as meaningful and effective as we desire, we believe that the views and experiences of local people should inform its approach. Therefore a significant period of communication and engagement was undertaken with local stakeholders and members of the public. This included a number of activities with specific details and the resulting outcomes of these included within the following pages.

A total of **449** people were engaged with between November 2016 and February 2017. Of these, **188** were as a result of face-to-face methods.

**More than 300** people completed our self-care survey either online or in person at local primary care centres.

Associated social media posts reached a potential audience of **200, 918 people** and **three** local media articles were generated in relation to this work.

## Stakeholder event

A stakeholder event was held on Wednesday 16 September 2016 to launch the development process of the strategy and begin the wider communication and engagement needed to inform it. In total, **87 people** attended the event with the vast majority of these attending in a professional capacity; however there were a small number of members of the public also present.

Attendees heard from key speakers, including representatives of other vanguard areas who shared their experiences of developing and enabling self-care strategies. Attendees then took part in round table exercises to begin mapping local community assets and discuss how more local people can be encouraged to make use of these.

The resulting theme from this exercise was that the Fylde Coast possess a wide range of assets which enable self-care for individuals and communities but that these are not always utilised as well as could be. A number of factors which prevent people from utilising this range of assets were identified, these included:

- Personal motivation
- Time
- Awareness of assets

A total of 39 people completed evaluation forms following the event. From this 38 people stated that they were either satisfied or very satisfied with the event overall.

See **Appendix A** for the full report from the event.



## Focus groups

Three focus groups were held with existing patient and public groups. These groups were the NHS Fylde and Wyre CCG Influence Panel and participants of two pulmonary rehabilitation classes in Blackpool. In total, **28** participants took part in these three focus group exercises.

The groups were asked three specific questions as follows:

1. What does self-care mean to you?
2. What are some of the things that stop you or others from being able to better self-care?
3. How can we better coordinate the various resources and information available to help you and others self-care?

### Feedback summary

1. What does self-care mean to you?

Generally, the focus group participants agreed with the Department of Health definition of self-care and highlighted a healthy balanced diet and recognised exercise/activity as the main self-care activities which they themselves undertook or felt should be associated with self-care good practice. Noticeably when posed with this question though, the participants focused on self-care for physical health or management of a physical long-term condition with little consideration for mental health and wellbeing.

2. What are some of the things that stop you or others from being able to better self-care?

The groups cited an individual's own personal motivation as a key barrier to self-care. Linked to this, the groups identified people's confidence and knowledge to self-care as contributing to a lack of motivation. People also cited a lack of awareness of local community groups and other services which people could access to support self-care.

3. How can we better coordinate the various resources and information available to help you and others self-care?

The participants felt that there needs to be better awareness amongst the public of local statutory and third sector services which can aid self-care. When advised that a directory of services was in development, many participants acknowledged this would be a beneficial resource. The groups made a number of additional suggestions for how to further promote these activities including better use of local libraries, the Gazette and maybe apps to promote services. The groups also had some additional ideas for self-care activities such as making exercise bikes available for hire.

See **Appendix B** for the full notes from each of these focus groups.

## Survey

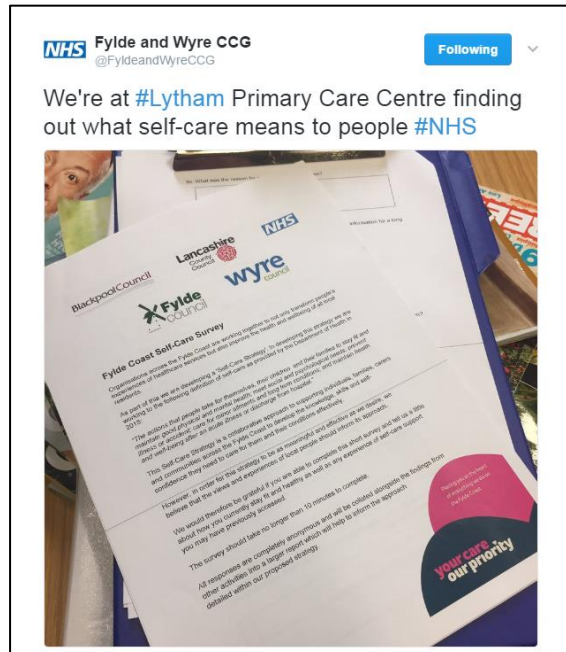
A survey was also created and launched on 12 December 2016 in order to seek further views from patients, the public and carers about their perceptions of self-care and previous experiences of accessing self-care support or advice.

A copy of the survey can be found at **Appendix C**.

The survey was available for people to complete online and promoted widely by partners, including the issue of a press release, various social media posts, and content for partner websites and newsletters.

However, in order to gather as many views as possible and recognising that not all local residents may use the Internet, sessions were arranged at primary care centres across the Fylde Coast to undertake face-to-face surveys with members of the public also. This included members of the engagement teams from Blackpool and Fylde and Wye CCGs visiting the following locations:

- South Shore Primary Care Centre, two visits.
- Whitegate Drive Health Centre, two visits.
- Lytham Primary Care Centre, two visits.
- Fleetwood Health and Wellbeing Centre, one visit.



