Appendix 3: Responses to the survey from discussion groups and one to one interviews

The engagement for the ‘Primary Care Transformation Programme: Sustaining General Practice’ ran in July and August 2014. A public survey was undertaken. The survey was made available on OCCG’s online consultation platform, Talking Health, which has a membership of more than 2,500 people.

The survey was also emailed to 26 community groups, networks and stakeholders.

An easy read version of the survey was compiled and distributed to our community networks and stakeholders to enable as broad a range of residents as possible to participate in the survey. 19 easy read versions were completed and the feedback incorporated into the main survey results.

The survey was also presented and discussed at various stakeholder meetings, as part of an on-going dialogue. These include:

- Six public locality forums
- Age UK Health and Social Care Panel

Feedback gathered at these forums is detailed immediately below.

Oxfordshire Health and Social Care Panel

What do you want to keep in general practice?

- Named health professional – overview
- Efficient continuity of care
- Local (within 8 miles)
- Knowing when GPs are working and not
- Telephone consultations
- Duty doctor
- Ethos of general practice/ empathy

What do you want to change?

- Look at individuals not screens
- More flexibility in appointment time
- Access (3-5 weeks)
  - Information available in surgeries
- Getting through on phone
  - Good nursing care at home
- Know when to call and who to call
- Improve same day access
- Who is covering doctors on maternity leave
- Improve customer focus - receptionists
- Practice nurse to see new patients and triage
- Same day access
- More holistic care (appointments for more than just one thing)
- Improve link to pharmacists – use them more
• Improve communication between hospital and GPs when discharged
• Prevention: podiatry/ physio – not have to go via GP

West Oxfordshire Locality Patient Forum

Key drivers for sustainability

• Workforce support and development
• Improve efficiencies in how practices organise themselves
• Focus time on clinical work
  o 10
  o 20
• Targeting investment to improve out-of-hospital care
• Increase GP engagement in commissioning
• Improve Patient self-care/ private health budgets
• Improve Patient education around the use of health services
• Innovation to improve access and flexibility
  o Patient transport
  o Technology
  o Federation

Oxford City Locality Patient Forum

What's working well?

• Continuity of care - in most cases
• Easy same day access – telephone or same day appointment
• Practice nurses – management of LTC
• Use of email/ telephone consultation
• Computerised login when arrive at reception

What needs to be different?

• Better links to voluntary sector
• Better access after work e.g. commuter clinic
• Effective telephone triage
• All practices look at how they run their services and flex their system
• Improve support and development for reception staff
• Online information accessible at practice
• Public education about the health system from schools
• Consider changes in ethnic demographics and subsequent impact
• Alternative suppliers of flu vaccines/ travel clinics
• Communications e.g. Share tests results quicker and more humanely
• Knowing when a Dr will telephone or be given a time slot
• Public education of the worried well
• Use practice nurses more
North East Oxfordshire Locality Patient Forum

What’s working well?

- A local service – especially important for rural areas – 2.5 miles best, 10-15 miles no!
- Relationship with local/familiar GP
  - Willing to wait for an appointment to see a GP you trust and know well
- Access to female doctors for female problems
- Health centres
  - Hub for information and other services
- Nurse practitioners – useful expertise
- Telephone conversations helpful
- Online booking excellent

Things to change?

- Access/demand for appointments
  - Having to ring back to get an appointment
- Do Not Attends (DNA’s) – ring in the morning and then don’t show up
- Urgent appointments – it is ok to see a different GP
- Out of Hours – especially in rural areas
  - Mini MIU – reduce A&E attendance
- Branding
  - A&E local
  - A&E express
- Access to any GP in Oxfordshire if you work
- Evening or Saturday appointment offered
- Consideration for carers

South West Oxfordshire Locality Patient Forum

What’s working well?

- Face to face/telephone appointments
- Efficient appointment
- Familiar GP
  - Knowledgeable
  - Keep to time
  - Waiting times
- See doctor urgently when needed
- Standards around access
- Specialist clinics e.g. diabetes
- Nursing service – friendly
• Good terminal care at home
• Friendly and concerned reception staff
  o Properly trained and present
• Easy repeat prescription service
• Email for working patients
• Email/ text appointment reminders

What might be different?

