

South West Oxfordshire Locality Plans – Survey Results and Demographics

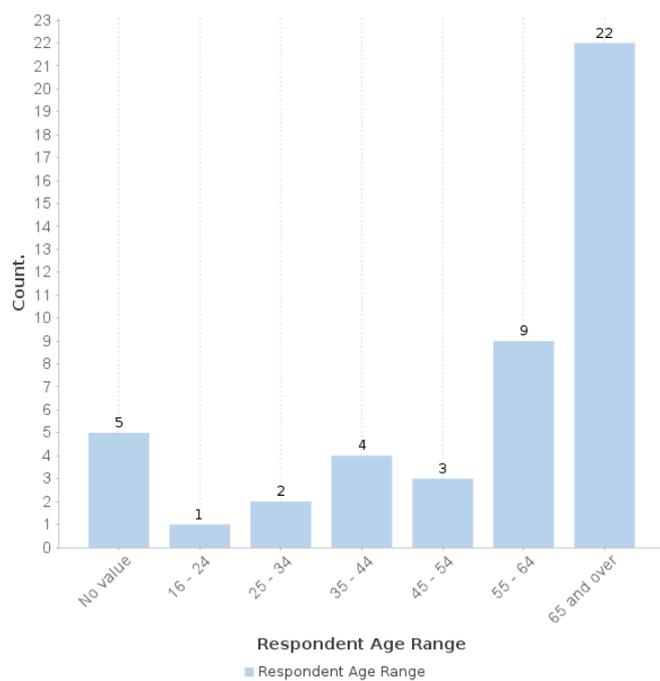
These are responses to the survey that ran from 3 November to 3 December 2017.

95 people registered and followed this engagement activity on Talking Health. Of these 95 people, 46 people then responded to the survey.

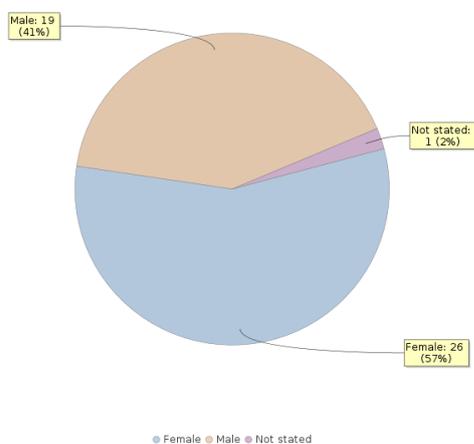
Demographics

The demographics for the 46 people that responded to the survey are shown below:

