

PWYLLGOR DATBLYGU STRATEGOL A CHYFLENWI GWEITHREDOL STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	24 February 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	Public Services Board – Assessment of Local Well-being
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies, Director of Strategic Development and Operational Planning (on behalf of Ros Jervis, Director of Public Health)
SWYDDOG ADRODD: REPORTING OFFICER:	Anna Bird, Assistant Director – Strategic Partnerships, Diversity and Inclusion

Pwrrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

The Well-being of Future Generations (Wales) Act 2015 (WFGA) became law in April 2015 and provides a legislative framework aimed at improving the social, economic, environmental and cultural well-being of Wales.

Hywel Dda University Health Board (HDdUHB) has both individual and collective responsibilities under the Act and the Board, via the Strategic Planning and Operational Delivery Committee (SDODC), will need to be assured that arrangements are in place, and action is being taken to ensure compliance with these responsibilities.

The purpose of this report is to provide an update on the work which is ongoing to develop an Assessment of Local Well-being for each PSB, which are due to be published no later than May 2022 in line with legislative requirements.

Cefndir / Background

The Well-being of Future Generations (Wales) Act 2015 requires each local authority area in Wales to establish a Public Services Board (PSB). HDdUHB is therefore a member of Carmarthenshire PSB, Ceredigion PSB and Pembrokeshire PSB, and is represented on these strategic partnerships by the Chair, the Deputy Chief Executive/Medical Director and the Director of Public Health.

The WFGA places a collective well-being duty on each Board to improve the economic, social, environmental and cultural well-being of its area through its contribution to meeting seven national Well-being Goals established by Welsh Government. In broad terms the well-being duty means that a PSB must:

1. Assess the state of well-being in its area (i.e. prepare and produce a “Local Assessment of Well-being”). The first Assessments were published in May 2017 and must be refreshed at least once in every electoral cycle.

2. Set local objectives (i.e. “Well-being Objectives”) to maximise its contribution within its area to achieving the national Well-being Goals.
3. Prepare and publish a plan (i.e. “Well-being Plan”) setting out its local objectives and the steps it proposes to take to meet them.
4. Take all reasonable steps to meet its objectives.

Work has been on-going to refresh the Assessments of Local Well-being since March 2021 and regular progress reports have been presented to the Public Services Boards and included in the Statutory Partnership Update reports received at each meeting of HDdUHB Board. The purpose of the Assessment is to gain a comprehensive picture of the state of well-being of local people and communities, now and for the future. The Assessment seeks to capture a broad spectrum of economic, social, environmental and cultural factors that impact on people’s daily lives. This includes identifying the strengths, assets, challenges and opportunities that citizens in each local authority area face.

The Assessment will be used as the evidence-base to set the objectives in the Local Well-being Plan that must be published within 12-months of the Assessment. The Well-being Plan will set out how the PSB will improve the well-being of its communities against seven national well-being goals over the next 5 years. PSBs are required to set these objectives in a way that accords with the sustainable development principle i.e. act in a manner which seeks to ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

Producing a robust and accurate assessment of well-being, which places the views and needs of the residents of Hywel Dda at the forefront, is critical. The Assessments will also provide valuable insights to the Health Board to support its own strategic planning, operational delivery and transformation agenda.

Asesiad / Assessment

The publication of a PSB Assessment of Local Well-being is a requirement of the Well-being of Future Generations (Wales) Act 2015. Crucially, involving people and communities is at the heart of improving well-being, therefore, engagement and consultation has been one of the activities undertaken alongside the analysis of existing sources of data and information.

Building on the collaborative arrangements established in 2017, the three PSBs worked in partnership to establish a joint methodology framework and joint engagement plan to support the county based work to refresh the Assessments of Local Well-being. The PSBs used the Regional PSB Support Grant to recruit a Project Coordinator to assist with the preparation and production of the Assessments and Ceredigion County Council has been managing the post on behalf of the three PSBs. In addition, a PSB/RPB Network comprising of PSB leads from the three counties, representatives from Hywel Dda University Health Board and the Regional Partnership Board (RPB), have been meeting on a monthly basis to oversee progress and identify opportunities for shared learning and alignment of activity.