## Respondents

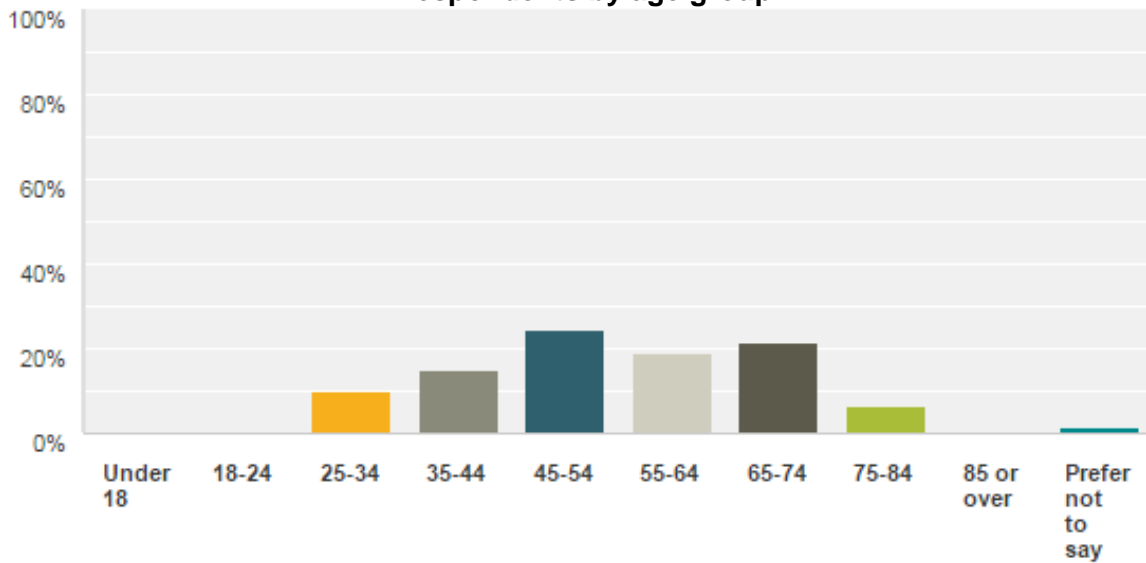
In total, there were **334** responses received to the survey. Of these, **259** were via the online survey with **75** responses gained via the face-to-face sessions at local primary care centres.

In answering the survey, respondents were asked to answer a number of optional equality monitoring questions.

### Age

From the **277** respondents who completed this section of the survey, we are able to see the following that the biggest number of responses came from people in the 45-54 age range with **68** responses from this group. Those aged 65-74 were second with **60** responses received from people in this age group, followed by **52** response from people aged 55-64.

**Respondents by age group**



Answer Choices	Responses
Under 18	0.36% 1
18-24	0.72% 2
25-34	10.11% 28
35-44	15.16% 42
45-54	24.55% 68
55-64	18.77% 52
65-74	21.66% 60
75-84	6.50% 18
85 or over	0.72% 2
Prefer not to say	1.44% 4
<b>Total</b>	<b>277</b>

**Gender**

From the **277** people who completed this question, we are able to see that **173** survey respondents were female compared to **95** males. **Nine** people stated that they did not wish to disclose their gender and 57 people chose not to answer this question at all.

**Long-term condition prevalence**

**113** people said that they did not have a long-term condition. **189** people stated that they were currently living with at least one long-term condition or caring for somebody who has. A remaining 32 people chose not to answer this question.

Full details of the respondent demographics can be found in the full survey report at **Appendix C**.

### Feedback summary

Provided below is a summary of key themes which emerged from the results of the survey. Please note that this is a summary of all the feedback gathered. It is recommended that the full survey results, which include all answers and additional comments received, be read in conjunction with this section of the report.

The full survey report can be found at **Appendix C**.

### The importance of self-care

Of the total respondents **93%** (311 people) said they felt it is important that people self-care.

Of the 113 people who indicated that they do not have a long-term condition, **96%** of these (109 people) stated that they felt self-care was important.

Of the 189 people who said that they currently live with one or more long-term condition, **90%** (171 people) said they felt self-care was important. 16 people said they were not sure and 2 people said it was not important.

Of the total survey respondents, **1%** of the total respondents (4 people) feel it is not important that people self-care. And, **6%** of respondents (19 people) were not sure if it is important that people self-care.

From the total **23** people who felt self-care was not important or were unsure, when asked about the rationale for their answer choice the recurring theme was a concern for people's knowledge and ability to self-care. It was also clear that many of these people felt that trained healthcare professionals should provide care.

### Current self-care activities

When asked: "What things do you do on a day-to-day basis which you think help to keep you generally healthy and well?" **57%** of respondents (175 people) made reference to eating a healthy diet. Walking was also a common response to this question, with **36%** (110 people) stating that they walk regularly, with some citing walking their dog as a hobby they enjoy. In addition to this, **32%** (99 people) said they do some general exercise or keep active to stay fit and well.

183 people out of the 189 people living with at least one long term condition answered the following question: "Have you ever been aware of or completed a training course which has helped you to learn more about your condition and how to manage it?"

**15%** (27 people) of these respondents had completed a full training course with an additional 4 people saying they had begun a course but not completed it.

**68%** of respondents (124 people) said they were never aware of support of this kind.

An additional **9%** (17 people) said they were aware of a course but had chosen not to participate in. When asked why this was, a lack of time was a recurring theme. Other factors included a people being confident enough in managing their condition already.

