



Glenrothes Locality Engagement
What Matters to You – Health and Wellbeing in
Later Life

Participation & Engagement
Feedback Report

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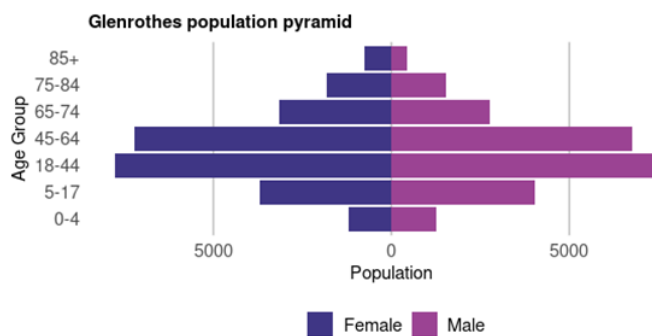
1. Introduction

Localities are at the heart of the Health and Social Care Strategic Plan for 2023-26. At the beginning of 2023, the Glenrothes Locality Core Group, along with their wider stakeholders, identified 3 priorities that they wanted to focus on for their local area. Under priority 3 '**Engage with older people in the community**' the locality group identified that they wished to engage with people 65+ (or nearing this age bracket) in their community to find out what is important to them, in terms of their health and wellbeing in later life.



The Glenrothes Locality currently has an average life expectancy of **73.9 years for males** and **79 years for females** (taken from Public Health Data).

In 2021, the total population of Glenrothes locality was **49,824**, where **48.7%** were male. 21% of this demographic were aged over 65. The graph below shows the population distribution of the locality.



The population in Glenrothes is estimated to decrease by 0.2% from 2021 to 2026.



Top Five Long-term Conditions

Those living in Glenrothes are more likely to have a long-term health condition. The 5 most common health concerns for those residing in Glenrothes are listed below. The foot of the page highlights how those living in Glenrothes compare to Fife as a whole.



Hypertension

Hypertension (high blood pressure) has been consistent over the last 5 years with **15.5%** of the population in Glenrothes having the condition. This is a slightly higher than the Fife average of **15.2%**



Depression

Rates of depression are increasing year on year in line with what is seen in Fife overall and are slightly higher in Glenrothes. The current rate is **12.9%** in Glenrothes.



Asthma

Rates of asthma are decreasing since 2019/20 and are broadly the same in Glenrothes and in Fife overall. The rates for Glenrothes 2021/22 are **7%**



Diabetes

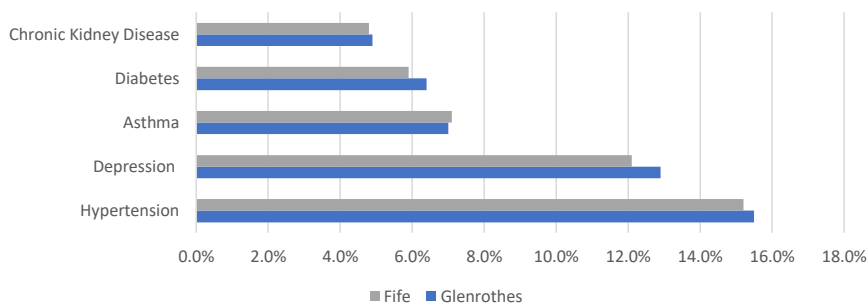
The rate of diabetes in Glenrothes is **6.4%** which is higher than the Fife average of **5.9%**. Over the last 5 years the percentage of people with diabetes has gradually increased.