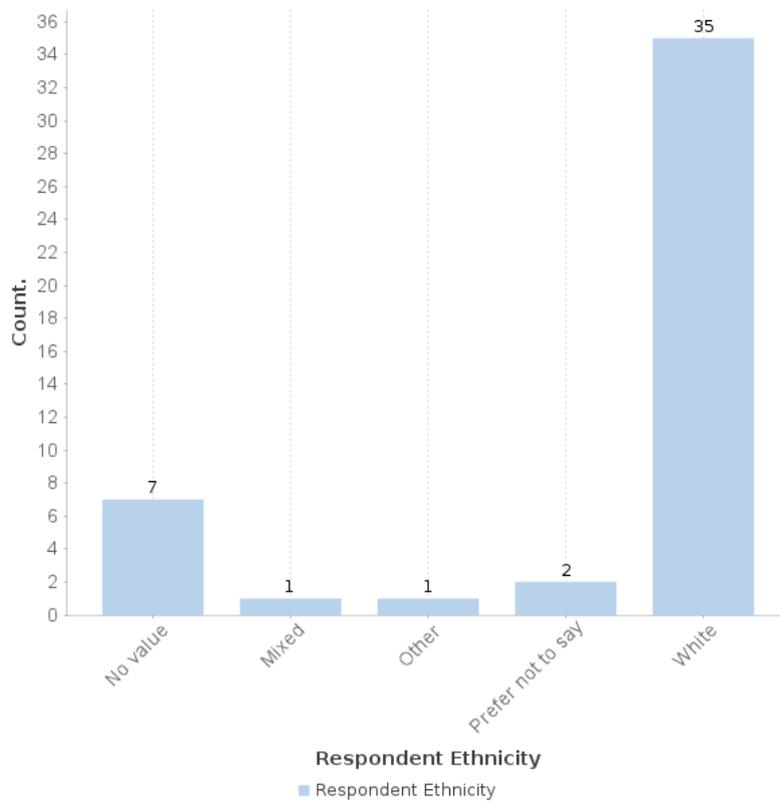
Respondent Age Range



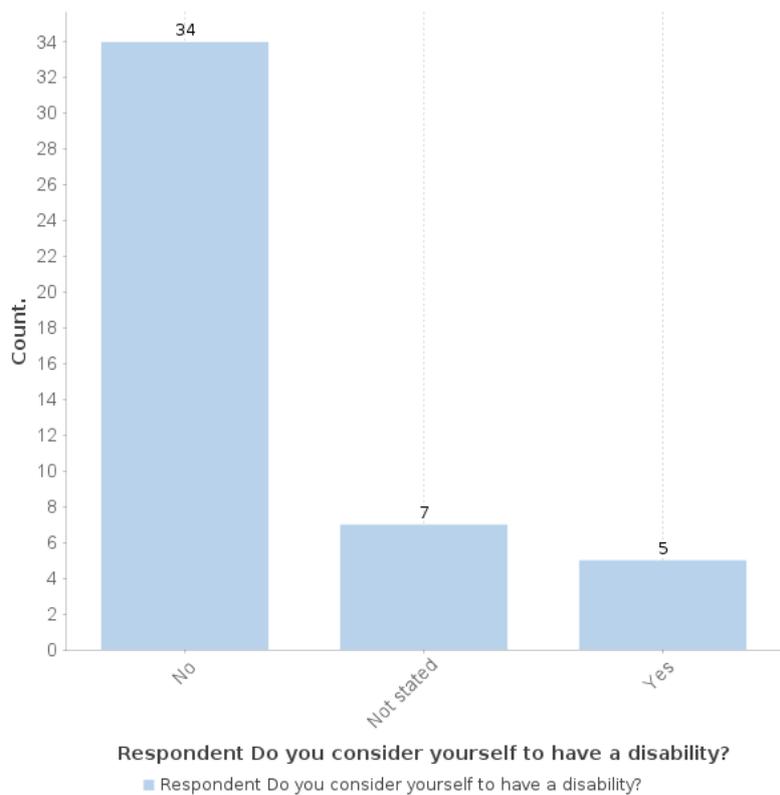
Gender of Respondents



Ethnicity of Respondents



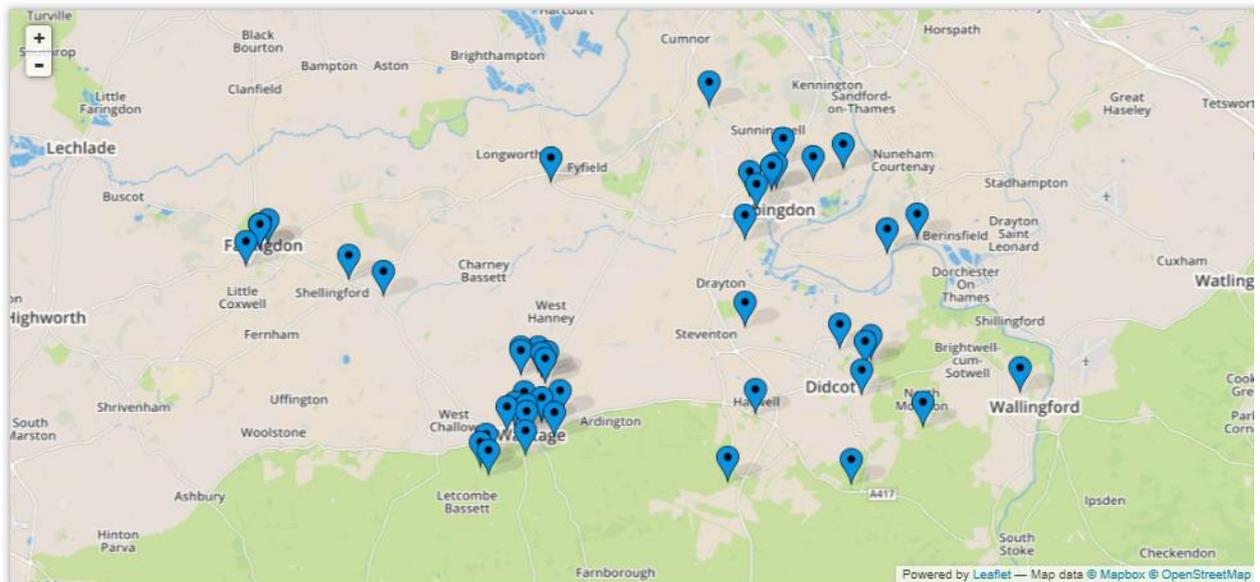
Disability status of respondents



Survey Results

46 people responded to this questionnaire. The map below shows where the responses came from.

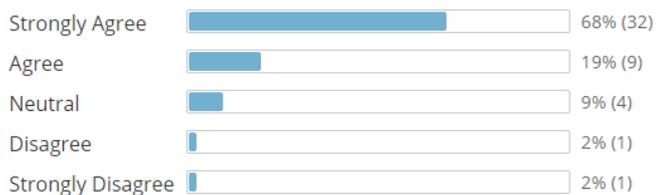
Map of respondents - South West Oxon Locality



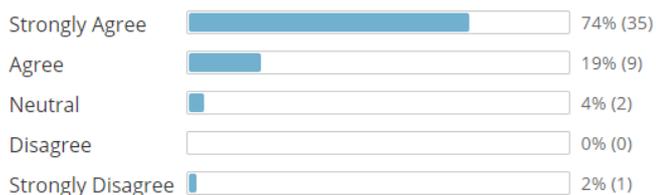
1. To what extent do you agree or disagree with the ideas/suggestions below:

47 people responded to this question. Whilst the majority of respondents agreed with all the comments, ten people were either neutral or disagreed with 'sharing of clinical records among health professionals' and six people were neutral or disagreed with the 'expansion of premises'.

