

Well Wharfedale



“What matters to me for my wellbeing in Wharfedale”

An Open Space Workshop
June 2018



Well Wharfedale

When you focus on
problems you will
have more
problems.

When you focus on
possibilities you'll have more
opportunities

Purpose of this document

This document summarises the topics identified and areas discussed by those that participated in the Well Wharfedale open space event held on Thursday 21st June 2018 at Kings Hall in Ilkley

Bit of background

Around September 2017 the Wharfedale Community Transformation Group, now known as **'Well Wharfedale'** was set up with the aim of developing 'sustainable change' to improve well-being by working very differently and with the people of Wharfedale.

Differently how?

We know there are many issues facing communities and people that can affect their health well being. Traditionally, health and care services have tried to identify and service these needs where possible. However, we know these services can only go so far in helping a person stay well. There is a much broader range of social and lifestyle factors that can affect how well people can be such as where they live, work and play!

Bringing local people together

The **'Well Wharfedale Open Space'** event aimed at bringing together people from Wharfedale to start the conversation about 'what really matters to them' for their wellbeing and to connect people with similar interests, support them to work together and take action for themselves.

No pre-determined agenda!

To truly ensure that the meeting was focused on what matters to the people of Wharfedale, there was no pre determined agenda for the meeting, just the question 'What matters to me for my wellbeing in Wharfedale?' People were invited to create their own agenda at the event and take some responsibility for it.

And how did it go?

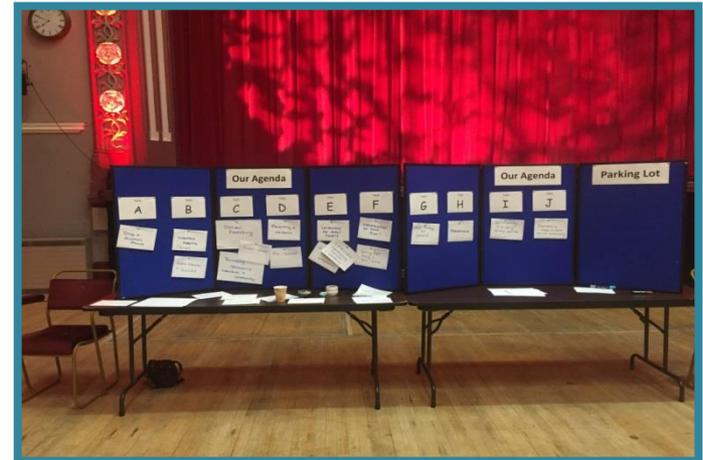
Over 100 people from Wharfedale attended and their passion and commitment to take responsibility was inspiring. People focused on solution rather than problems and what they can do together.

Self Organised Agenda

The agenda for the workshop was created at the workshop by the people that attended based on the question, 'What matters to me for my wellbeing in Wharfedale?' Due to time limitation only 10 topics could be explored however many more were raised and 'parked' for later consideration.

The 10 topics that formed the agenda were:

- A. Drug & Alcohol Abuse and Other Addictions
- B. Mental Health - teenagers, men's health / suicide
- C. Social Prescribing - debt issues, building resilience within individuals and as a community
- D. Parenting and parenting concerns - pre-school
- E. Loneliness - inter-generational activity & understanding, community activities and wellbeing, loneliness for older people
- F. Opportunities to have fun - getting people moving and more active, work/wellness - life balance
- G. Wellbeing for Carers
- H. Menopause
- I. Spirituality in a very busy world
- J. Dementia - feeling part of the community



Other important issues parked for later:

- Palliative Care
- Social Care & Community Led Support
- WRAP - Wellness Recovery Action Planning
- Alternative Therapies
- Chronic Illness - Pain Management

A

Drug & alcohol abuse and other addictions

Who convened the topic? Janet

Who was involved in the discussion? Andy, Oliver, Margaret, Norma, Janet, Graham, Phil Chappell, Tilly

Main points of discussion:

- Problems in the Wharfe valley are more hidden and not as expected but still there.
- Teenagers use substances but it is not talked about enough.
- A reluctance to talk about it means there are less opportunities for people to share with each other.
- Parents don't know where to go to get help.
- Social media use can be an addiction. Females may be more susceptible than males.
- Teenagers use social media and posting photos etc. as platform for building self esteem.
- Some teenagers see through it and find it boring so give up.
- Some parents haven't a clue their child is doing. People are not aware of what to look for to alert them something is happening they might want to know about.
- Computers and mobile phones keep children occupied so parents can get on working and earning money.
- Apps and programmes are built to encourage the user to keep going for longer.
- A harm reduction approach is needed because not all go on to be addicted because they have given it a try.
- Some teenagers become vulnerable because of life events etc. which leads to using alcohol, drugs, addiction to gaming etc. We need to see the vulnerability before they become addicted
- The same vulnerability leads to mental health problems too.