Chronic Kidney Disease

Chronic Kidney disease is on the decrease in Glenrothes and in Fife. The rate for 2021/22 in Glenrothes is **4.9%**, this is slightly higher than the Fife average of **4.8%**

Top 5 long-term conditions





2. The Engagement Timeline



3. Stakeholder Engagement

3.1 Designing the Consultation

The consultation was designed by the Participation and Engagement Team supported by Psychological Services and members of the Locality Group.

a) Purpose of the engagement:

The Locality Group wanted to engage with people aged 65 and over to understand:

- What is important to them in terms of their health and wellbeing and staying independent.
- What are the barriers they feel they face (if any) in managing their own health and wellbeing.
- What do they think is needed locally to support them to stay healthy and live well.

b) Objective and Outcomes of the engagement:

Utilising the 'good conversations approach' the engagement will help the Locality Group to understand what is important in terms of health and wellbeing, what are the barriers and what do they need locally to support them to stay healthy and live well in Glenrothes:



- Help the Locality Group to understand what matters to local people to help them live a healthier, active life.
- People who have engaged and provided contact details have received feedback from the engagement and the recommendations made by the Locality Group using the “you said, we did” approach.
- The findings will offer an understanding of “What matters to local people 65+ in terms of health and wellbeing in later life, local information and supports currently being accessed by older people and whether they are accessible or what people 65+ need.
- The findings will identify any gaps in information and supports for people 65 + within the community and will support the Locality Group to plan their future action plans based on local people’s feedback.
- Identify unpaid carers in 65+ population and offer opportunity to find out what’s available to carers and how carers can get involved in the work of the partnership as it relates to carers.
- From the Locality Group perspective, the findings from the engagement will be incorporated into the Glenrothes Area locality plan within their priority ‘importance of ageing well’ and is considered when working with partner organisations, to plan, develop and commission services locally for the older population.

c) Engagement methods:



The engagement methods chosen targeted both local people who are currently engaging in local groups and activities and those who are not. This was done by offering:

- Face to face conversations with people attending local groups, local shops, supermarkets, and pharmacies.
- Those who access the Fife bus.
- People who are isolated within their homes and receive home care.
- Online Microsoft Teams Form which was live for the period 2nd – 15th October 2023 for Social Work staff to promote to their older clients.
- The online form was promoted on leaflets (via the QR code) to allow people to respond to the questions in their own time.
- This was also distributed via Fife Health and Social Care Partnership and NHS Social media platforms.



Lessons learned - Local GPs were offered the opportunity to be involved with this engagement. All surgeries declined, with some giving the reason that staffing shortages are creating busy and fragile environments, which they felt this engagement would further contribute to.

The changes in primary care and access to GP appointments since COVID 19 seem to be beyond local influence, but the findings from this exercise may contribute to a disconnect between community expectations and the evolving GP Primary Care landscape.

d) Who we engaged with:

We targeted people who were 65 and over living in the Glenrothes Locality, as they went about their day to day lives. We also spoke with people who were attending local groups, specifically supporting that age demographic. During the engagement period, we heard the voices of **108 people**:

- 71 individual survey responses received (this included responses from 8 individuals who receive home care support, via the HSCP Care at Home Service).
- 37 people attended 3 group settings. (They responded to all questions as a group and their feedback mirrored what the individual survey responses highlighted).



Leaflets with the QR Code were left in all locations where engagement took place and were also given to people who did not have time to talk but indicated that they would like to respond to the consultation. The link was also shared via the HSCP and NHS Social Media Channels, as well as share by a local councillor on his social media.





e) Where we engaged with people:



Out of the 108 people who engaged with this project, 99% of the responses were generated by the engagement team having face to face conversations with people within their local community. There was a limited response to members of the local community completing the online form that was available.

f) Equalities Information:

From those that chose to participate in the engagement and who answered the optional equalities questions:

- 68% of respondents were female with 32% being male.
- 98% were White Scottish. 2% were mixed or multiple ethnic groups.
- 54% were aged 65 and over, with 46% being near the 65+ bracket.
- As well as engaging with those in the immediate Glenrothes areas such as Stenton, Pitteuchar and Newcastle, we also reached out to those residing in more rural areas of the town, such as Markinch, Leslie and Coaltown.

39% of people described themselves as having a health condition and/or disability. **'A physical disability, long standing illness, Chronic Pain, hearing or sight loss and problems connected to aging'** were the top 5 answers.