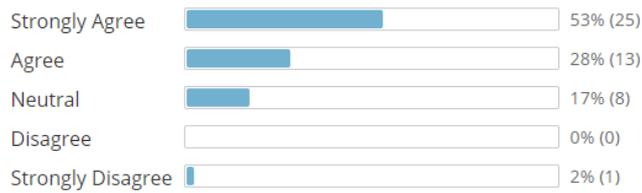
Detailed breakdown for 'Expansion of healthcare premises'



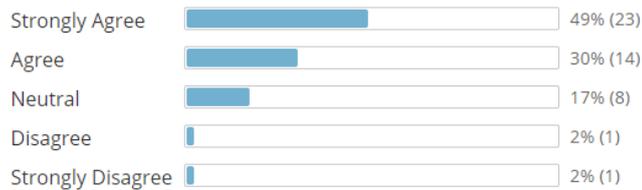
Detailed breakdown for 'More healthcare staffing with professionals working more closely together'



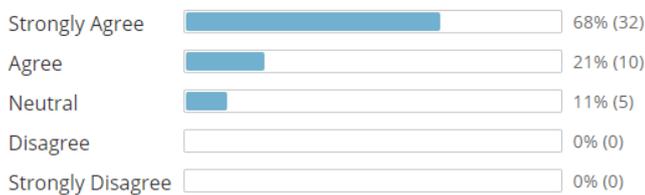
Detailed breakdown for 'More efficient sharing of 'back office' admin among primary care services'



Detailed breakdown for 'More sharing of clinical records among health professionals'



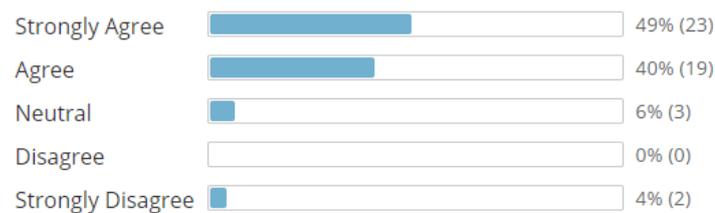
Detailed breakdown for 'Improving health outcomes for frail older patients'



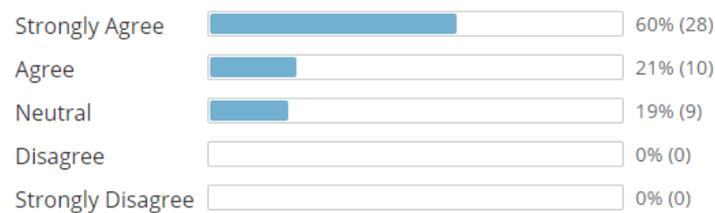
2. Please could you tell us if you agree or disagree with our approach on how to do this?