The three PSBs and the RPB have worked in partnership to align the development of the Local Assessment of Well-being (Assessment) and Population Assessment (required under the Social Services and Well-being (Wales) Act 2014, to provide a standardised approach to conducting the engagement and consultation activity.

A regional on-line survey was developed and engagement activity took place during the late summer and early autumn 2021. HDdUHB supported this activity in a number of ways, including arranging the translation of the survey into a number of community languages and

actively promoting this through the Health Board's Community Development Outreach Team who are working specifically with minority ethnic communities as well as those who face barriers to accessing health care provision e.g. those who are homeless, refugees and gypsy and traveller communities.

In total there were 1,333 responses to the on-line survey, in addition to the written comments received from the stakeholder events and those submitted via Engagement HQ, which was used by some local authorities and HDdUHB as an engagement tool. Although the number of respondents was less than the number of people engaging in the 2017 Assessments, it is acknowledged that restrictions relating to the COVID-19 pandemic impacted on the extent to which more traditional methods of engagement could be undertaken i.e. face-to-face events and meetings.

As part of the Health Boards commitment, the Local Public Health Team and Strategic Partnership, Diversity and Inclusion Team undertook analysis of the health and well-being questions within the regional Well-being Survey and produced a summary report which is attached as Appendix 1.

The survey included three free-text answer boxes within the health and well-being section of the survey. These were questions 35 to 37 and responses were assessed and grouped into themes which formed the basis of this report. Thematic analysis of the survey responses highlighted some consistent themes emerging from residents across all three local authority areas. The greatest number of responses received to the question 35 "Looking ahead, what could you do to improve your own physical and/or mental well-being?" mentioned a comment relating to exercise which included staying active, exercising more or keeping physically fit. This was mentioned most by residents of all local authorities as well as those self-identifying as having a disability or being over 65 years of age. The second most common response for all groups was staying connected to friends, family or community groups. The third most prevalent theme was accessing green space or getting outdoors which overall was commented on by more residents in Pembrokeshire. A key theme for residents in Ceredigion related to self-care. This theme was also highlighted by people who self-identified as having a disability and they were also concerned about easier and better access to healthcare services.

The greatest number of responses received to the question 36 "What, if anything, would need to be in place for you to do these things?" mentioned a comment relating to leisure facilities. This included affordable or free leisure facilities and greater availability of, or access to, leisure and exercise classes e.g. for different ages or at different times. The second most common theme related to comments on improved or improved access to healthcare services (including primary care, secondary care, mental health services and dental services). This theme was common for respondents from Pembrokeshire, those self-identifying as having a disability and those over 65 years of age. In Carmarthenshire respondents commented on 'routes' which included walking, cycling and riding routes or areas that are safe and well maintained.

Access to support, housing and transport were also more significant themes of those self-identifying as having a disability or over 65 years of age which reflect the impact of wider determinants of health and well-being. Local community groups, activities or courses was a theme which was mentioned more frequently by residents in Pembrokeshire. Respondents over 65 years of age were also concerned about opportunities for learning and maintaining a healthy diet.

The analysis and findings from the regional Well-being Survey were incorporated into the development of the draft Assessments of Local Well-being and also fed into the development of the Population Assessment.

Whilst the overall date for publication of the refreshed Assessments are the same i.e. by May 2022, there have been differences in the timing of each PSB consultation on their draft Assessments. For example, Carmarthenshire PSB's consultation concluded on 20th January 2022, Ceredigion's consultation concluded on 28th January 2022 and Pembrokeshire's consultation did not commence until January 2022 and concludes on 21st February 2022.