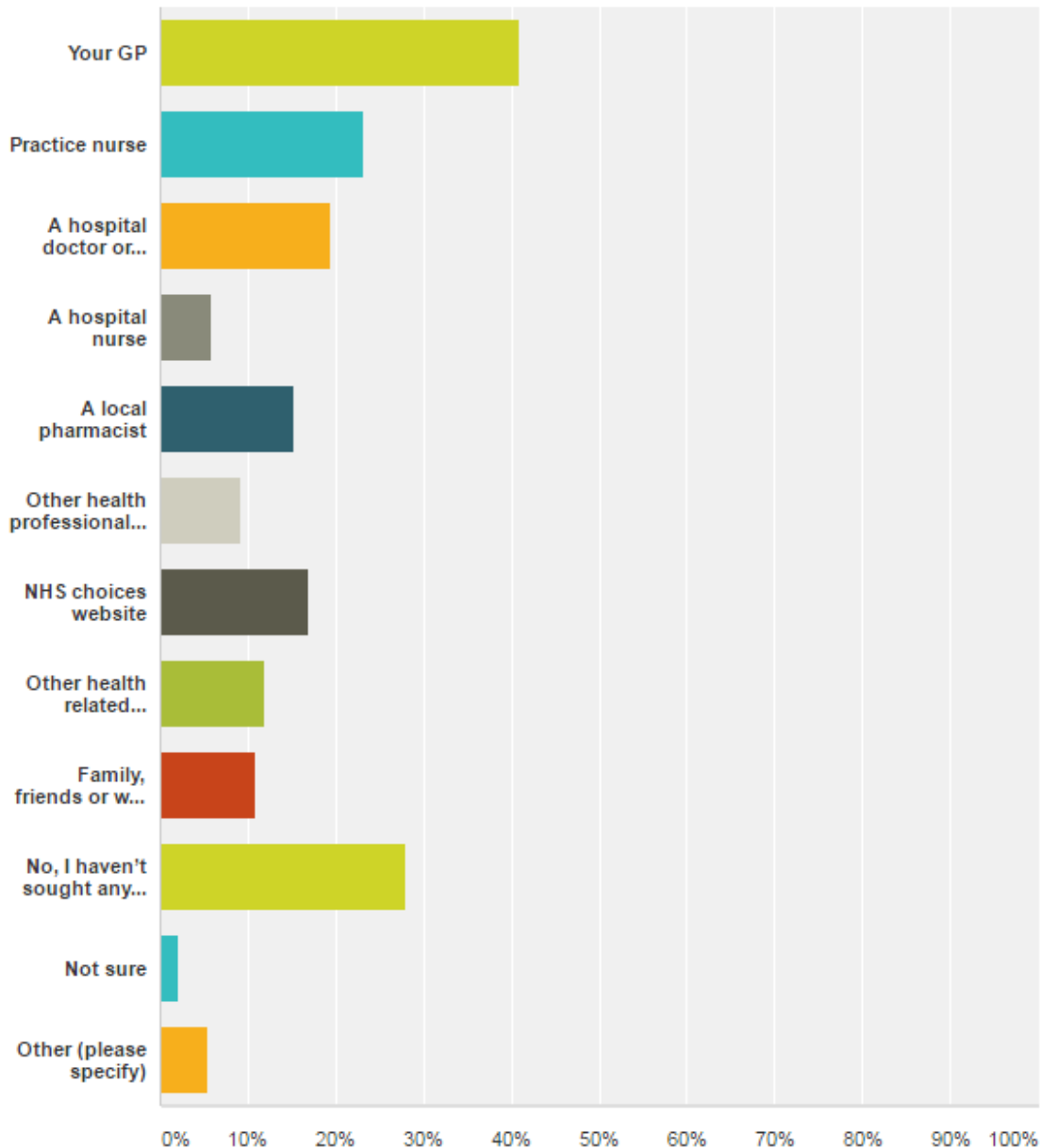
### Sources of self-care support or advice

Respondents were asked: “In the last six months, have you sought any self-care advice or information for your general health or a specific long-term health condition from any of the following sources?”

Of the 206 people who indicated that they had sought self-care advice in the last six months, a common theme of seeking advice from healthcare professionals emerged. An individual’s GP was the most popular source, followed by a practice nurse and then a hospital doctor or consultant.

The NHS choices website, other health related websites (apart from NHS choices) and family, friends or work colleagues were also identified as current sources for self-care advice and support.

**Current sources of self-care advice or information**

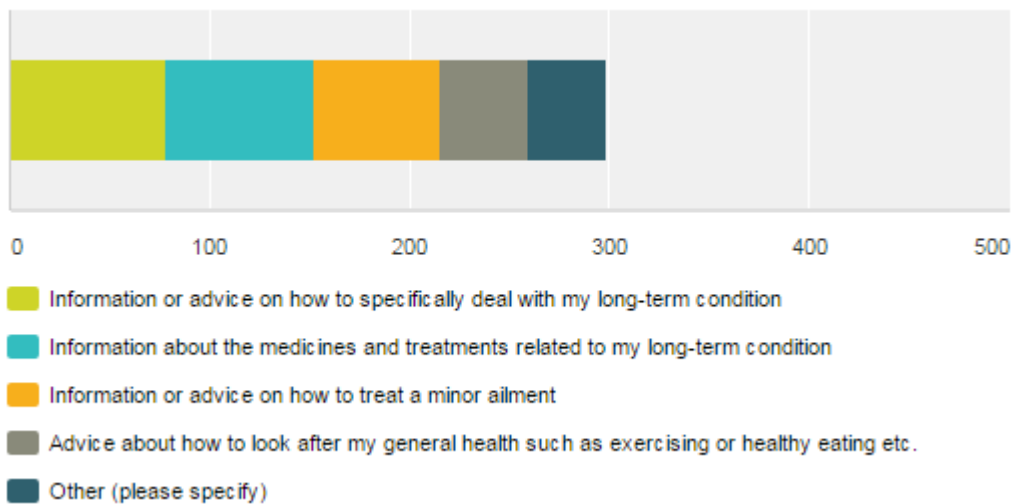




Answer Choices	Responses
▼ Your GP	40.82% 120
▼ Practice nurse	23.13% 68
▼ A hospital doctor or consultant	19.39% 57
▼ A hospital nurse	5.78% 17
▼ A local pharmacist	15.31% 45
▼ Other health professional such as a physiotherapist for example	9.18% 27
▼ NHS choices website	17.01% 50
▼ Other health related websites (apart from NHS choices)	11.90% 35
▼ Family, friends or work colleagues	10.88% 32
▼ No, I haven't sought any advice or information	27.89% 82
▼ Not sure	2.04% 6
▼ Other (please specify) <b>Responses</b>	5.44% 16
Total Respondents: 294	

The nature of the advice sought tended to be related to the management of an existing long-term condition.

### The nature of self-care advice sought



Answer Choices	Responses
▼ Information or advice on how to specifically deal with my long-term condition	37.86% 78
▼ Information about the medicines and treatments related to my long-term condition	35.92% 74
▼ Information or advice on how to treat a minor ailment	30.58% 63
▼ Advice about how to look after my general health such as exercising or healthy eating etc.	21.84% 45
▼ Other (please specify) <b>Responses</b>	18.93% 39
Total Respondents: 206	

### Improving individuals ability to self-care

Respondents were asked to prioritise which of the following options would help them and others to take a more active role in managing their general health and/or a specific long-term condition. The responses to this question show people felt that support and advice provided to them via a GP or other health professional would be the most important and beneficial.