• Training/ education of the public
• Video conferencing with your GP
  o Choice
  o Ability
• Flexibility in appointments
  o Longer for chronic conditions
• Nurse triage, especially urgent same day care
• End registration with one GP/ instead register with practice
• Access to another practice for chronic disease management/ X-ray
• How can patients behave differently?
• Well child/ open house clinic
  o Carers evening
  o Educate 20-30 year olds
• Primary care work out in communities/ outreach especially public health

Results from further discussion groups held within community and patient groups in Oxfordshire

OCCG’s Equality and Access Commissioners also took paper copies of the survey with them throughout the engagement period to encourage members of 30 community groups, particularly within hard to reach groups to complete the survey and share their views. An opportunity was given for people to return the survey as a paper copy via freepost.

Also discussion questions based on the survey were devised to enable OCCG’s Equality and Access Commissioners to run discussion sessions on the survey and gather feedback from a broad range of community groups who may not otherwise complete the survey, such as a Polish Women’s Group in Oxford. Analysis of the feedback received from these groups is contained in Appendix 2 and the full feedback compiled by the Equality and Access Commissioners is detailed below.
OCCG Improving services in GP Services survey

Focus groups

Burford community club 28th July 14

No of attendees and gender: 9 (6 women, 1 man)

Age range: 7 above 75 and 2 (45-55)

Disability status: 6 (No) and 3 (Yes)

Q1 What sort of technology would help you to access your GP?

- The majority do not use the Internet or technology (two out of nine do)
- Text messages for appointment reminders are helpful for those two who use technology

Q2 How could your GP’s surgery provide you with more support

- Shorter waiting time for patients with illnesses (it takes two days to get a GP appointment; didn't get an appointment when had flu)
- Would like to see own GP (not always possible due to GP split in different surgeries) and not helpful if have to see a different GP every time
- Long wait over the phone to speak to a receptionist – sometimes have to wait for 10 minutes in a queue

Q3 What could be done to improve the surgery for your community?

- Five different options given over the phone – it is confusing for older partially sighted people to key in their date of birth before being put through to the receptionist
- Prefer face to face appointments rather than over the phone
- Home visits to be given to older people who have long term conditions but are not mobile and rely on their carers (would have to otherwise call 999)
- Continuity of care by own GP, other doctors do not understand your medical history
- When unwell, want to be seen sooner and not have to wait for a week
- There is a transport problem in Burford, with unreliable bus services - no direct bus from Carterton to Burford, it has to go via Witney

Q4 How far would you be willing to travel to see a GP or PN?

- Bear in mind that people with dementia can't travel alone
- 0-2 miles
OCCG Improving services in GP Services survey

Focus groups

St Mungos Witney (support for young homeless people) 21st July 14

No of attendees and gender: 5 (3 women, 2 men)

Age range: 4 (22 to 27) and 1 (35-44)

Disability status: 4 (No) and 1 (Yes)

Q1 What sort of technology would help you to access your GP?

- Two attendees want to receive text messages for appointment reminders/test results
- One attendee would prefer a written letter, as don’t like fiddling with gadgets
- One attendee wants to order repeat prescriptions over the phone due to lack of computer access
- None regard having an appointment with GP/PN by internet video call as important

Q2 How could your GP’s surgery provide you with more support

- Shorter waiting times (turned up at 9 am, not seen till 11 am)
- To be seen on the same day (had to wait for 2 weeks to be seen by GP or PN)
- More responsive services (waited for 5 hours for GP to call back)
- Not having to travel to another surgery to be seen (can’t afford travel cost)
- Less waiting times at reception (there was a long queue because the receptionist was chatting to a patient about something unrelated to their appointment)

Q3 What could be done to improve the surgery for your community?

- More information about medical care provision (don’t feel involved in planning own care)
- More assistance in giving drugs for long term conditions
- Being able to order repeat prescriptions over the phone
- Feel more comfortable seeing own GP rather than having to go through medical history with a different GP
- Get reminders for appointment s
- Accurate diagnosis (local pharmacist gave wrong advice re skin condition)
- One GP was helpful, gave prescription over the phone for collection on the same day

Q4 How far would you be willing to travel to see a GP or PN

- 0-2 miles (two attendees strongly disagree with seeing a GP at another surgery due to travel cost)
- Have used 111 and MIU services
- Patients with mental health issues/disability would struggle to travel on their own to a different surgery
OCCG Improving services in GP Services survey

Individual Interviewing

MIND Witney 29th July 2014

The group participants said they feel more comfortable to be interviewed individually due to confidentiality issues around their mental health condition, their responses are recorded in the same format as the focus group questions:

No of Attendees:

Age range and gender: 20-25, 25-30, 40-50; 3 women, 1 man

Disability status: 3 (No) and 1 (Yes)

Q1 What sort of technology would help you to access your GP?