At the time of writing this report, each PSB Team are aiming to finalise the Assessments for approval at their scheduled PSB meetings in March 2022: Ceredigion PSB – 7th March; Carmarthenshire PSB – 8th March and Pembrokeshire PSB – 15th March 2022. Whilst there is no statutory requirement for Health Board endorsement of the Local Assessments of Well-being, it is proposed that the final versions will be presented to the Strategic Development and Operational Delivery Committee on 28th April 2022, prior to presentation to Board on 26th May 2022.

To support the current and future Assessments of Local Well-being, the PSBs are working in partnership to test a Digital Information System ("Gorwel") developed by Writemedia on behalf of the three PSBs. The system will be used to provide metrics, qualitative data, dashboards and reporting functions. Work will continue over the coming months to make the system fully operational and a joint presentation across the three PSB areas will be arranged to officially launch the system. The system is intended to provide a central repository for all PSB members, stakeholders and citizens for the ongoing recording and analysis of data relating to well-being. Its aim is to support the future production of the assessments by making the collation and analysis of quantitative and qualitative data quicker and easier.

Argymhelliad / Recommendation

The Committee is asked to note:

- the overview of the Heath Board's involvement in the process of developing the PSB Assessments of Local Well-being;
- the attached report which was prepared by HDdUHB to summarise the responses to the health and well-being questions within the regional Well-being Survey; and
- the proposed timelines for approval of the Local Assessments of Well-being by each PSB, and subsequent presentation to SDODC and Board.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference:

Cyfeirnod Cylch Gorchwyl y Pwyllgor:

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| | <p>2.1 To receive an assurance on delivery against all relevant Planning Objectives falling in the main under Strategic Objectives 4 (<i>The best health and wellbeing for our individuals, families and our communities</i>) and 5 (<i>Safe, sustainable, accessible and kind care</i>), in accordance with the Board approved timescales, as set out in HDdUHB's Annual Plan.</p> <p>2.3 Provide assurance to the Board that, wherever possible, University Health Board plans are aligned with partnership plans developed with Local Authorities, Universities, Collaboratives, Alliances and other key partners</p> |
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Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Well-being of Future Generations (Wales) Act 2015
Rhestr Termau: Glossary of Terms:	Contained in the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol: Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	Carmarthenshire PSB Ceredigion PSB Pembrokeshire PSB

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	N/A
Ansawdd / Gofal Claf: Quality / Patient Care:	The Assessments of Local Well-being highlights the needs of the population in terms of social, economic, environmental and cultural well-being.
Gweithlu: Workforce:	N/A
Risg: Risk:	N/A
Cyfreithiol: Legal:	N/A
Enw Da: Reputational:	N/A
Gyfrinachedd: Privacy:	N/A

Cydraddoldeb: Equality:	N/A
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Well-being Assessment Report November 2021:

Qualitative analysis of health and wellbeing questions within the regional Public Services Board well-being surveys in the Hywel Dda University Health Board area

Background

The publication of a Public Services Board (PSB) Well-being Assessment is a requirement of the Well-being of Future Generations (Wales) Act 2015. Effectively involving people and communities is at the heart of improving well-being, therefore, engagement and consultation has been a key priority for PSB partners.

The three PSBs and the Regional Partnership Board worked collaboratively and developed a Regional Engagement and Consultation Framework. This provided a standardised approach to conducting the engagement and consultation activity for the Assessment of Local Wellbeing across the three PSB areas of Carmarthenshire, Ceredigion, and Pembrokeshire, and align with the work which is on-going to refresh the Population Needs Assessment.

An ‘engagement led’ approach was taken to ensure the views of our citizens are at the heart of the next set of PSB Well-being Plans. Engagement and Consultation are critical sources of information - they provide **qualitative data** which will help us to understand people’s lived experiences, attitudes, and stories. Furthermore, this process will help identify gaps in the data and point to those groups that may be ‘hidden’ in numbers (for example, the homeless community). It will also complement the **quantitative data** gathered from the Well-being Survey, resulting in deeper and more ‘nuanced’ insights.

Engagement work with partners, stakeholders and citizens took place during August–October 2021 and initially focused on encouraging the completion of a Well-being Survey and targeted Focus Group discussions. Each PSB had its own survey, available in Welsh, English, Polish, Arabic and Romanian to reflect the most prevalent community languages. An Easy Read version was also developed and citizens were able to complete the survey on-line or as a paper copy.