- Teenagers are under pressure because of expectations of high achievement in exams
- Some teenagers are not motivated to achieve because they have everything provided because their parents are achieving.
- Drinking as allowed by parents at parties in their homes from 14/15 years of age.
- Once children go to high school then it is difficult to control because you don't know the parents of their friends etc
- There is a culture of instant gratification and satisfaction can be superficial and momentary.
- All this is not just children.
- Gambling is becoming normalised by advertising during sport etc. The gambling can also be isolated from the activity such as betting on sport or other activities you never see.

What can we do?

- Once social vulnerabilities are identified it may not be necessary to intervene.
- Interventions may not need to be services or medical
- Community resilience building needs to be integrated with existing community groups not specifically for this purpose.
- Having someone to talk it through with (third party) who will not particularly take action can be useful (ab it like what to do if you feel you are being bullied)
- It needs a whole community response in pubs, schools, supermarkets etc. because often ID not checked etc
- Alternatives need to be available to build confidence and self esteem away from social media.

A

Drug & alcohol abuse and other addictions

- Alternatives to be available that are more attractive than drugs and alcohol
- Find the spark in every child that channels energy into health activity.
- Group activities for children to talk to children and adults
- Teenagers need to learn how to keep social media in its place i.e. controlling it instead of it controlling you!
- Support those in community who do not have it available in their home/family

Top 3 Actions:

1. Make more information available on how to identify unhealthy behaviours which can lead to addiction and what to do if you have concerns.
2. Identify the social vulnerabilities that lead to addiction to the community are more aware of the potential problems.
3. Break the cycle of vulnerability by building resilience for individuals and groups

B

Mental Health inc teenagers, men's health / suicide

Main points of discussion:

- More balanced focus (curriculum activities in school)
- Need a way to support to deal with specific issues e.g. loss
- How do we access? (Mind / Funding)
- Dementia Friends – learn shift and take it further – spread the message and replicate format
- Issues around social media. Ipad should be limited but they're needed for homework?
- Better guidance – school, parents feel helpless, need homework. How to limit, standard guidance etc. phones/ipads access starts early, **3 days no technology (vote do again yes)**
- Image and the impact on girls
- The Suicide – around stigma – opportunity to do more in Schools
- Sharing experience – those who have been there and turned things around
- How to manage social media
- Barriers to access support for wellness – ignorance but also – difficult to take the step on their own
- E.G. Big Brother – USA – role model. Transfer a similar approach to include access to activity to improve wellness.
- Focus on increase level of wellness NOT illness
- Social media access / anonymous – Snapchat
- How do we change reliance and culture?
- Varied school policies around phone access
- Positive role models – parents – limit own usage, no texting whilst talking to children
- Work/life balance – 24/7 emails – working all the time pressure to respond
- Anxious people not attending GPs
- Men's Mental Health - alternative therapies access – raise awareness – boundaries – access phone / ipads
- Impact on the whole family
- Emotional health
- Pre-school (SATS) – pressure starts early
- Perception as a taboo subject
- How do you support peers – whatever age?
- MH is isolating
- Individual sufferers difficult to initiate
- Earlier intervention the better
- Acceptance & support from whole school
- Conflict – ask for help – build confidence
- Access – GPs, School Nurse, CAMHS (very serious threshold)
- Normalise – all the same issue at some point
- Need to be severe to access help (medication)
- Transition – CAMHS
- Access to lower level interventions
- Equip – children / all with tools
- Cost – private provision
- Teachers not necessarily confident to talk mental health
- Tangible actions in schools – 6th form mentor – peer mentors
- School counsellors – miss lessons – pressure to catch up
- Share knowledge – local expertise / local mapping
- CHYP – keeping busy / occupied / balance - space too – talk to CYP and what they need
- Culture of schools – being taken seriously
- More support for staff
- Competitive – teachers & students – grade driven inc. pressure

B

Mental Health inc. teenagers, men's health / suicide

Main points of discussion:

- All have mental health – think about language used (remove suffering)
- Applying for Uni – mentors
- Support also required for those mentoring
- Q teachers involved
- Self-esteem – not in teams / play/high achievers/ SATS results
- School leavers – no job – find a way to get alongside these
- Limited youth clubs / sports costs £ / volunteers
- Where can you hang out as a teenager?
- Parents who struggle with money
- Role models – don't always engage with GPs e.g. Scouts / Guides
- Tough – results driven – not defined by grades
- Focus on increase level of wellness NOT illness
- Social media access / anonymous – Snapchat

What can we do?