**Future self-care support prioritisation**



- More information about your condition and treatment
- Support and advice from GPs/health professionals to give you confidence in managing a condition and how to prevent it from worsening
- More chances to talk to other people who have your condition
- More support from local charities or voluntary groups
- Greater access to technology and devices to monitor a long term condition at home
- Information on self-care training and skills
- None of the above
- Not sure
- Other (please specify)

Answer Choices	Responses
More information about your condition and treatment	10.18% 29
Support and advice from GPs/health professionals to give you confidence in managing a condition and how to prevent it from worsening	32.98% 94
More chances to talk to other people who have your condition	5.61% 16
More support from local charities or voluntary groups	2.46% 7
Greater access to technology and devices to monitor a long term condition at home	7.72% 22
Information on self-care training and skills	14.74% 42
None of the above	8.07% 23
Not sure	12.63% 36
Other (please specify)	5.61% 16
<b>Total</b>	<b>285</b>

### **Additional comments about self-care**

A total of 78 additional comments were received from respondents to the survey. A selection of these are listed below:

- Having awareness is always helpful and knowing how to help oneself. Different methods of sharing experiences so individuals don't feel alone can also help. Different age groups (especially the elderly) may find training courses / IT daunting so thinking of different ways to get information across is essential
- More exercise would be useful but gyms are expensive unless you are over weight or on benefits
- I'm aware of the strain on the nhs in all areas so unless i really need to or have been called by my surgery my family and I always try to self care and feel that if that doesn't work then you may need to seek professional help
- There are so many options now, on line, GP surgery, walk in centre etc it is sometimes difficult to know which is the best option to get the right care when you need it. I regularly attend the asthma clinic which is useful for tracking my illness (thankfully due to medicines available now, I'm usually fantastically well).
- Yes for the doctors or health care professions to stop thinking that they know better and what's best for the patients and listen a lot more to patients and take it on board and do what the patients ask instead of just dismissing what the patient says
- I think support is an important factor, to keep yourself well you need a strong support network around you.
- A more tailored plan on how to keep your weight in control as a Type 1 Diabetic with numerous complications. More contact with the Diabetic team at BVH - not just the consultant - I think it needs more regular interventions to speak to a client and highlight what there issues and concerns are. After 40 years as a diabetic, depression needs to be alleviated, but sometimes doing activities have to be tailored to the individuals capabilities - it can't be all doom and gloom.
- Community and voluntary sector can do this job for more easily and will have more confidence of the public than public services
- This concept needs to be much more widespread - more education about it needs to be an investment so that more people accept personal responsibility for their health and wellbeing
- Don't waste money developing schemes which only reach a few of the same people all the time, which are ill thought out and don't work. Put the money into supporting the health services to support patients to manage their condition. Don't be afraid to redirect people who turn up at the inappropriate place for their medical 'problem'

If you keep seeing those people at, for example, A&E, they will keep returning there. If you don't respond to their demand but redirect them to the appropriate place,

eventually they might get the message. Tackle the issue of conflicting advice given by different health professionals for the same condition. In hospital recently, I was given three differing opinions relating to my condition by three consultants. It is confusing for patients

- Work with some of the groups who are helping large numbers of people - it would be easier to spread information and messages from existing groups rather than trying from scratch and the peer support is then already established for people to help remove social isolation.
- People should be given relevant information and options and encouraged to take responsibility for their own health and well-being by health professions. Access to equipment for example to allow self monitoring of blood pressure etc and information about when they then need to see a doctor would be helpful and may reduce the need for regular routine appointments. I do not think pharmacists should be replacing doctors as the role is different, pharmacists are not diagnosticians but do have a role in dosage and monitoring.
- Practical help in managing a long term condition is rarely given. In my experience GP's and consultants tend to just treat the particular symptom that you happen to go with on that day. They never ask if you are managing personal care, how your carer is coping etc. Sometimes life could be made much easier if the right help was offered e.g. OT assessment, continence clinic etc.
- There seems to be a shortage of varying support in mental health regarding healthy living and exercise as in Pacific mental health services. They don't seem interested in this side of things or have the knowledge or enthusiasm. What happened to free exercise on prescription? I tried something similar at ymca but it was a case of I was not allowed to do exercise classes if I was using the gym? There needs to be more holistic classes throughout all the ymcas not just some of them i.e. Tai chi at ymca poulton but none at Thornton.
- Education and access to facilities /help/advice & professionals key from early ages
- You should all be working together to promote healthy eating and moderate exercise. More walking routes, more running routes and better cycle lanes away from other traffic. Introduce play streets and other areas for children and young adults to get into the habit of exercising through play. Set up easy to access strength exercise machines for older people in safe places like libraries, schools, pubs and clubs. have outdoor exercise classes in parks and schools for older people. take a look at your European and Asian societies for examples.
- Self-care is not a 'one size fits all', patients have different needs.
- Patients with long term conditions can be better supported or self manage in their own homes by a multi-disciplinary community nursing and therapy team rather than the newly commissioned integrated team which aims for all disciplines to develop generically across nursing, physiotherapy and occupational therapy. This has the risk of de- skilling practitioners in their specialised field so that the needs of patients are not

all met.

- Mental health advice and care needs to be readily available. I found out about supporting minds from the nhs website but a lot of people I have spoken to didn't even know it existed and it was a great help to me
- Many conditions require more time than is allocated in training/course to produce any lasting change, especially when a condition has gone unsupported for a long time. Also, more active approaches are needed to encourage self-care and make it habit, rather than being fed information or one-off exercises.
- Self care messages are often contradictory - NHS media tells you to get help/advice but then GP's have no time to see you and are grumpy if you are not "ill enough". Nurses are fantastic on the other hand and seem to be managing more and more without the need to see a GP.
- I feel the support and information is out there, but not always certain how to access it
- When I have tried to call 101 to avoid going to hospital I have not been able to get through so can understand why A&E and GPs are so busy. I also think the council ran gyms should be offered cheaper to encourage healthy lifestyles, not everyone can afford them and there are chain gyms such as the new one in town offering cheaper packages, residents should be able to get council ones cheaper when taxes etc are paid to them and they should lead by example in their pricing
- I suffered from depression stress and anxiety and believe this was caused out of fear of not being able to cope as my mum who lives with me has been diagnosed with alzheimers. After the stress course I changed my mind set with the tools the course had given me. I take one day at a time and try to live in the present when it comes to my mum. The government should give much more support to families who are willing to care for their elderly parents who would otherwise be in a care or nursing home.
- Work-related support such as special paid leave could be useful when times are very tough.
- I think one of the greatest challenges in trying to promote self care is changing the attitudes of some people who suffer from long term conditions. I have relatives in their 60s with long term conditions (such as angina and diabetes) who, once diagnosed, conceded to the fact that they have a condition and that there is nothing they can do about it, rather than take a positive approach and seek ways in which they can improve these conditions themselves.
- Seek support and advice and take that advice and support in the spirit it is given. Everyone must understand that we each have to take personal responsibility to keep as well as possible.