The Health Board, as a key statutory partner of the PSB, and provided specific support for the analysis of the Well-being Survey questions linked to “A Healthier Wales” which will contribute to the PSB Well-being Assessments, Population Needs Assessment and provide valuable insights to support the core work of the Health Board.

Methods

The PSB ‘have your say’ wellbeing survey was carried out over 13 weeks and included an online survey and postal responses which were then inputted into the online database. The survey included three free-text answer boxes within the health and well-being section of the survey. These were questions 35 to 37 and these were included in this qualitative analysis. Respondents who completed the survey but did not input any free text for any of these three questions were not included in the analysis.

A thematic analysis was used and inductive coding with an iterative process of theme creation. Responses were assessed and grouped into initial themes. Once over half the responses had been looked at by two individuals, the common themes became clearer. These were used as the main themes in the analysis and each theme was assigned a ‘code’ or ‘keyword’. These themes were revisited over the remainder of the responses and informed by any new patterns emerging within the dataset. Any change was then reapplied to all responses.

No more than four themes were identified in any given answer for question 35, while no more than three themes were identified in any given answer for question 36. Hence, each answer for question 35 could be assigned up to four different ‘codes’ relating to four different themes and each answer for question 36 could be assigned up to three different ‘codes’.

Using Microsoft Excel™, the number of times each code had been assigned to the responses for each question could be counted. This was then extended to count the number of times each code, and hence theme, had occurred in subgroups of respondents – including those who answered ‘yes’ to having a disability, those aged 65 and over, and broken down into the three counties (Carmarthenshire, Ceredigion and Pembrokeshire). This count was then expressed as a percentage of the total number of respondents who had entered any free text for that particular question and were in each of these subgroups.

As a quality control measure, a random 10% of the responses were independently coded using the same set of themes and corresponding codes/ keywords by a second person. This resulted in a very high level of agreement in coding.

Findings

A total of 1333 surveys were completed. 573 surveys did not include any text response to all of questions 35, 36 and 37. 716, 618 and 199 gave a text response for question 35, 36 and 37 respectively. Answers provided by respondents would often include multiple themes or different points. Each percentage given in the below findings refers to the number of people mentioning a comment relating to a theme, out of the total number of people who gave any text response to that question.

Themes are described below in order of prevalence for each question/ subgroup.

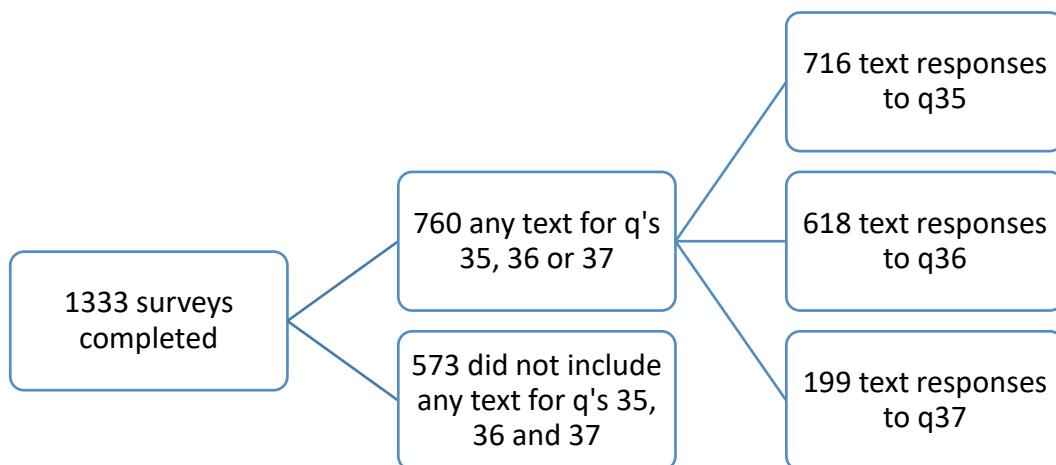


Figure 1. Flowchart of numbers of responses to question 35, 36 and 37

Question 35 – “*Looking ahead, what could you do to improve your own physical and/or mental well-being?*”

Of the 716 people who gave a text response for question 35, 48% mentioned a comment relating to exercise which included staying active, exercising more or keeping physically fit.