- Wellness Recovery Action Planning (WRAP) – through peer support
 - Practical plan put in place
 - Facilitated to develop practical plan
 - Discussions/raise awareness/opportunities to talk
 - Buddying – schools already doing this format but need to expand to mental health
 - Time spent with other generations
 - Raise awareness of suicidal feelings – remove stigma – get people talking – general issue in society.

- Walk beside / befriending – MH support – Keighley & Bradford
- Activity / having fun – friend to go with – befriending for support and access
- Volunteer support
- Primary School – mindfulness
- Drop in – GP support BUT stigma if attend – GP drop in at School – email anonymous – appointment allows opportunity to raise own issues – remove taboo



Social Prescribing

Who convened the topic? Kalyani

Who was involved in the discussion? Naomi, Ann, Liz, Helen, Stuart, Andy, James Thomas

Main points of discussion:

Support:

- Neutral places to go
- Volunteers/people to commit time to help their community
- Using what is already there better
- Giving people a space to use

Activities:

- Walking - Some felt it was only geared towards retired people. Group 'Take a Hike' organised by Ramblers association for 20-50 year olds – Yorkshire wide group
- Somewhere where there is a central point to access which has all the activities available
- People free to come and go – no joining or having to go regularly
- Sharing information with Health Care Professionals on activities out there

How to Engage:

- Social media
- Sharing information with GPs
- People to bring their own experiences and sharing into a group
- Informal network U3A – make better use of resources within the community
- Higher proportion of women engage than men – women more sociable

Access / Engagement:

- Support for people to access and join groups
- What groups are out there – what can they offer
- 'Ilkley Chat' & 'What's on in Burley' – Facebook pages – moderated sites
- 'Connect to Support' – community led services
 - Service to create a database of all activities
 - Rolling out community based hubs
- Burley Parish Council publish hand book every 2 years with activities available
 - Reliant on people providing the information and also it being kept up to date
- Local Alternative Therapies – to add to the list
 - Encouraging wellbeing
 - 'Ilkley Therapist Forum' – has a list of therapist in the area
- Openness to support people through different choices / what they want to achieve
- Social prescriber – individual for you to help meet your needs
- Everyone's needs are different – to work with the individual and help them in stages (work up)
- Social Prescribing shouldn't be used as a means of deflecting from other services
- What is important to the individual
- Current provision time limited – number of sessions available
- Need social integration/ interaction
 - What is the root cause of anxiety
 - How does the community help the person get to where they want to be



Social Prescribing

Main points of discussion:

- How do we tap into the resources out there in the community
 - People have to travel as no community groups in Ilkley
 - Community Newspaper – to advertise activities
 - Befriending Network – combatting loneliness
 - Housebound individuals – carers need to be aware of groups available – who can get involved – getting people out and about - socialising
 - Patient champions
 - How do we general communities
 - Creating a network to work together
 - Funding is out there
 - Collaborate – sharing expertise

Transport:

- Ability to get to hubs and events
- Cost of travel – may not have means
- Volunteers
 - Risk Assessments for volunteers who may drive
 - Insurance – indemnity liability
 - Need to consider wider implications of volunteers
- Teenagers are under pressure because of expectations of high achievement in exams

D

Parenting and parenting concerns - pre-school

Who convened the topic? Margaret & Marie

Who was involved in the discussion? Christine, Glynn, Sandy, Steve, Sarah, Margaret, Natalie, Trina, Naomi, Leigh, Gillian

Main points of discussion:

- Support for children with special needs in the Wharfedale Valley District so don't have to travel 45 minutes each way
- Mum's on their phones rather than interacting with children – how to help get more interaction
- Anti-natal classes focus on birth/breastfeeding rather than interacting/enjoying/playing with baby
- Health Visitors instigated post-natal group for 8 weeks – now parents meet on their own
- How to engage with parents who need help/support
- Support / voluntary groups

What can we do?