Mental health should be treated on a par with physical health. Where a person who has poor long-term mental health problems presents with physical problems their mental health condition should not be linked automatically by a health professional and so dismissed as psychological. Medical training should be vastly improved and ALL

medical students should have a good understanding of psychology and psychiatry. From personal experience I find that having a long-term mental health problem is too prominent in the diagnosis process in general medicine and can lead to physical problems being overlooked, misdiagnosed and even ignored.

- I am a volunteer campaign ambassador for Cancer Research UK & would like to see more commitment locally in education regarding children obesity also ensure a big commitment to ensuring local smoking cessation services continue & are enhanced. With regards activity & exercising in my opinion it would be a benefit to have a person or forum where all that currently exists is shared & linked together helping it be more effective & available throughout the various health forums.

All of the additional comments received can be viewed in full at Appendix C.

## Digital communications

### Website

Prior to undertaking this dedicated patient and public engagement phase, a specific self-care page was created on the Fylde Coast vanguard website here:

[www.yourcareourpriority.nhs.uk/self-care](http://www.yourcareourpriority.nhs.uk/self-care).

This served as a central point for information relating to the development of the self-care strategy and provided a link to the online survey for members of the public to complete. The vast majority of social media posts relating to the self-care strategy during this period directed people to this dedicated page.

Between **12 December 2016** and **15 February 2017** there was a total of **317** visitors to this web page.

### Twitter

Between **12 December 2016** and **15 February 2017** there was a total of **33** Tweets posted by the Fylde Coast vanguard's and partner's corporate accounts related to the self-care strategy. The majority of these directed people to the dedicated website page as above with an encouragement to complete the online survey.

These Tweets, received **83 retweets** and this resulted in **13,197 impressions**; which are the number of opportunities to see these specific tweets.

### Facebook

Between **12 December 2016** and **15 February 2017** there was a total of **35** Facebook posts related to the self-care strategy by the Fylde Coast vanguard's and partners' corporate Facebook pages. The majority of these posts directed people to the dedicated website page as above with an encouragement to complete the online survey. These Facebook posts received 58 shares and resulted in a total reach; which is the number of people who potentially saw these posts, of at least **187, 721**.

## Media

One press release was issued in order to promote the online survey and encourage more people to complete this. The press release was uploaded to partner's websites and generated an article in each of the Blackpool Gazette, Lytham St Annes Express and Fleetwood Weekly News.

## Appendix A - Stakeholder event report

As part of the Fylde Coast Vanguard programme, partners are developing a Self-Care Strategy with a focus on prevention of illness amongst the local population.

A Fylde Coast Self-Care Strategy Steering Group has been formed to oversee the development of this strategy and an event was held on Wednesday 16 September at the Winter Gardens, Blackpool, to officially launch the development process.

The event was open to a wide range of local stakeholders with members of the public invited to attend alongside health and care professionals, clinicians and representatives of third/voluntary sector organisations.

The event was promoted widely via direct email invitations to known stakeholders, social media activity across all vanguard partner organisations accounts, presentations to local patient groups and sharing of posters for display in a wide variety of locations.

The event was attended by more than people with the majority of these attending in a professional capacity. However, some members of the public did attend the event although the total number was small in comparison to professionals.

Attendees heard presentations from the following which set context for the day with a view to stimulating further thinking from attendees.

- Meena Patel, empowering patients and communities delivery partner at NHS England, who presented an emerging national framework for community activation.
- Nick Dixon, commissioning manager at Stockport Council, who presented best practice examples from the Stockport Together vanguard.
- Dr John Howarth, clinical lead University Hospitals of Morecambe Bay NHS Foundation Trust, who presented further best practice examples from the Better Care Together vanguard, in particular regard to the Millom area.

Attendees were then tasked with addressing two specific questions via round table discussions. These questions were:

1. What assets are you aware of which currently exists across the Fylde Coast and could help enable self-care? These could be physical places, services or individuals.
2. How can we encourage more people to capitalise on these assets?

On the whole, there was a general consensus from this exercise that the Fylde Coast possesses a lot of assets to enable self-care. These included a range of natural assets such as walking routes by the coast as well as a range of built environments and services. However a theme which emerged was that these are not always utilised as much as possible and that awareness amongst the general public is limited. It was also raised that individual's motivation to self-care is a significant limiting factor also.

The afternoon section of the event saw attendees rotate around a number of workshops which focused on the following topics:

1. Directory of services
2. Health coaching
3. Education and training



4. Health and wellbeing
5. Technology

Feedback from each of these workshops was as follows.