- Text messages or email for appointment reminders
- Waste of money as patients should take responsibility to remember appointments
- On-line booking through the Internet
- On-line facilities for repeat prescription

Q2 How could your GP’s surgery provide you with more support?

- To be seen by a GP within 48 hours rather than having to wait for 3 weeks
- Better bedside manner (don’t feel relaxed seeing my GP)
- GPs have more understanding about patients’ mental health needs
- Good facilities, majority of GPs are friendly
- Would rather talk to a female GP about mental health problems
- PNs to do x-rays and injections when needed
- To get an appointment to see my own GP, it can take 2 weeks
- Prefer to see own GP who understands my needs and long term care
- I put with up a long waiting time to see my GP because he is good
- Have to wait for a long time to speak to a receptionist as the phone line is often engaged for a long time
- I don’t know exactly what PNs do but she was helpful with my ear infection

Q3 What could be done to improve the surgery for your community?

- More user friendly room layout in waiting area (feel uncomfortable with the chairs lined up facing the doorway)
- Not having to explain to the receptionist what my problems are before getting an appointment
- GPs share more information about other support services. Currently unaware of them
- Prefer to see a GP in the first place as PN asks me to see my GP anyway
- Would like to be seen sooner for mental health problems
- No change, happy with it
• Aware of 111 but had to wait for 2 hours before they got back to me, the situation could have turned into an emergency
• GPs do not make me aware of support through other agencies whilst waiting for counselling
• Happy with MIU support when I went before
• Have used 111 twice, happy with it
• PN helpful, did my injections fortnightly
• Aware of MIU suggested by 111
• The waiting time to be seen on the auto check-in is inaccurate, as often said 0 minutes waiting time but had to wait for over half an hour
• Unaware of 111

Q4 How far would you be willing to travel to see a GP or PN

• Happy to see another GP but I don’t like driving due to anxiety (not more than 5 miles)
• OK to go and see GPs in another surgery in an emergency situation (no more than 5 miles)
• Have difficulty travelling because of chronic migraine
• Willing to travel to see a good GP but prefer to see another GP if I can stay with the same surgery (not over 5 miles).
Further Focus Group results