47 people responded to this question. Whilst the majority of respondents agreed with our approach to delivering the plans, notably 21 respondents were either neutral or disagreed with 'exploring technology in healthcare, eg: Skype appointments'.

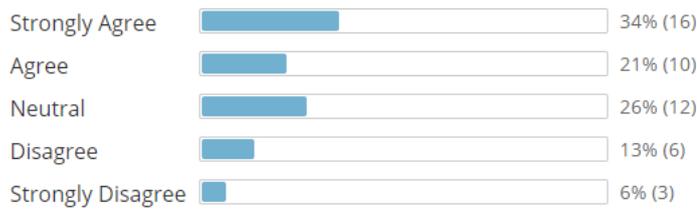
Detailed breakdown for 'Expansion of existing healthcare premises and some investment for new buildings'



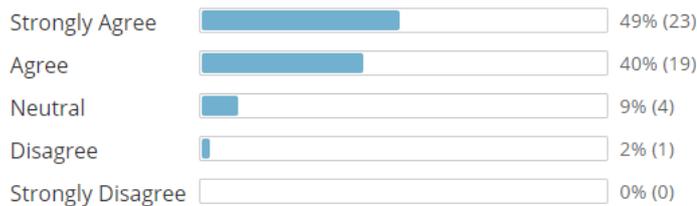
Detailed breakdown for 'More efficient use of existing buildings'



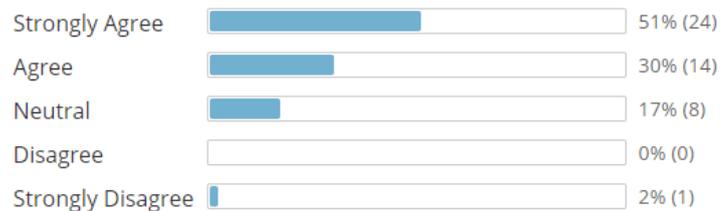
Detailed breakdown for 'Explore using technology in healthcare eg skype appointments'



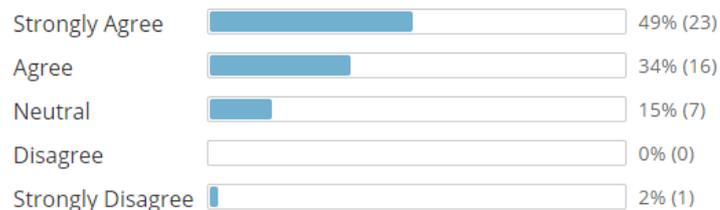
Detailed breakdown for 'Getting the right healthcare professionals working across several practices'



Detailed breakdown for 'Expansion of ambulatory care for frail / elderly people which means patients are assessed, diagnosed, treated and go home the same day, without being admitted into hospital overnight'



Detailed breakdown for 'Expansion of care home initiative where specially contracted GPs provide a regular pro-active weekly review of patients in care homes and respond to any emerging concerns.'



3. What do you like / works well at your GP Practice?

39 people responded to this question. The key points raised related to:

- Ability to book appointments and repeat prescriptions online
- Telephone consultations and triage
- Friendly and good staff
- Email consultations for dermatology
- Availability of scans at the practice
- Continuity of care from GP

'Annual health checks. Having a named GP. Being able to book telephone appointments. On line system for booking appointments and for ordering repeat prescriptions'.

4. What could be improved at your GP Practice?

43 people responded to this question. The key themes raised were:

- Continuity of care/joined up working with health professionals
- Waiting times
- Improve premises/accommodation
- More staff
- Communication with the community/Information/Publicity
- Car Parking

Being able to get an appointment. Parking facilities.

And little emphasis on health and well being and self help and links to non-NHS services, except in posters - hard to read.