### **Directory of services with Louise Ivell – Feedback**

**Louise Ivell currently leads on the Family Information Service (FIS) at Blackpool Council. This is a free, impartial service offering information, advice and assistance on childcare as well as general information on a wide range of services for children, young people, and their families and professionals working with families. Using this experience, Louise and colleagues will be leading on the development and day-to-day management of a new Fylde Coast wide Directory of Services which is being created as part of the vanguard programme. This will provide a one-stop-shop for information about for all local statutory services, third sector groups, community groups and other peer support activities across Blackpool, Fylde and Wyre.**

Q. What do you like or dislike about the idea of a directory?

- Only limited with people with internet
- Good look and feel. Need to ensure it's optimised for mobile devices and needs to meet accessibility standards.
- Some of the information is out of date; some of the information is missing. Great concept but how many people know about it/use it i.e. is it the best use of resources/value for money?
- Often out of date and not attractive to everyone.
- Very good idea, information in one place.
- 'One stop shop'
- Central Point
- Not everyone is able to use internet. Older people may need this on paper.
- It would be great to know what's available in your area.
- As a practitioner who requires fast access to services I like the site and it will make signposting much quicker.
- 'About time'

Q. What would you like to see in the directory?

- Adult learning
- Support services available such as enhanced primary care
- Walking groups, interests, societies etc.
- Up to date information
- Visual graphics, attractive, up to date and No Jargon!
- Anything & everything
- Leisure group programme
- 'Everything'
- Vacancies in care homes, contacts for public and who to contact and lots of community assets
- Confidence in wellbeing, food health, social issues, IT, Maths, English, Mental health support, Healthworks.
- Have you been in contact with B & F College as they have a huge remit
- Is there a hard copy? Details of the Local area only, no adverts, up to date contact details.

- What is available within Districts for areas of health and social care
- Education and courses for adults. Jobs clubs
- A one stop shop for everything.

Q. Would you or others feel comfortable using this type of resource?

- Providing they have access to the technology
- Yes! (x 8)
- I would but others wouldn't
- Most people would be comfortable using this
- Need IT skills to use it
- Yes, it would benefit so many people professionally and personally

Q. What do you think are the best ways of letting people know this resource is available?

- Library, NHS support services, GP surgery, Schools – from Primary
- Link to it from CCG websites, GP surgeries. Link from voluntary services and groups who feature in the directory
- Every conversation I will have with clinicians and professionals
- Public transport, bus, tram taxi
- Word of mouth
- Gazette, GP surgeries, JCP
- By continuous updates/alerts to all community links
- Word of mouth, social media and local councils
- Radio and Buses
- Via communities and key figures, frontline service staff, hospitals, dentists, GPs, Community nurses, Banks, Supermarkets and stickers with website details.
- Social media, partnerships with other agencies, email and website
- Leaflets and posters in community centres
- Posters, buses, trams and radio

Q. Any other comments

- Well delivered
- Great idea. Needs to be kept updated on a regular basis
- Very useful resource, one stop shop hopefully
- Could we have pages that print lists e.g. homeless directory, pharmacy, opening times etc
- Good luck

### **Health coaching with Vanda De Freitas - Feedback**

**Vanda De Freitas is the service manager at Healthworks in Blackpool, a new integrated health, wellbeing and employment service which will be housed and delivered from a central hub. In addition to referrals from professionals and partner agencies, it also offers a drop-in self-referral facility for health and employment information, self-care advice, support and access to services.**

**Health coaching is an element of self-care for those who may need support to change their behaviours. Health coaching aims to help people to set goals and take actions to improve their health or lifestyle. Health coaching is a niche of the coaching profession and can be described as: “unlocking a person’s potential to maximise their own performance. It is helping them to learn rather than teaching them”.**

Q. What are your initial thoughts about health coaching?

- Good idea on a 'one to one' basis
- I think it should start at a young age and be part of learning – through primary care and secondary education, so people don't learn the poor behaviours in the first place
- A positive endeavour and should provide additional knowledge & support for a wide range of 'other' conditions
- Excellent idea
- Never heard of it, presumed to be for young unemployed
- People felt better connected and a better quality of life (already been health coached)

Q. Would you be interested in health coaching as a way to improve your health?

- No
- Leave as soon as you can – Stay as long as you can
- Link with EPC and Lancashire Wellbeing service
- Yes
- No, too busy elsewhere in retirement

Q. Have you tried this type of 'goal setting' approach before?

- Yes x 2
- On a personal and professional level I try and set goals
- No

Q. Any other comments

- Health & wellbeing should be a part of schools curriculum
- Use video conferencing-Virtual sessions. 'Teachable' to record your knowledge in bite sized lumps to provide remotely
- Think it's really positive – The buddy role will help people to make changes
- System called 'Teachable' records videos for people to access them
- This needs to link in with technology to allow people to access online.
- Duplication of services, differences geographically but same service. Lancashire and Blackpool
- Could be really powerful if brought into schools. Proactive and influence behaviour earlier. Need to target families maybe they could be referred to health coaching from school
- Could cause a reliance on the coach/buddy
- Early education is key – People need to develop good behaviours better than 'unlearning' bad behaviours.
- Leave as soon as you can, stay as long as you need ethos needed as different people will need different lengths of support

### **Health and wellbeing with Lee Boyer - Feedback**

**Lee Boyer is the Sports Development Manager for Schools, Communities and Health at Blackpool Council.**

**The focus of his workshop was on health and wellbeing and what that means to the individual. Lee explored what prevents someone from making a behaviour change and the barriers to attending group activities.**

Q. What does health and wellbeing mean to you?

- Feeling confident and empowered
- Being the best I can be both mentally, physically and emotionally
- Exercise, diet and lifestyle
- Mind and body are happy
- Brings people together, information sharing, community inclusion and beats isolation
- Promotes communication and positive outcomes around both physical and mental health
- Self-motivation/independence/meeting the needs of the individual
- Social aspect most important
- Interaction opportunities, socialising, combatting isolation, information sharing

Q. What would be the barriers to/prevent you accessing or starting your own group?

Location, money, confidence...?

- Location and confidence
- Time and job restrictions
- Apathy or no relevance
- Confidence to start own group and knowledge
- Better publicity (leaflets not always available), cost of facilities, shyness/confidence, transport/accessibility/mobility, lack of good leaders in community, lots of groups but badly run, nobody wants responsibility, leaders don't have skills to motivate members (training issues), legal and health & safety rules in creating groups makes it prohibitive, some groups are not welcoming, poor first experience stops people coming back
- Some people don't want to be in groups – various needs and interests that are not always catered for
- Financial/transport/accessibility/mobility/locality/dark night and timing
- Austerity/fear/apprehension... 'will I fit in?'
- Cost of activities may deter some people
- Health and wellbeing may not be a priority i.e. People going to food banks could be offered an exercise/activity at the same time
- Empathy
- Gender differences – Men will go to the gym alone and women won't! More available for one sex than the other
- Availability of choices that will appeal to all interests
- Getting people through the door – Environment can be daunting, new place, never done it before, everyone looking at me
- Understanding of outcomes – It will make me feel better...How? Why should I?