Report compiled by RE

<table>
<thead>
<tr>
<th>Name of Group</th>
<th>Type of Group and numbers</th>
<th>Person who visited</th>
<th>Date of Visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christian Life Centre</td>
<td>15</td>
<td>M</td>
<td>06.08.14</td>
</tr>
<tr>
<td>Emmaus (homeless)</td>
<td>10</td>
<td>M</td>
<td>30.07.14</td>
</tr>
<tr>
<td>BK Luwo</td>
<td>African Women’s Group</td>
<td>RE</td>
<td>17.7.2014</td>
</tr>
<tr>
<td></td>
<td>20 members on the day</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barton Community Association</td>
<td></td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>Asian Cultural Centre and Mosques</td>
<td>30</td>
<td>M</td>
<td>08.08.14</td>
</tr>
<tr>
<td>Refugee Resource</td>
<td>Refugee Women’s Group</td>
<td>RE</td>
<td>Not meeting during engagement period</td>
</tr>
<tr>
<td>Open Door</td>
<td>15-20 members</td>
<td>RE/N</td>
<td>24.07.14</td>
</tr>
<tr>
<td></td>
<td>Some did not want to</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>complete the survey</td>
<td></td>
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</tr>
<tr>
<td>Luther Street Practice PPG</td>
<td></td>
<td>Send to PM for PPG to do</td>
<td></td>
</tr>
<tr>
<td>(Homelessness)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Forum Chairs and PPGs</td>
<td>N</td>
<td></td>
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<tr>
<td>------------------------------------------------------------</td>
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<td></td>
</tr>
<tr>
<td>Isis Carers Group (dementia)</td>
<td>Dementia Carers Group</td>
<td>RE</td>
<td></td>
</tr>
<tr>
<td>10 members attended</td>
<td>RE</td>
<td>08.08.14</td>
<td></td>
</tr>
<tr>
<td>Happy Place</td>
<td>Chinese Group</td>
<td>RE</td>
<td></td>
</tr>
<tr>
<td>No response to email phone calls</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Redbridge Gypsy Community</td>
<td>Gypsies and travellers</td>
<td>RE/L</td>
<td></td>
</tr>
<tr>
<td>Not meeting during the engagement period</td>
<td></td>
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<tr>
<td>Rose Hill Tenants Association</td>
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<tr>
<td>Asian Women’s Group, Rose Hill</td>
<td>Asian Women</td>
<td>RE</td>
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</tr>
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<td>Not meeting during the engagement period</td>
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<td></td>
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<tr>
<td>Polish group</td>
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<td>M</td>
<td></td>
</tr>
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<td>28.07.14</td>
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<td></td>
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<tr>
<td>Over 50’s Club BBL</td>
<td>12</td>
<td>M</td>
<td></td>
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<tr>
<td>06.08.14</td>
<td></td>
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<tr>
<td>Neighbourhood Regeneration Partnerships</td>
<td></td>
<td>N</td>
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</tr>
<tr>
<td>Prime Time</td>
<td>Over 50’s Club</td>
<td>Not meeting during the engagement period</td>
<td></td>
</tr>
<tr>
<td>Cowley Community Club at the Mill</td>
<td>Over 50’s West Indies Club</td>
<td>RE</td>
<td></td>
</tr>
<tr>
<td>15 member attended</td>
<td></td>
<td>25.07.14</td>
<td></td>
</tr>
<tr>
<td>Terence Higgins Trust / LGBT</td>
<td>15</td>
<td>M</td>
<td></td>
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<tr>
<td>29.07.14</td>
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<tr>
<td>MIND</td>
<td></td>
<td>RE</td>
<td></td>
</tr>
<tr>
<td>EMBS</td>
<td>15</td>
<td>M</td>
<td></td>
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<tr>
<td>28.07.14</td>
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<tr>
<td>African women’s group</td>
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<tr>
<td>Christian Life Centre</td>
<td></td>
<td>Not meeting during the engagement period</td>
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<tr>
<td>EMBS</td>
<td>15</td>
<td>M</td>
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<tr>
<td>28.07.14</td>
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<tr>
<td>Clockhouse</td>
<td>10</td>
<td>M</td>
<td></td>
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<tr>
<td>30.07.14</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day Break Service</td>
<td>70</td>
<td>M</td>
<td></td>
</tr>
<tr>
<td>30.07.14</td>
<td></td>
<td></td>
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</tbody>
</table>

**Key feedback comments**

- The timing of this engagement activity coincided with the summer period when a lot of groups do not meet
- Some asylum seekers and refugees found it hard to register with a GP
- Some said it was easier to go to A&E than get an appointment with their GP
- You may wait four hours at A&E but could wait two weeks to see your GP
• Some countries do not have GP surgeries so they go straight to the hospital
• Language was sometimes a problem when talking to the receptionist or the GP
• Depending on the illness traveling to see another GP could be a problem
• If you do not have transport or are elderly, traveling to another surgery may be a problem
• I have been with my GP for a very long time and would not be comfortable seeing another GP at another surgery
• Text messages with details of results are useful but does depend on the test results
• If you are not computer literate or do not have a computer, appointments and consultations are not possible
• The elderly do not all want to use technology
• Pharmacies are not trained GP’s but feel confident to go to them for advice on minor illness
• Receptionist was sometimes rude and off-putting
• No easy read or translated versions
• The survey was very long
• Will the results be published?
• Will we be notified of the changes?
Primary Care Transformation Consultation Report for South Oxfordshire

The Equality and Access Commissioners were asked to support the Primary Care engagement activity as we have relationships with particular groups, and are specialised in engaging with ‘hard to reach’ communities.

An email was sent explaining the survey with the questionnaire attached, to many individuals, groups and organisations to reach as wide a cross section of the Oxfordshire population as possible. Some groups preferred to hold focus group discussions.

The below table grid showed the groups/organisations in South East & West Oxfordshire that were contacted.