I had two letters in two separate envelopes on the same day recently, one inviting me to my diabetes check and the second inviting me to my hypertension check - add this to the third letter reminding me that I needed a thyroid check! I am a whole person not a list of disorders and should be able to have one check, one appointment which covers all of these and if that means that the most appropriate person to see me is the GP then that is what it should be.

5. Do you have any suggestions for how services could work/be improved?

37 people answer this question. The key themes raised were:

- Consultant appointments in the community
- Better use of pharmacy to deliver services
- Improve IT systems so staff can communicate better
- Email patients rather than letters
- Encourage self-care and share information with patients about services
- Improve surgery websites to have more patient information
- More staff needed– due to housing growth/population
- Utilise Wantage Hospital, care closer to home

Surgery websites often don't provide enough/enough detailed information on everything they do and provide, whether this is NHS or not.

The Community Hospital should have an increased role in the provision of future local health services.

6. If there is anything else that you would like to tell us about primary care services in South West Oxfordshire, please do so.

25 people responded to this question. The points raised were:

- Improve staff skill mix
- Increase funding for the NHS
- Increase outpatient care in the community
- Concern about housing growth/population increase and how services will cope

*More secondary care services e.g. out patient clinics to be based in expanded locality based health centres . Reducing the need for patients to travel in Oxford for diagnostic services, chemotherapy.
Development of physiotherapy as part of primary care and reducing excessive waiting lists.*

It is vital that you use the appropriate staff for different roles - sometimes you need to see a GP but if you have a medicines issue it may be more appropriate to see a practice pharmacist; if you need a review it may be the nurse, pharmacist or physicians associate

Following this survey, the draft plan for South West Oxfordshire was published incorporating the feedback above, and was made available for further comment between 4 December 2017 and the 17 December 2017.

Whilst we have summarised the themes below, the detailed feedback will be shared with the colleagues working directly on these plans over the forthcoming months. It is important to note that these are working plans, so ideas and points raised through this engagement process will be explored further as part of our ongoing work and engagement with local communities.

Nineteen people gave further feedback and the analysis of their responses is shown below.

1. We would like your view on the priorities in the plan (pages 20 - 46) – have we got them right?

19 people responded to this question and agreed with the priorities but raised the following points/concerns:

- Section 106/CIL funding and allocation – how does this work in a timely way for planning of healthcare
- Transparency around the STP relating to the sale and redevelopment of NHS sites
- Midwifery and children’s services not in plan
- Recruitment of GPs
- Plans seem to be based around the South Oxfordshire District Council Local Plan which is not guaranteed or signed off
- Population growth/ageing population
- Expansion of GPs services
- Access

On pages 34 and 35 there is much excellent planning for elderly/frail patients but this must be integrated with a study of transport capabilities, as no matter how good facilities are they are useless if the elderly and frail cannot access them.

In general this is a good report, but fails completely to give actual improvements to GP facilities in Wantage area, as no monies are allocated for actual building as report indicates are essential.

there is no acknowledgement of funding issues

As you have pointed out the expansion of the Wanage surgery is urgent and should not be delayed if the out come for the hospital can not be resolved very quickly.

2. Do you agree with the expansion or introduction of new services within the community to meet the challenges we face?

19 people responded to this question and broadly agreed but raised the following points/concerns:

- Missed opportunity to develop hubs/walk in
- Staffing/recruitment of GPs
- Concern about the future role of Health care assistants
- Access – lack of emphasis on rurality issues, transport and infrastructure
- Administration and communication issues between different NHS organisations

Yes, but communication with the patient and also their family/carers and/or other services involved is of utmost importance IT – not everyone has it

The current administrative system is extremely poor

*Access to services locally is better because:
employees are not absent from work for so long
employees feel able to take time to attend clinics
those without transport feel more able to ask for help to reach local towns
less clinic time is wasted as patients are less likely to be late.*

I understand about wanting to share data and doing things electronically but it shouldn't be assumed that everyone will consent to this automatically.

3. Are there any gaps in our Plan? What do you think we have missed?

18 people responded to this question and the points raised were:

- Early Years health education
- Care home support and provision – upskilling of that workforce
- Timeliness of implementing the plans
- Concern that this engagement process has not been sufficient
- Mental health provision
- Long term conditions for people who are not elderly/frail – where are we in the plans
- Plan for rurality – transport issues
- Funding
- Prevention