

Summary

Oxfordshire CCG held one event in Didcot in November 2017. The workshop allowed local people to share their views on how GP and primary care services in their localities could be organised.

This workshop and an online survey (for anyone unable to attend the workshops) follow and expand the work involving the CCG, local GP practices and patient representatives, who have been discussing plans for the future of primary care services in Oxfordshire for the past six months.

The key themes highlighted are below:

Key Themes	Summary of issues
Transport/Rurality	<ul style="list-style-type: none"> • Need subsidised transport • Can there be free transport to get people out and about? • Can there be free transport to get people out and about? • Volunteer drivers +++ • Better bus transport • Infrastructure - yet CCG can't influence buses • Population increase - public transport is an issue
Patient Access to GP Appointments	<ul style="list-style-type: none"> • Waiting times 6 weeks to see a named doctor - continuity • Follow-up phone call 3 days Maberley Way in Wantage • DNA's stats work well • Not acceptable to have to wait 5 weeks to see their own GP • What is being done to reduce the waiting times for people to see their GPs?
Structure of GP Surgeries/NHS	<ul style="list-style-type: none"> • Staffing biggest problem a worry - realistically will jobs be filled? • A lot of GP practices risk instability due to lack of GPs available • People want local practices with GPs rather than one big locality hub • Move away from traditional working GPs schedules • Share admin support • Texting/reminding appointments useful • Shared training - this would help to save money • Smaller practices find it hard to manage if staff absences - look at supporting smaller practices and not abandoning them - thank you
Continuity of Care	<ul style="list-style-type: none"> • locum's - can be an issue with continuity of care for the older patient • Larger practices - loss of continuity between patient and staff - see Drs you don't necessarily see each time - not good for patient relations • There are Patients who want convenience and not bother about continuity and the others that want continuity - challenge to balance it out

	<ul style="list-style-type: none"> Elderly patients need personal contact over the telephone, they do not all have mobiles/computers Essential for patients to see the correct specialist
Secondary Care	<ul style="list-style-type: none"> Speed up communication especially with secondary care letter communication between primary care and secondary poor - impacts on GP ability to help patients - no communication
Pharmacy/Prescriptions	<ul style="list-style-type: none"> Make sure patients get an email to say prescription is in at BOOTS! Dispensing practice - can email repeat prescription
IT/Information	<ul style="list-style-type: none"> Simple email route for non-sensitive information Patient records are electronic, older ones kept on paper Better use of IT, i.e. send an email instead of a letter to patients
Housing	<ul style="list-style-type: none"> Growth will come from housing Developer could blackmail councils? - Idea of what stages development are? What funding has been given? What land has been put aside? Wantage issue relates to package - housing, schools, transport Abingdon, 15000 houses which practices will absorb population In Didcot there is a large housing growth so the infrastructure has to be addressed
DNAs	<ul style="list-style-type: none"> DNA's stats work well DNA's could be improved Why are people not charged if they DNA for their GP appointments?
Health Promotion	<ul style="list-style-type: none"> What plans do you have for engaging more with the public - to treat themselves first when they can, seek advice from a pharmacist, etc. and not just thing about going to see their GP? Increase social prescribing Need more communication/leaflets to help inform patients of signs to look out for as they get older
Confidence in CCG	<ul style="list-style-type: none"> Forward planning has to come first with the business case Difficult to disagree with priorities - issue is how are you going to do it? Is anyone in CCG in charge of making this happen? Limited levers to fix problem. How soon is it likely to happen? What is being done about the reducing numbers of GPs in primary care? No confidence that it will be delivered

A full report on this public engagement and its feedback will be published before the end of 2017. This feedback will help shape and inform the draft locality plans before they are published in January 2018 for further public comment.

Implementation of some of the proposals will begin in 2018, but the plan will be continuously revisited as further engagement helps develop it.