4. Consultation Summary

We asked:

What is important to you in terms of your health and wellbeing and what are the barriers (if any) in managing your own health and wellbeing?

We did this by asking questions about their experience of using health services.







Question: *If you have health issues, what's your experience of using health services been like?*

From the 71 individual responses, 69 people said their most used health service, was the GP.

Common themes surrounding challenge were around the **long process of obtaining an appointment, not seeing the same Doctor**, as well as **explaining personal details to reception staff**. There were some difficulties identified about **transportation to and from GP practices**, for those who don't drive or use public transport – due to mobility issues.

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Further challenges with specialist health services are:

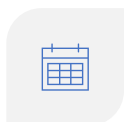
	Difficult to get through to GP at 8am		Hearing aid services have long wait times
	Long wait time for podiatry		Dental appointments are extremely difficult to get
	Difficult to get transport to appointments		Pharmacists work well and are efficient

Of the 69 responses, 32% commented that they had a 'Good experience' with general health services in Glenrothes.

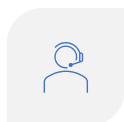
Question: *Do you have any suggestions about what could have been better for you?*



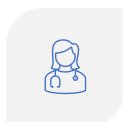
From the 71 responses, 64 people highlighted 4 key theme areas to help improve their health and wellbeing when accessing local health services:



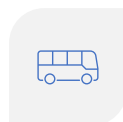
Being able to book
gp appointments in
advance



Not having to
explain my health
concern to the
receptionist



Introducing
community nurses,
to carry out home
visits



Transport to and
from health centres



One of the quotes resulting from the engagement reflects Glenrothes Priority 3 :

“People, including myself, need to be responsible for their own Health and Wellbeing to help them live longer and happier lives in their own homes.”

Some further quotes from participants surrounding these questions are:

“Reception staff at doctors expect people to know their conditions and how serious it is. This puts a lot of pressure on a person.”

“I don’t feel comfortable having to explain my health condition to the receptionist. They are not medically trained, and I feel self-conscious.”

“I don’t always see the same Doctor. This means I need to repeat myself each time I go.”

“It would be great if there were community nurses who could carry out home visits, instead of having to attend the GP’s.”

“I have gone private for my hearing aids as the NHS waiting times are too long, I was waiting 6months and was still not on a waiting list.”

We asked: What people thought was needed locally to support them to stay healthy and well.

Question: *Do you take part in any organised local groups or activities in your community?*

Approx 51% of the 71 responses said they **currently take part in organised groups or activities**. **100%** answered that they enjoyed taking part in their group/activity and key benefits included: **mixing with other people, feeling involved in the community, sharing common interests, and keeping active**.

One club member shared the impact attending their club had:

“Attending this club has saved me, it has changed my life. I have a weekly routine, have people to speak too and share my down days with. It is the best therapy I have ever had”.



When asked what kind of groups people currently take part in. 35 people responded and shared what these were:



Question: *Of those who told us they were not attending groups, we asked what kind of things are stopping them from taking part in organised activities?*

Out of the **71 responses**, **32 people** chose to answer. **18** of those who did, told us **'I'm not interested in going'** and **5** said **'I don't have time'** because they were still working or were busy with friends and family. **3** said it was because of **'health/mobility issues'**. Others gave **'lack of transport'** or **'I don't know what's on' in the community** as answers.

Question: *In an ideal world, what kind of things would you want to take part in?*

57 people out of the 71 consulted with offered suggestions for activities that would interest them:

- Car mechanics
- Dancing groups
- Lunch clubs
- Music clubs
- General life skills
- Exercise classes
- Community groups
- Art classes
- Gardening clubs

Most of these clubs are active in the local area and are keen to take on new memberships.



Question: *If you wanted to take part in more activities in the community, would you know where to find out about what's on and where would you go to find out?*

68 people of those who responded said that **they would know where to go to find out** by using:

- Facebook
- Google search
- Local community notice board
- Through the current group they attend
- Fife Forum
- Through word of mouth

Question: *What would be the best way of getting that kind of information to you?*

64 people responded to this question, telling us the best way to helping them identify what's on in the local area:

- A local specific Glenrothes Facebook page
- Leaflet through the door
- A directory of clubs
- A phone call or text message
- Email
- Their current groups informing them.