Q. Would you feel comfortable accessing activities that support health and wellbeing?

- Yes x 4
- No x 1

Q. How do you source information relating to health and wellbeing?

- Internet x 2
- A global directory is needed
- Should be on the directory of Services

Q. Any other comments/issues or concerns?

- I believe lots of people need confidence to take part and engage
- Educate – It's not just about going to the gym and it can be 'free'

- Remove need for 'committees' to run groups
- Maximise opportunities i.e. if people don't want to use municipal pool they shouldn't have to and should be able to use hotel pools and know where they are.
- Improve information on a range of services i.e. want to know about nutrition
- Social media allows a 'virtual group' which could lead to joining physical groups
- Create car sharing/community volunteer drivers
- Educate people about need
- Create bus schedule tailored for access to classes/groups
- Identify 'hard to reach' groups/create groups that appeal to all groups i.e. a young person wouldn't go to a group with older people
- Go with people for the first time
- Start small – won't have to join large community groups i.e. could join PPG and get used to being involved
- Even when there doesn't seem to be an opportunity...there is!
- If nobody willing to start a group could maybe ask college students
- Practitioners need to be more aware of the things available
- Social media only one tool
- Use places people are using to promote groups i.e. launderette
- Start groups that may not already exist that people want
- Ensure the groups are sustainable

### **Education and Training with Davinia Jackson - Feedback**

**Davinia Jackson is a project coordinator for Adult and Community Learning at Blackpool Council. Davinia discussed all aspects of training and education available to people across Blackpool, Fylde & Wyre. Self-care education can include any form of education or training for people with long-term conditions which focuses on helping people to develop the knowledge skills and confidence to effectively manage their own health care.**

Q. What training and education would work for you and why?

- Groups, supportive peers, needs to be personalised

Q. What training and education wouldn't work for you and why?

- Feeling 'told off' or 'dictated to' and feeling involved, something that suits me

Q. Where would you prefer these sessions to be held?

- In Localities, reduce travel needs
- Locally in the community I live in

Q. What are best ways of letting people know this training and education is available?

- GPs, Nurses, Social Workers, Care Homes
- Local media, buses and posters

Q. Any other comments/issues or concerns?

- Work with the Local College as part of the local offer to people across the whole Fylde Coast. Alan Cavill is the chair of B & FC and will be able to offer advice.
- Personalisation – courses and classes need to tailor and meet individual needs instead of repeated generic approach.

- Key driver for accessing this support was personal motivation to take back control, also logical step in improving in addition to the statutory service help already getting.
- Need to be accessible – use public locations i.e. library
- Think outside of health i.e. what other skills/backgrounds would provide benefit...teachers/counsellors
- Care is fragmented – It doesn't always need to be controlled by a GP
- Current courses and educational training isn't coordinated
- Title alone 'adult learning' is potentially a barrier – negative connotations of school type environment and possibly switches people off and doesn't encourage access
- Better promotion and awareness.
- How does it link in with wider community, it's about partnership work, staff need to go out and promote the service

**Technology with Glyn Jones - Feedback Form**

**Glyn Jones is the Innovation Programme Manager for the Lancashire and Cumbria Innovation Alliance Test Bed programme. This programme involves the roll-out of technology to aid self-care amongst four distinct cohorts of Fylde Coast patients.**

Q. Have you heard of this work prior to today? What are your initial thoughts?

- Yes – looks good
- Yes –Great
- Yes
- No – Good
- No – Too advanced for pensioners!
- No – Initial thoughts – cost to NHS
- No – Good idea
- No – What an excellent idea

Q. What do you like or dislike about this type of technology?

- May be difficult for older people to learn to use or remember how but....it is quite easy!
- All
- Agile and responsive
- Like – Ease plus impact on the system. Dislike – Potential to reduce human interaction and increased anxiety with patients
- Too advanced for pensioners!
- Removes contact from the most socially vulnerable
- Take away interaction with real people if on own
- How people can take ownership of their conditions and assist GPs and nurses in rewarding the information

Q. Would they feel comfortable using this type of resource?

- Yes – not sure about my 80 year old parent who regularly mixes up his TV controls
- Yes
- Variable – Pitch will make/break
- No – pushes up blood pressure
- I doubt it
- If technically savvy
- I would hope do as this benefits the patient

Q. What do you think are the best ways of letting people know this resource is available?

- Front line community staff need to know the detail around this in order to identify appropriate people
- GP/Pharmacy
- Via existing services they are working with
- Local newspaper
- I wouldn't
- GP and Hospital
- Newspaper, letters from GP, via appointments at practice, social media

Q. Any other comments

- Are people to buy their own boxes or will they be provided for the duration of the acute care need? We can assist you to identify patients with the conditions listed via Care Plans and those who have regular contact with the OOH services.
- My concern Glyn is that staff connecting to people in this way are not ready to embrace it.
- Ensuring family/friends are informed to enable them to support the patient with engaging with Tech.
- Dislike

## Appendix B – Focus groups notes

### **Fylde and Wyre CCG's Influence Panel feedback**

17 November 2016

10 participants

Chair Nick Milne welcomed Jonathan Bridge, who gave a presentation on the work of the Fylde Coast Vanguard to drive forward new models of care in Fylde and Wyre.

The presentation updated members on extensive care and enhanced primary care, before asking questions about self-care.

The Vanguard is looking to develop a self-care strategy to ease the pressure on local NHS services by making people better equipped to look after themselves and lead healthy lifestyles.