- Opportunities for parents to get together – need a Sure Start in Ilkley
- Schools / Pre-Schools encourage parents to meet e.g. coffee morning, drop-in, places for parents to meet – Dan's Den run group
- Liaison with health visitors not easy – working together
- School is the key place – more support to parents interwoven into school.

- Parents pool skills – create the community - The Parenting Puzzle, Talking Teams – good courses, information and strategies given
- Loose myth of perfect parenting – good enough
- Can Ilkley's children centre not be used more?
- What can youth do for their communities – ages issues often too young
- Feedback to schools how good parent courses were and need more of them
- Timings of when the courses are run – varying through the day
- 1 day courses – how to support your child during life changes e.g. new school, exams etc. E.g. helping your child with 'their bucket'
- Parents are time pressured
- How do we get more info/access about Community Action & access to community support
- Parents have skills – could they be used better to support children in School

E

Loneliness - inter-generational activity & understanding, community activities and wellbeing, loneliness for older people

Who convened the topic? Lynn

Main points of discussion:

- Lack of awareness
 - Support needed to go to groups – build confidence
 - Understanding the individual – different needs / wants
 - Collaborative working with healthcare professionals to promote groups
 - GPs being able to recognise those that are lonely
 - Confidence to pick up the phone/go out – taking the first steps
 - Use of Good Neighbours
 - Identify different skills that already exist within the community
 - Directory of activities for health workers current being developed
 - **Q: How would GPs/Social Prescribers prefer to receive this information?**
 - Transport – challenge
 - Reaching out to those that are house bound
 - Parenting – families aren't as close these days – Grandparents don't see grandchildren as often as would like – parents too busy
 - Lonely volunteers could join parenting groups – connecting the lonely with the lonely
 - Inability to maintain relationships
 - Consider those who are divorced and suddenly become lonely – National Council for divorce and separated (NCDS)
 - Home visits – someone to talk to
- Encourage more volunteer befrienders
 - Look at different way of spreading the word, reaching out to people – not just social media but using flyers etc. Example of the community support when Silsden had no Gas
 - Create more inter-generation community groups and make them more inclusive for commuters – different times during the day
 - More parenting networks
 - Need more support from healthcare at groups
 - Social Prescribers in Wharfedale – key to linking everyone together
 - Using Care Homes as community assets
 - E-Hub – online / paper directory of groups
 - Set up a skills sharing network – young teaches old vice versa

F

Opportunities to have fun

Who convened the topic?

- Opportunities to have Fun – Bridget – convener
- Getting people moving and more active – Gaynor – convener
- Work /Wellness and Life Balance

Who was involved in the discussion? Steve, Emma, Mark, Clive, Susan, Philip, Liz V, Ann, Iain, Katherine

Main points of discussion:

- Movement and exercise
 - People who are involved are motivated
 - There is a big divide – lots happening in Ilkley including Lido, opportunities sport leisure - lots accessing
- How do we close divide and encourage, help people access
 - Finances barrier if have to pay
 - Lots opportunities young people / can all parents afford?
 - 'safe' places
 - 'Youth Club' type approach and activities
 - Is there a way of getting young people to activities after school
 - Not enough people accessing – are they aware
 - Some need /want 'buddy'/escort
 - People listen to GPs – could they promote/sign post/social proscribing
 - Some activities free – exercise in the park etc.
 - Could set up inexpensive 'army' in the park
 - Park run
 - Burley GPs lead weekly walk
 - 10am Burley Library Tuesdays – tailored to abilities

- How do people know about opportunities
- Buddy up young and old – match activity to person
- 'exercise of prescription' build up motivation and longer term uptake

- Impact sleep/exercise = wellbeing

What can we do?

- Set up 'historic walks'
- If people walk invite others?
- Facebook group to promote activities / buddy offers
- Create a 'network'
- Park run in Ilkley
- GPs to offer advice, recommendation, encourage, promote (Burley Example)
- Yorkshire Dance – for elderly / inactive
- Fun, this Sunday ' Party on the Grove'
- Otley Walking Festival, different abilities – 9 days from this Saturday
 - CBMDC print programme – Volunteers 'fill up' the Programme/lead walk
- Ramblers Association – Otley Branch – some walks start in Ilkley
 - Positives walking associations – all organised walks
- Taster sessions would help encourage
- For many having fun means with other people – not all activities 'exercise' e.g. cards and dice, play games, juggling, jacks
 - Games for adults and children
 - Include pubs as 'free venue'

F

Opportunities to have fun

Main points of discussion:

- People don't need permission but some feel they may need to have it
 - Make public space accessible – don't need permission to use
 - Street play / Leeds Council street bins full of play activities/resources)
 - Links to safe spaces
 - Could roads be closed at certain times?
 - Have fun in the street
 - Increase people walking /cycling – streets for people 'North Allerton Leeds'

What can we do?

