Appendix 5: Themes relating to Primary Care

Throughout the survey responses a number of issues were raised relating to primary care provision as outlined below. These will be forwarded to the Primary Care Team at the Thames Valley Area Team of NHS England.

**GP practices**

Throughout the survey responses there was a key theme around access to GP surgeries and the services that GP surgeries offer, specifically:

- **Time:**
  - People want more time with their GP and longer appointments

- **Access:**
  - People want to be able to book appointments online,
  - receive text reminders for appointments and test results
  - have greater continuity with their GP and more face to face contact
  - improved communication between primary and secondary care in care pathways/treatments
  - improved waiting times, or to have waiting times explained to them
  - evening and weekend appointments/NHS should be like life 24/7
  - Improved specialisms in primary care to avoid hospital appointments

> “Many patients appear to be unable to see their GPs about common problems and so go to A&E clogging up those departments. Rather than being frustrated by this, the A&E departments should have a GP on call at all times so that patients triaged as not needing A&E services can be directed to the GP in the A&E dept.”

> “Better access to appointments with GPs.”

> “Perhaps GPs could have longer consultations with their patients.”

> “Same-day access to a doctor (I have heard of people having to wait days to see a doctor).”

- **Health Promotion:**
  - People want their GPs to actively promote wellness
  - Hand out patient information leaflet
  - Have wellbeing clinics

- **Barriers**

People felt that primary care clinicians/services were potential barriers to OCCG achieving the opportunities set out in their Strategic Direction, the reasons for this being:

- Disengagement of primary care clinicians in the Strategic Direction
- Workload of GPs

> “Disengagement of primary care clinicians due to the deluge of work and low morale.”
"Supporting primary care as the risk of de-stabilisation is both real and catastrophic for health care in general."

- **Opportunities**
  People felt that primary care could also provide solutions to the financial challenge in Oxfordshire, by having:
  - A GP in A&E, to manage inappropriate attendances
  - More drop-in out of hours surgeries
  - Enhance GPs to provide more services
  - More nurse led initiatives
  - Schemes to incentivise people to lead healthy lifestyles
  - More communication with carers to support the patient’s needs
  - Regular wellbeing check-ups

  "Focus on enhancing GP practices in primary care to deliver core services."

  "Reducing time pressure on doctors' appointments."

  "Ban the term 'out of hours'. Health like life is 24/7."

  "Remove the silos between GPs and Specialists."

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**Pharmacies**

A theme for pharmacies was that they could be commissioned to do more, offering wider community based services to reduce pressure on GP practices.

"The CCG needs to start to look at healthcare differently and not assume that all solutions include a GP or hospital intervention. There are many areas where pharmacies could deliver services e.g. flu immunization services as an example- my local surgery could not give me an appointment for 5 weeks and yet, if commissioned, I would have been able to walk into my local pharmacy and have the vaccination done immediately."

"Pharmacies could also deal with many minor ailments thus freeing up GP appointments. Also the CCG may need to do some engagement work with the local communities to encourage patients to choose the least expensive option i.e. not to always go to A&E."