This was followed by 16% of those who answered this question commenting on staying connected to friends, family or community groups.

Accessing green space or getting outdoors was commented on by 9%.

A better work/life balance was mentioned by 8% of those answering this question.

8% of those answering question 35 mentioned a comment relating to looking after own wellbeing, including self-care, self-motivation and self-help.

Improving diet or maintaining a healthy diet was included by 7% of those answering.

5% of people answering question 35 made a comment relating to easier or better access to healthcare services, including primary care, secondary care and dentists.

4% of respondents giving any text answer to question 35 mentioned a comment regarding homes and housing – including affordable homes, appropriate homes or related to moving home or relocating.

4% gave answers around learning or keeping mentally active.

Having more help or support available or using support was mentioned by 4% of respondents.

Comments regarding employment or changing job/ work were provided by 3% of respondents giving a text answer to question 35.

Other themes mentioned less often included weight loss or to maintain a healthy weight, better or easier access to mental health services, and money (more money or a secure income).

Question 36 – “What, if anything, would need to be in place for you to do these things?”

Overall, the answers given to question 36 were broader in the spread of responses than to question 35.

Of the 618 people who gave a text response for question 36, 12% mentioned a comment relating to leisure facilities. This included affordable or free leisure facilities and greater availability of, or access to, leisure and exercise classes e.g. for different ages or at different times.

12% of people commented around improved access to and improved healthcare services, including primary care, secondary care, mental health services or dental services.

Linked to the theme of access to leisure facilities, 8% of respondents made a comment related to ‘routes’, which included availability of walking, cycling and riding routes or areas, that are also safe or well maintained.

Support, whether this was being listened to or supported, improved social care support and support from employers, was mentioned by 8% of those giving a text answer to question 36.

7% mentioned local community groups, activities or courses.

7% commented in their answer to question 36 on ‘themselves’, for example self-motivation, willpower, mind-set or better personal time management.

Access to and good quality of green and outdoor space was mentioned by 6%.

Improved public transport or access to help with transport was commented on by 6%.

5% commented on a better work/life balance, working less hours/flexible working or retiring.

Money, including security of income and higher wages or pension was commented on by 5%.

5% gave answers relating to more funding e.g. for local services (such as health and social care) and more funding/ investment in local communities and groups.

5% mentioned a comment relating to affordable homes and running costs, or help with rental and owned property.

Other themes included availability of or easy access of information about local groups, services or volunteering, and free/affordable and available childcare.

Question 37 – “Any other comments”

Question 37 was less commonly answered than the previous two questions with 199 text responses. It was felt that the answers to this question were predominantly a reiteration of previous points, very specific/ personal or very broad/ unrelated to the topic of health and wellbeing. Therefore, there were no clear themes and no further analysis was performed on the answers to this question.

Subgroups

Answer to questions 35 and 36 were then broken down into subgroups to identify any possible differences in answers to the whole survey population. This included looking at responses from those answering that they lived in each county (Carmarthenshire, Ceredigion and Pembrokeshire), those regionally answering ‘yes’ to having a disability or long-term health problem, and those regionally aged 65 and above.

Carmarthenshire

Question 35

There were 320 text responses to question 35 from respondents who answered that they lived in Carmarthenshire.

51% of people living in Carmarthenshire who answered the survey mentioned more exercise, keeping fit or staying active.

13% commented on staying connected with friends, family or community groups, or socialising more, with answers including “...meet with family and friends regularly...”, “...stay in touch/ see loved ones” and “...meet and get to know more people...”.