- Activities free to start – e.g Yorkshire Dance locally
- Networking – encourage people to join in activities – like Party of the Grove
- Include 'board game' type activities in Social Prescribing
- Approach pubs as 'free venue' benefits to them income generation
- Street Play – active Facebook group
 - Cost this - are people interested?
 - In Burley people took this up - £175 , £75 to refill
 - 'trying it'
- Look into street for people
 - Apply council street closures 'for the people'
 - Form filling puts people off this
 - Could it be simplified

- Activities in the park
- Build network, spread the word
- Resilience – build in young people, out, active, socialising (not in on ipad)
- 'Drop in locally' set up a hub for people to meet and talk
 - Fun and physical group
 - Conducive to young people
 - Interest to attract them too
- Network – shared interest take forward
 - Who are the 'movers' and 'shakers' who will take this up
- GPs role advise, encourage, signpost, promote
- Burley GP walks for example
- Offer from Katherine – 'Ground Work Youth' July social action campaign
 - How can young people have a voice in the community?
 - Taking part in an event in Sheffield
 - Willing to share learning
- How do we find out if there is money to help
- Start some things up

G

Wellbeing for Carers

Who convened the topic? Paula

Who was involved in the discussion? Dorothy, Gillian, Rob Malley, Pam

Main points of discussion:

- Carers get forgotten and overlooked. Have to fight for everything, 'I've been to Carers Resource and it was amazingly useful', 'Carers Resource Emergency plans are amazing'.
- Grandparent Carers – Issue when the care plan doesn't work and providers don't turn up. It is expected we can just step in. There is no 'Plan B'.
- Care planning by health and social care is not joined up. Lots of different funding streams, making it stressful for carers who are left to coordinate care providers
- Caring can be like a full time job – no understanding of the complexity of what carers need in their own right.
- No point in just asking the person how they manage, Carers need to be consulted.

What can we do?

- Help to find practical support for carers – form filling, arranging all aspects of care.
- Find a small group of willing/able people in the community to offer respite or sitting – training will be needed. There are some of these services available but need to be joined up.
- An information hub – a named person to support the Carer.
- Improve how carers get information – Via technology and paper.
- Helping people to die well.
- Use the library building / supermarket
- Need a peer support group.



Menopause

Who convened the topic? Angela

Who was involved in the discussion? Anita, Helen, Rebecca, Phillipa, Gaynor

Main points of discussion:

- More support
- Taboo subject
- Women struggle in silence – can be isolating
- Social prescribing – alternatives to HRT, natural approaches
- GPs not aware of all the factors / options
- People not aware of symptoms & easy things – cutting down on alcohol, effect on sleep
- Educating women about their bodies
- Women in workplace being able to talk to employers
- HRT Cake!
- Impact on relationships and sexuality

What can we do?

- Set up peer support groups – make links with GPs & Social Prescribers
- Angela runs a group and gives information #change4change
- Contact details shared between women in the group
- Encouraging women who've been through it to share stories – Rebecca's church women's group
- Café Woman

I

Spirituality in a very busy world

Who convened the topic? Alastair Kirk

Who was involved in the discussion? Frances, Dave, Gordon, Jeane, Carolyne, Roger, Katie

Main points of discussion:

- Church creates community
- Integrate part of life – values
- Mindfulness – taking time out – materialistic – not looking after spiritual need
- Spiritual meaning different things to different people
- Refocus life after life-changing experience
- Faith underpins all actions
- Flourishing of whole people – including ‘soul’
- Pubs closing – effecting community – breakdown
- Give people their value / give them time
- People may not want intervention
- Peace of mind – affecting attitude to others
- Faith prompting actions to connect to community
- Power of prayer – often defying medical conditions “nobody knows the power of prayer”

What can we do?

- Community resource for reflection and sanctuary
- Area reps – collect community info – neighbourhood watch
- Mindfulness sessions – Burley church hall, arranged silent time for school children
- Listening service in Burley

J

Dementia - feeling part of the community

Who was involved in the discussion? Alice, Leigh, Laura, Will, Philip, Margaret Young, Ian, Christine

Main points of discussion:

- Significant issue for older Wharfedale residents
- Dementia Friends scheme, community groups
- Difficult getting connected to IGS
- Intergenerational work (toddlers in Care Homes)
- Dan's Den / Church facilitate / pet therapy in care homes or pet sitting/Cubs
- Care Homes rely on volunteers – proactive in social element of care home
- Should be inclusive in social prescriber roles
- Alternative to Clarke Foley for support centres
- Engaging community with helping Dementia – neighbours
- Workplace based dementia training
- Tips for dementia residents

What can we do?