<table>
<thead>
<tr>
<th>Name of Groups/organisations &amp; Date of Visit</th>
<th>Focus group discussion or Questionnaire</th>
<th>Questionnaires sent</th>
<th>facilitator</th>
<th>Any Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Redbridge Hallow Gypsy and Travellers Women’s Group 09/07/14</td>
<td>Focus group discussion didn’t take place, Questionnaires were given</td>
<td>Yes</td>
<td>L/R</td>
<td>Attended the group as arranged, but session cancelled at short notice.</td>
</tr>
<tr>
<td>Didcot Women United Group (MIND) 13/08/14</td>
<td>Focus group discussion (see notes following this table), also Copies of the survey were given</td>
<td>Yes</td>
<td>L/R</td>
<td>10 women attended, Notes were taken from focus group discussion, also survey questionnaires were given; some took for their friends and family members</td>
</tr>
<tr>
<td>Members of the South &amp; Vale Mental Health Multi-agency Liaison Group (representation from 35 different organisations)</td>
<td></td>
<td>Yes</td>
<td></td>
<td>Liaised with the coordinator and surveys were sent to more than 46 members, as the next meeting is in September.</td>
</tr>
<tr>
<td>MIND Wellbeing Centre Abingdon</td>
<td></td>
<td>Yes</td>
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<tr>
<td>Abingdon Muslims society</td>
<td></td>
<td>Yes</td>
<td></td>
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<tr>
<td>Didcot Muslim Society</td>
<td></td>
<td>Yes</td>
<td></td>
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<tr>
<td>Age UK, Oxfordshire</td>
<td></td>
<td>Yes</td>
<td></td>
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<tr>
<td>Carers Oxfordshire Carers</td>
<td></td>
<td>Yes</td>
<td></td>
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<tr>
<td>South and Vale Carers</td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>Organisation</td>
<td>Attendance</td>
<td>Notes</td>
<td></td>
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<tr>
<td>Centre</td>
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<tr>
<td>Bluebird Care (South Oxfordshire)</td>
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<tr>
<td>The Polish School Oxford</td>
<td>Yes</td>
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<tr>
<td>Filipino Community of Oxfordshire</td>
<td>Yes</td>
<td></td>
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<tr>
<td>Didcot Dementia Carers</td>
<td>Yes</td>
<td></td>
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<tr>
<td>Abingdon Carers Support Group 05/08/14</td>
<td>Yes</td>
<td>L</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Six carers attended Notes were taken from focus group discussion, also surveys were given; some took for their friends and family members.</td>
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<tr>
<td>Didcot Carers Group</td>
<td>Yes</td>
<td></td>
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<tr>
<td>Henley Carers Group</td>
<td>Questionnaires</td>
<td>Yes</td>
<td>Survey sent as group not meeting during engagement period</td>
<td></td>
</tr>
<tr>
<td>Henley Dementia Carers support Group</td>
<td>Questionnaires</td>
<td></td>
<td>Survey sent as group not meeting during engagement period</td>
<td></td>
</tr>
<tr>
<td>Chalgrove, Carers Group</td>
<td>Yes</td>
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<td></td>
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<tr>
<td>Wallingford Stroke survivors and carers</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>Wallingford Carers Drop in Cafe</td>
<td>Yes</td>
<td></td>
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<tr>
<td>RAF Benson Carers Group</td>
<td>Questionnaires</td>
<td>Yes</td>
<td>Survey sent as group not meeting during engagement period</td>
<td></td>
</tr>
<tr>
<td>Dalton Barracks</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>Didcot Army base</td>
<td>Yes</td>
<td></td>
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<tr>
<td>Multiple Sclerosis Group (M.S.)</td>
<td>Abingdon</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>Abingdon Vale Memory Café</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Abingdon Rethink support Group</td>
<td>Yes</td>
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<tr>
<td>Memory Support Café – Didcot</td>
<td>Yes</td>
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<tr>
<td>Cornerstone Project Didcot</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Community Information Network</td>
<td>South Team</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Information Workers for the Vale</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>Community Arts</td>
<td>Yes</td>
<td></td>
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<tr>
<td>Workers</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Health Advocate for Gypsy &amp; Travellers communities</td>
<td>Yes</td>
<td>Survey sent as group not meeting during engagement period</td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Oxfordshire District councils</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Vale of White Horse District Council</td>
<td>yes</td>
<td></td>
<td></td>
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<tr>
<td>Grand Pont children centre</td>
<td>yes</td>
<td>Survey sent as groups not meeting during engagement period, however parents who use the centre will be invited to complete the survey.</td>
<td></td>
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</tbody>
</table>

Below are the notes from two discussion groups referenced in the table above. In addition to this collated feedback, more than 12 completed surveys from the Black and Minority Ethnic community were submitted.

**Focus group Discussion notes from Primary care consultation on 5th August 2014, Abingdon Carers group**

Six older carers male/female of white British origin attended, they all took part in the discussion, were very interested in the topic and were very helpful.