This was followed by getting outdoors/ accessing green space (8%), looking after own wellbeing (e.g. self-care, self-motivation) at 8% and improving or maintaining a healthy diet (8%).

A better work/life balance or working less hours/ retiring was mentioned by 8% of those in Carmarthenshire who answered question 35.

Answers given did combine comments on exercising or staying active, and accessing green spaces or getting outdoors. Examples include “keep visiting beaches and other local beauty spots for exercise and pleasure” and “...exercise and enjoy the beautiful natural environment around me”.

Question 36

273 of those who answered question 36 also answered that they lived in Carmarthenshire.

12% of these people commented on ‘routes’ which included walking, cycling and riding routes or areas that are safe and well maintained. Comments included “local footpaths maintained, most are impassable due to overgrowth, rubbish or land

owners blocking them”, “more bridle paths...”, “well lit paths”, “more cycle paths...” and “footpaths away from traffic”.

10% commented on improved or improved access to healthcare services (including primary care, secondary care, mental health services and dental services), such as “...effective mental health services”, “better accessibility to primary care services...” and “NHS dental care being available”.

A greater availability of, or access to, leisure and exercise classes that are appropriate, affordable or free was mentioned by 10% of those living in Carmarthenshire who gave a text answer to question 36. Comments included “cheaper/easier access to leisure centre facilities, especially the swimming pool”, “leisure centres open more” and “free or reduced fee access to gym/ classes etc”.

9% mentioned a comment relating to support – being listened to and supported, improved social care support, or support from employers.

Ceredigion

Question 35

211 respondents who answered that they lived in Ceredigion gave a text answer to question 35.

“Exercise more” or similar comment on taking exercise, staying active or keeping fit was mentioned by 37% of respondents.

17% commented on staying connected or socialising with friends, family or community groups, with comments including “getting to know more people locally...” and “...meet with friends”.

The next most prevalent theme for those living in Ceredigion was looking after own wellbeing with 9% commenting on this, including “self-care”, self-motivation or personal time management and text answers including “help myself more...” and “make time for myself...”.

This was followed by improved work/life balance (7%), accessing green space or spending time outdoors (6%) and improving or maintaining a healthy diet (6%).

Question 36

189 who gave a text answer for question 36 also answered that they lived in Ceredigion.

13% of these respondents commented a greater availability of or access to leisure and exercise classes that are appropriate, affordable or free. Comments included “better access to gyms in the more rural areas...”, “more exercise classes...” and “access to facilities at a reasonable cost”.

13% commented on improved or improved access to healthcare services (including primary care, secondary care, mental health services and dental services) such as

“...a better health service...”, “regular free health and dentistry checks” and “better access to GP...”.

A comment relating to support – being listened to and supported, improved social care support, or support from employers, was given by 8% of those giving a text answer to this question.

Better personal time management, self-motivation or willpower (comments related to the individual or ‘self’) was mentioned by 7%.

5% of those in Ceredigion who gave a text answer to question 36 mentioned local community groups, activities or courses.

5% commented on money, including more money, security of income and higher wages or pension.

Pembrokeshire

Question 35

185 people who gave a text answer for question 35 also answered that they lived in Pembrokeshire.

54% of these answered increasing exercise, staying fit or keeping active.

18% commented on staying connected or socialising with friends, family or community groups with text including “...keeping in touch with friends and family...”, “...meeting up with friends” and “...meet more local people”.

Getting outdoors or accessing green spaces was mentioned by 15% of those living in Pembrokeshire who gave a text answer for question 35, with answers such as “...spend more time outdoors”, “...getting out into the countryside...” and “access green spaces...”.

11% answered a better or healthy “work/life balance”.

This was followed by improving or maintaining a healthy diet (9%) and looking after own wellbeing (e.g. self-care, self-help) at 7%.

Question 36

156 of those who marked that they lived in Pembrokeshire also gave a text response to question 36.

17% of these respondents commented a greater availability of or access to leisure and exercise classes that are appropriate, affordable or free. Comments included “more varied times of exercise classes at leisure centres, later times in the evening... for those who work...”, “leisure centre to be affordable to local people ...”, “more swimming pools...” and “free gym/classes”.