#### **Q1: What does self-care mean to you?**

- Exercise
  - Doesn't have to be vigorous – Just doing a bit of walking perhaps pushing the grandchild around in their pram
- Eating well and exercising
  - Keeping your weight down
- Making sure you attend health screenings such as cervical cancer

#### **Q2: What are some of the things that stop you or others from being able to better self-care?**

- Motivation (or lack of it)
- Cost
  - Post-surgery classes only last a short period of time and are charged afterwards so people stop going
- Self-confidence/image – especially when doing exercise in public
  - Feeling of inadequacy when using the gym
- Access problems
- Inability to get out of the house
- Environmental factors – e.g. if someone lives next to a busy main road
- No reminders posted out regarding flu jabs so some people may not take them up
- Activities are often run by different organisations who access funding from various places and do not want to share it – integration could be difficult because of the red tape

#### **Q3: How can we better coordinate the various resources and information to help you and others self-care?**

- Make sure the exercises available fit in with people's capabilities
- Needs to be taught in schools so they know what to do and when it is their responsibility
- Better communication and coordination
  - Make the GPs aware of what is out there – Directory of Service



- Promote camaraderie or making new friends. Social aspect could encourage some to get involved in group activities.
- Gender/age specific gyms/gym sessions
- Target breast-feeding and how it has huge health benefits for both mother and baby – Fylde coast has low rates of breast-feeding compared to national average
  - Also target smoking in pregnancy which has high prevalence in Fylde coast
- Need to stop using deprivation as an excuse
- Encourage people to take control of their own health

### **Focus Group, Palatine Leisure Centre, Blackpool**

18 January 2016

10 participants

#### **Q1: What does self-care mean to you?**

- Looking after yourself by keeping fit and healthy no matter what your condition.
- Using information and advice from professionals to manage a condition.
  - These courses specifically are good because you get specialist information that works for your condition
  - It's made easy to understand and is put into perspective
    - GPs don't always have time to explain the proper benefits of the courses so you don't always understand why you need to come and what the benefits will be. Respiratory nurses were able to encourage them to go to the classes better than the GPs.

#### **Q2: What are some of the things that stop you or others from being able to better self-care? Or what made you attend these classes and self-care?**

- The authority of the GP referring them to the class was what motivated them to come. If it was just something they could come to as they pleased they probably wouldn't have bothered based on what they knew about it before they attended.
- There needs to be more promotion of the services on screens and leaflets in GP practices.
- Another motivator was the fear of getting worse.
  - There comes a point where you realise that you can't do a lot of things. By that point it can be too late but you realise you have to try to make sure you don't get any worse. That's when coming to these classes becomes more appealing.
- Another selling point is just the social aspect and the fact you have to get out of the house to do it.
  - If you stay in at home you get lazy and stuck in front of the TV so you talk yourself out of doing anything and just end up sitting there.

#### **Q3: How can we better coordinate the various resources and information to help you and others self-care?**

- It would be good if people on the classes could then get a discount to join the gym so they can carry on using the equipment they have become familiar with
- Need more information on what's available
- Maybe something in the link magazines or in the Gazette or an app.
- Make classes and exercise opportunities free

- Provide more night school classes
- Big selling point would be learning something new or more about an interest. Used to be able to do night classes but they don't seem to be available as much now and are all for 'adult learners' who want qualifications and things like that instead of just wanting to know how to do little things.
  - They don't have to be exercise classes because just getting out of the house can be the exercise people need and it makes you meet new people.
- Provide more amenities.
  - Going for a short walk around the town or around Stanley Park is impossible for older people because there aren't enough public toilets or benches are too far apart so if you need to stop for a rest you can't because there isn't anywhere.

### **Focus Group Feedback, Moor Park Health and Leisure Centre**

19 January 2016

8 participants

#### **Q1: What does self-care mean to you?**

- Keeping active by walking on exercising in whatever way you feel comfortable an able to.
- Eating a healthy diet
- Generally looking after yourself so you stay as well as possible.

#### **Q2: What are some of the things that stop you or others from being able to better self-care? Or what made you attend these classes and self-care?**

- It's good to learn about exercise
  - There are things you think you know but may have been doing wrong so you don't get the benefit
- People know they need to exercise but they become lazy and just don't want to.
- I know I needed to exercise so I did something about it.
  - My condition was getting worse so I knew I had to do something to stop it.
- I didn't want to come to classes until I knew about them.
  - I wasn't interested in doing exercise etc. but then I was told about the classes and decided to try just as a way of getting out of the house
- The classes and activities need to be promoted better
- GPs should tell of the classes before the condition gets to a point where they are needed to help cope with the condition
  - They should be used to stop it getting worse rather than used when it already has got worse
- The social aspect is good for wellbeing
- You get motivation from the other people on the classes. That's a big selling point
- Seeing your progress helps and makes you want to do more
- You get a bug for doing it when you see the benefits and you want to push yourself harder to do and achieve more but there's only so much you can do in a short time.

#### **Q3: How can we better coordinate the various resources and information to help you and others self-care?**

- Sometimes having to be referred is a bad idea because you have to go through that extra process

- There are things going on in libraries that nobody knows about. The libraries should promote them better and do it outside of the library so everyone can find out about it and not just those that go to the library regularly
- Could community groups not be used to push information booklets through doors
- Link magazine is very good for tradespeople so could that be used to include local classes and groups?
- You shouldn't rely on internet to promote and provide information because the other people don't know how to use it or where to find things like that
- Could the Gazette not be asked if you could have a page or something every week saying what's on in terms of classes and groups that week?
- It would be good to have follow on classes to these course that are more difficult
- If you're a carer for someone with a condition they should be able to come to the classes with you so you don't have to worry about leaving them
  - Likewise if you care for someone with a condition you should be able to go to a class on their behalf so you can go home and show them what to do if they can't get to the class themselves.
- It would be good if things like exercise bikes could be hired for the home so you can use them either during the six weeks you're doing a course or for a short period afterwards so you can keep it up
- When asked about their willingness to access local community run groups:
  - They would be great if they were run by someone who knew what they were doing
    - Just doing it for the sake of doing it is fine but if they don't have the expertise to do it properly they could be doing more harm than good
  - Local groups would be better because getting to classes can be difficult