**Focus group questions;**

1. **A) What are people’s perceptions of primary care services? B) The role of practice nurse, c) future development of GP surgeries?**
   
   - Generally provide a good service, some surgeries provide better services than others
   - Would like quicker appointments, at present the waiting time for an appointment either with a GP or practice nurse is one to two weeks
   - Want same doctors, because patients have a lot of complications, need continuity and to avoid having to explain everything
   - Prefer longer opening hours for surgeries.
   - Some patients have already benefited from this.

2. **a) What is good in your practice/ what works well? b) What you may like to change in your GP practice? C) How your GP practice could be different in 5 years’ time?**

   - Extended opening hours of the practice.
   - Priorities for certain patients
   - Telephone consultations
   - Doctors home visits

   The above only apply to a very few GP surgeries at the moment, this should be done across all surgeries.
• Extended opening hours of many practices.
• Priorities should be given to carers and patients with complications
• Difficult to get urgent appointments, as you need to phone from 8.30 to 9.30, sometimes the phone is engaged and by the time you get through it’s too late and the next available appointment is in 3 days’ time. This needs to be improved.

3. What sort of technology would help you to access your GP?
   Making appointments -
   • Technology is not for older people. Maybe younger people will benefit from it
   • By making appointments online, it may free up switch board, - many members of the group said they do not use computers and do not like email
   Text messages -
   • Older people don’t use text messages and cannot hear if a text message comes through
   • Don’t know how to text message and not interested at all
   • Although it’s a good idea to send a reminder through text message, surgeries send letters.

4. How could your doctor’s surgery provide with more support?
   • The NHS 111 service is very good
   • Some surgeries have information on a noticeboard
   • Some carers know about voluntary support services by coming to a carers group
   • It would be helpful if people could be sign posted to services by practices.

5. What could be done to improve the surgery for your community?
   Issues re Caring responsibility
   • Sometimes it is difficult for carers to attend appointments due to their caring responsibilities and to find suitable alternative care arrangements
   • Carers should be given priority and offered appointment slots that suit them
   • It is difficult to take patients who are cared for to early morning (e.g. 9am) appointments.

6. How far would you be willing to travel to see a GP or practice nurse?
   • Not happy to attend other surgeries
   • Need continuity, some people don’t have transport

Focus Group Discussion notes from Primary Care consultation on 13th August 2014, Didcot Women United Group

This group is run by Oxfordshire MIND; it provides support to all age groups.

Ten women of white British origin from different age groups attended. The group fully participated in the discussion and wanted to express themselves and share their views.

1. A) what are people’s perceptions of primary care services. B) The role of practice nurse, c) future development of GP surgeries.
The below comments were made:

- Some GPs are better than others
- Some members of the group said their surgeries provide good services whereas others said their surgeries don’t
- Some surgeries take a few days to prepare prescriptions, which is difficult for people with mental health issues.
- Have to see different doctors every time
- It is hard for people with complications having to explain things repeatedly.

2. a) What is good in your practice/ what works well? b) What you may like to change in your GP practice? C) How your GP practice could be different in 5 years’ time?

- Some surgeries give priority to children under five to be seen straight away
- Some surgeries can prepare prescriptions in two hours
- Want to see same doctor regarding complicated issues
- Abingdon Out of Hours provide the best service

3. What sort of technology would help you to access your GP?

   Making appointments -
   - Not easy to get online appointments
   - Concerns over people booking appointments and those who make phone calls to get appointments may not have any slots left for them.
   - Text message reminders are useful
   - Text / email is better for straight forward test results however if results are negative and there are concerning issues, results should be given in person

4. How could your doctor’s surgery provide with more support?

   Mental Health –
   - As far as mental health issues, funding cuts are a big concern
   - Some practices don’t offer support
   - Certain surgeries don’t put information re mental health on their information board/wall

5. What could be done to improve the surgery for your community?

- Reduce waiting times for appointments
- Want to see same doctors for complicated issues
- Have to wait weeks for blood tests
- One of the group members expressed how her daughter (a Nurse) couldn’t have a blood test because it was a fasting blood test and she couldn’t take time out from work
- Getting prescriptions is hard
6. How far would you be willing to travel to see a GP or practice nurse?

- Some said they would not mind travelling a short distance
- Most people do not want to see a GP or nurse in a different practice.

**Barriers and recommendations;**

Given the short time frame and summer holiday period, many community support groups were not running during the engagement period. Ideally this type of engagement should not run over the summer holiday.

Overall the consultation went well and there was a good response.

19.08.2014

Please see the full report and appendix one and two for more detail on the responses shared via returned surveys.