Question: *Are you happy with the amount of social contact you have?*

Out of the **71 responses**, **59** people said that they were **happy with the amount of social contact they have**. **9 people** answered 'no' to this question. This took us on to our next question about exploring what would help improve social contact for those who found it difficult.



Question: *Would you change anything about the amount of social contact you have?*

56 people chose to answer this question. The biggest theme emerging was the **lack of transport**. This was said to prevent people being able to get to and from social clubs, especially for those who do not drive or cannot access mainstream public transport due to mobility issues.

Some quotes from participants on the topic are as follows:

"Having more clubs I could attend and having transport to get me there."

"Have more classes available i.e. crafts, pottery".

"I would like more but I can't manage more because of my health issues".

"Due to my poor health, it would be good to have online clubs".

Some of the club's people suggested were already active and established in the local community. The Fife bus also operates throughout Fife which can support those with mobility issues. Some respondents felt the digital aspect of having clubs online was not being utilised.

Question: *What would make Your Social Contact better?*

44 people gave some helpful suggestions around improving their social contact. Some quotes can be read below:

"More availability and access to the Fife bus".

"More direct transport links".

"More funding available to communities to use buildings that are already in place".

"More socialisation within communities".



We asked: If people were caring for someone living at home, what were their experiences and support needs.

Question: *Do you provide care for a relative or friend who is living at home?*

21% of people, of the 71 responses identified as providing care for a relative or friend living at home. **79% of people** said they were not. Out of the people who answered 'no' it was apparent some were supporting their spouse, who had a diagnosis of a lifelong condition, however, they seen this as their responsibility or 'role' and chose not to identify as a carer.

Question: *What's that been like for you?*

Of the **13 responses** to this question, almost all of those who responded said that it was **hard and brings problems or stress** and can prevent them from looking after their own health and wellbeing. Some quote from participants on this question are listed below:

"I don't have time to attend social clubs due to this".

"My husband has dementia. It's getting more difficult as we are both getting older".

"Better transport would help us get out more, sometimes we are in the house for days at a timer".

"The winter is difficult, waiting on a bus in the wind and rain puts us off going out".

"I feel I am close to burnout".

Question: *In an ideal world, what would make life a bit easier for you?*

For those who identified as caring for a relative or friend, **12 people** answered saying they felt the following support would improve the support they provide as a carer:

"Day services would help give me some respite to do housework and shopping".

"I just don't want to take away from someone else who may need it".

"A coffee morning to share experiences with those in a similar situation".

"Getting my operation and improving my mobility. Transport being better".

"A single flyer or booklet to let us know what is on. Volunteers to support people in isolation".



Question: *Are you aware of what support is available to Carers?*

36% (5 people) responded they were **not aware of what support is available.**

64% (9 People) responded they **were aware of support, if needed.**

Question: *Do you currently access support?*

71% (10 people) responded they **were not currently accessing support.**

29% (4 People) said they **were accessing support that was available.**

Question: *What support do you currently access?*

Out of the **4 people** who responded **are currently accessing support**, they told us they were using services such as:

- Care at Home
- Occupational Therapy
- Podiatry
- Later life choices
- Social Work

Question: *Can you tell us some of the reasons why you don't access support?*

10 people, answered this question and told us:

"It has not been useful".

"It has not been useful in the past, social work are not great at supporting us to find meaningful clubs."

"I don't have the finances to help me with this".