15% commented on improved or improved access to healthcare services (including primary care, secondary care, mental health services and dental services).

Local community groups, activities or courses were mentioned by 12% of those answering this question who lived in Pembrokeshire such as “access to groups for women in their 30’s and 40’s...” and “...access to local groups and activities...”.

Access to and good quality of green and outdoor space was mentioned by 10% including “easily accessible green spaces without parking charges”, “more open green spaces...” and “...improved access to green spaces and beaches for those with a physical disability”.

This was followed by walking, cycling and riding routes or areas that are safe and well maintained (8%) and improved public transport or help with transport at 8%.

Equality lens

The data was also reviewed with an “equality” lens, in particular seeking to identify specific wellbeing needs of groups with protected characteristics. The numbers self-reporting some protected characteristics was too low to analyse, however, the section below provides an overview of the feedback of respondents who identified as having a disability or were over 65 years old.

Disability

Question 35

A total of 166 individuals who gave a text answer to question 35 also answered ‘yes’ to the question “Disability: Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least another 12 months?”.

Of these respondents, 31% commented on exercise, staying active or keeping fit, including “exercise more...” and “attend leisure centre”.

11% mentioned “socialising with people” or staying connected to friends, family or community groups.

11% commented on healthcare, including easier or better access to healthcare services with comments including “better health services...” and “easier access to my GP...”.

10% commented on looking after own wellbeing, for example “self-care”, self-motivation, self-help (“...take care of myself”).

Having more help/support and using support already available was mentioned by 10% and comments included “...support as I grow older” and “make use of support organisations I am already aware of...”.

8% made a comment on housing (which could include affordable or appropriate homes, or moving/ relocating) such as “we need to move but housing is becoming increasingly scarce and expensive”.

Question 36

157 of those who gave a text answer to question 36 also answered ‘yes’ to the question “Disability: Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least another 12 months?”.

Of these, 18% commented on improved or improved access to healthcare services (including primary care, secondary care, mental health services and dental services). Comments given included “...better health service...”, “...NHS waiting lists...” and “accessible mental health services...”.

A comment relating to “support” including being listened to and supported, improved social care support, or support from employers, was given by 16% of those giving a text answer to this question.

This was followed by comments relating to public transport or help with transport (8%), more funding and investment (for local services e.g. health and social care, or communities/groups) at 8%, and comments on housing (affordable homes and running costs, help with rental and owned property), also mentioned by 8%.

Aged 65 and over

Question 35

187 of respondents who answered that they were aged 65 and over provided any text answer to question 35.

Of these, 51% made a comment relating to exercise, staying physically active or keeping fit, with comments including “keep active...”, “walk more” and “...attending exercise classes...”.

Staying connected with family, friends or community groups and socialising was commented on by 17%. Answers included “...meeting up with friends”, “socialise with people” and “carry on being involved with the community...”.

Improving or maintaining a healthy diet was mentioned by 9% of those aged 65 and over who gave a text answer to question 35, for example “...eat well...”, “healthy diet using locally produced fruits, vegetables and other products...” and “...healthy eating...”.

Spending time outdoors or accessing green space was commented on by 7%.

7% mentioned learning or keeping mentally active e.g. “...learning new things” and “continue being as active as possible both physically and mentally...” (this answer an example of including more than one theme and also counted in ‘staying physically active’ above).

Question 36

163 people answered question 36 who also answered that they were aged 65 and over.

13% commented on improved or improved access to healthcare services (including primary care, secondary care, mental health services and dental services).

Comments included “face to face access to a GP”, “a reliable health system...” and “...waiting lists....”.

12% of these respondents commented on leisure - a greater availability of or access to leisure and exercise classes that affordable or free. This included a need for appropriate leisure facilities with comments such as “more local facilities for age appropriate exercise classes”, “more availability of classes for 60+ age group” and “...classes for the fuller figure....”.