- Approaches to addressing Dementia (social prescription to address)
- Signposting carers to be conscious of the dementia patient
- Improve GP – no memory clinic leading to diagnosis – address inconsistency with consultants – no sign posting

- Expert panel / patient/carer to inform reconfiguration of services
- Hidden carers – must be recognised in social prescription – carers hub
- Social isolation – 'Be Neighbourly' can support
- Mental Health agenda needs a stronger representation of Dementia
- Help family to prepare
- Social Care – Assessments – influenced by Care Homes
- Student visits to Care Homes – Developments in Bradford
- Quality of life / wellbeing – clinical conversations comparable to Palliative Care – quality of life of carer
- Safety to be considered – physically, mentally & emotionally
- Dementia carer peers

Top 3 actions

- Diagnosis – beginning of support journey for carer and patient
- Community Support - Education & 'Be Neighbourly'
- Carer Champions / Peer Support

Ideas to take forward

Below is a list of ideas to take forward that were discussed during the event. Each attendee was given a strip of 8 sticker dots at the beginning. As people left at the end of the event they used the dots to 'vote' on the actions that they felt were most important.

Key

New ideas to take forward ★

Ideas that already exist but need enhancing ▲

The ideas you came up with	
Connecting	
Volunteer befriending - home visits - encourage more to get involved	★
Access to mentoring/befriending/buddying - could be through volunteer network	★
Set up a 'drop in' hub locally for people to meet and talk for fun and activities. Conducive to young people - things to attract them too	★
Someone to talk to about the issues relating to addictions with no consequence (but who?) about choice - help them identify someone to talk to	▲
Community resource for reflection - sanctuary	★
More use of the Ilkley Children's Centre for parent support groups	▲
Share contact details and ask who is interested X, Y, Z and is willing to be part of a network. Who is a 'mover and shaker' and willing to take forward? Who has something to offer? Where is there a shared interest to take things forward?	★

Ideas to take forward

The ideas you came up with	
Neighbourhood Network	★
Listening service in Burley	★
Support at Dementia Diagnosis - leaflets/Navigator/Helper	▲
Advocate/expert link for Dementia patients & carers	★
Social Prescribing to offer women support & information about menopause	▲
#ChangetheChange - campaign to encourage women to open up & share experiences about menopause	▲
Individuals need to be at the fore-front to help them get what they need	▲
Information/support hub specifically for carers	★
Café Woman - supporting Angela to get more women coming to per support group - Wheatley Arms, Ben Rhydding - Saturday 10am - come along!	▲
Taking Notice	
Central list to access what groups/activities (including alternative therapies) are out there	▲
Area 'Reps' collect community information / neighbourhood watch	★
Info about how to spot vulnerability to addiction in young people and adults for individuals and groups	▲

Ideas to take forward

The ideas you came up with	
Mindfulness Sessions - Burley Church had arranged silent time for School children	▲
Group Directory - How would GPs/Social Prescribers prefer to receive the info - paper/electronic	▲
Learning	
Get Schools to provide parenting support class (doesn't have to be run by Schools)	★
What is the gap to get from GP to Social Prescriber?	▲
Courses offered to parents. E.g. The Parenting Puzzle and Talking Teams were excellent. However, more needed & offered at different times during the day.	▲
Parents have skills - could these be harnessed by Schools to help other parents/pupils	★
Social Prescribing - learn more about the role and have them available in Wharfedale	▲
Early intervention/education to include awareness of Mental Health (to normalise and remove taboo/stigma)	▲
Giving	
Do something as a community to support people who won't get it at home (Addictions)	★
Practical support specifically for carers - find a group of willing volunteers to help sitting/respite for a couple of hours	★
Communities to offer neighbourly support to people with Dementia	★
Carer champions / peer support for people caring for those with Dementia	★

Ideas to take forward

The ideas you came up with

Being active

More GPs and other influencers to encourage and promote benefits of activity and exercise e.g. Burley GPs weekly walk, 'Walking for Health & Wellbeing' - be active



Tech free time for children/families -positive role modelling / school & families - be active