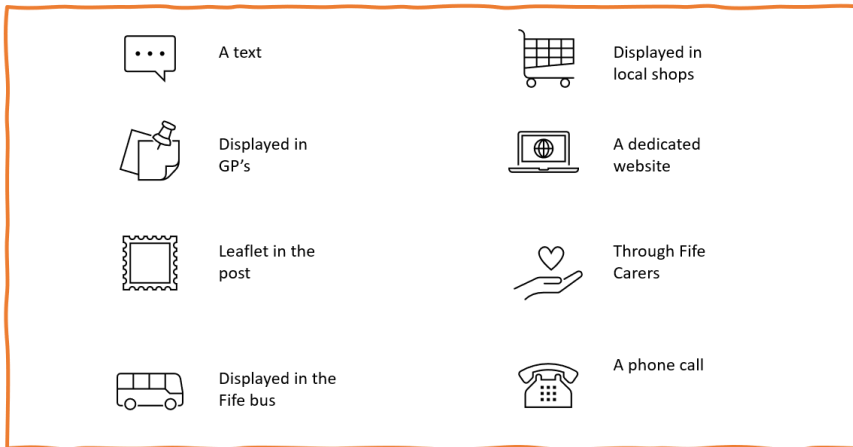
"I just get on with it".

"I feel it's my job to help rather than get someone else in to do it".



Question: *If you did want support, what would be the best way of getting information about support for Carers to you?*

There were **12 responses** to this question. Those who answered identified the most effective way of getting support and information to them:



Question: *If we wanted to speak to you again about your experience of being a Carer, can we contact you?*

43% (6 people) of those who responded confirmed that **they could be contacted again.**

57% (8 people) of those who responded, said **no.**



5. Conclusion:

This is what people told us was important to them in terms of their health and wellbeing and staying independent:

With the exception for access to GP appointments, most people told us their experiences of health and social care services was positive, which enabled them to access services when they needed them.

Pharmacists were praised for their efficiency and quick responses to prescriptions. This included the repeat proscriptio service and door drop off service.

This is what people told us were the barriers they feel they face in managing their own health and wellbeing:

Respondents felt compelled to share personal details with reception staff for triage purposes to access GP appointments, there is a perceived need for increased privacy and improved access to GP appointments. However, it is acknowledged that changes in primary care since COVID-19, appear to beyond local influence and this may contribute to a disconnect between community expectations and the evolving GP Primary Care landscape.

Respondents highlighted a desire for accessible transport to and from health centres. Identified opportunities to enhance information for local people of local transportation systems, to improve access to essential services such as medical appointments, would contribute to people promoting their own community wellbeing.

This is what people told us about what they think is needed locally to support them to stay healthy and live well:

Working with the community to highlight what activities are on has been identified as important (page 13) to help people be more independent and take ownership. There are opportunities for the Glenrothes community to take care of themselves and become confident that it is not just about visiting the GP but improving health and wellbeing through social interaction and exercise.

This could be linked with the perceived opportunity to share information around transportation links for people, to help them access these social clubs too.

This is what people told us about their experiences of caring for a friend or relative living at home:



Respondents suggested that more information signposting (Page 17) what services are available would be encouraging. This may support unpaid carers in being in control of their own wellbeing if they had regular space out with their caring responsibilities, potentially reducing burnout.

In conclusion, key priority areas identified include 1) Having accessible information with respect of local social club and groups. 2) Promoting the resources available to unpaid cares. 3) Raising awareness of transport links.

6. Next Steps:

The findings from the engagement exercise offer the locality group an opportunity to conduct an analysis of the engagement exercise findings to identify key insights. This will enable the locality group to develop targeted actionable strategies that directly address concerns and preferences expressed by respondents, ensuring a meaningful response to the needs of the demographic.

Appendix One – MS Form

Online survey available here <https://forms.office.com/e/ABBEYrts8B>

APPENDIX 2 - List of Stakeholders Involved

Locality Group Members
Fife Sports and Leisure trust
Dunfermline and West Fife Psychology Service
Napier House Care home – Iris Club
St Mary's Church
Iceland Kingdom Centre
Iceland Glenwood Centre
Dears Pharmacy Cadham
Dears Pharmacy Markinch
Mens Shed
Morrisons Supermarket
Thornton Social Club
Fife bus
St Columbus Church