A comment relating to support – being listened to and supported, improved social care support, or support from employers, was given by 10% of those giving a text answer to this question.

Better personal time management, self-motivation or willpower (comments related to the individual or ‘self’) was mentioned by 9%.

7% commenting on improved public transport or help with transport.

Discussion

Thematic analysis of the survey responses to Question 35, 36 and 37 have highlighted some consistent themes emerging from residents across all three local authority areas. The greatest number of responses received to the question 35 **“Looking ahead, what could you do to improve your own physical and/or mental well-being?”** mentioned a comment relating to exercise which included staying active, exercising more or keeping physically fit. This was mentioned most by residents of all local authorities as well as those self-identifying as having a disability or being over 65 years of age.

The second most common response for all groups was staying connected to friends, family or community groups. The third most prevalent theme was accessing green space or getting outdoors which overall was commented on by more residents in Pembrokeshire. A key theme for residents in Ceredigion related to self-care. This theme was also highlighted by people who self-identified as having a disability and they were also concerned about easier and better access to healthcare services.

The greatest number of responses received to the question 36 **“What, if anything, would need to be in place for you to do these things?”** mentioned a comment relating to leisure facilities. This included affordable or free leisure facilities and greater availability of, or access to, leisure and exercise classes e.g. for different ages or at different times.

The second most common theme related to comments on improved or improved access to healthcare services (including primary care, secondary care, mental health

services and dental services). This theme was common for respondents from Pembrokeshire, those self-identifying as having a disability and those over 65 years of age. In Carmarthenshire respondents commented on 'routes' which included walking, cycling and riding routes or areas that are safe and well maintained.

Access to support, housing and transport were also more significant themes of those self-identifying as having a disability or over 65 years of age.

Local community groups, activities or courses was a theme which was mentioned more frequently by residents in Pembrokeshire.

Respondents over 65 years of age were also concerned about opportunities for learning and maintaining a healthy diet.

Limitations

The methodology for the analysis undertaken has been set out earlier in the report, but it is noted that there may be limitations in drawing conclusions. The limitations are considered to include the layout of the survey; the free text boxes followed many other questions on different topics with specific multiple choice responses.

Respondents may have been influenced by previous questions and topics already raised throughout the survey.

The 'any other comments' question 37 was broad and some respondents used this box to feedback on the survey as a whole or to provide a very personal opinion/reiteration of previous points. This made any thematic analysis of these answers very difficult.

The survey could be completed in multiple different languages and answers were translated using a machine translation service. Some meaning or finer nuances could have been lost during this process.

Advantages

Multiple individuals contributed to the development of themes used and assessed answers given, helping to create a robust set of themes to code answers against. Ensuring that 10% of responses were independently coded by a second person maintained a level of quality control and aimed to minimise coder bias.

Conclusion

The PSB 'have your say' wellbeing survey was carried out over 13 weeks and included an online survey and postal responses which were then inputted into the online database. The survey included three free-text answer boxes within the health and well-being section of the survey. These were questions 35 to 37 and these were included in this qualitative analysis report.

Respondents who completed the survey but did not input any free text for any of these three questions were not included in the analysis. A thematic analysis was used and inductive coding with an iterative process of theme creation. Responses were assessed and grouped into initial themes and these have formed the basis of this report.

The greatest number of responses received to the question 35 “***Looking ahead, what could you do to improve your own physical and/or mental well-being?***” mentioned a comment relating to exercise which included staying active, exercising more or keeping physically fit. This was mentioned most by residents of all local authorities as well as those self-identifying as having a disability or being over 65 years of age.

The greatest number of responses received to the question 36 “***What, if anything, would need to be in place for you to do these things?***” mentioned a comment relating to leisure facilities. This included affordable or free leisure facilities and greater availability of, or access to, leisure and exercise classes e.g. for different ages or at different times.

In addition, responses to question 36 also included a common theme related to comments on improved or improved access to healthcare services (including primary care, secondary care, mental health services and dental services) and this was a common to respondents who self-identified as having a disability or were over 65 years of age.