

## South East Oxfordshire Locality Plans – Survey Results and Demographics

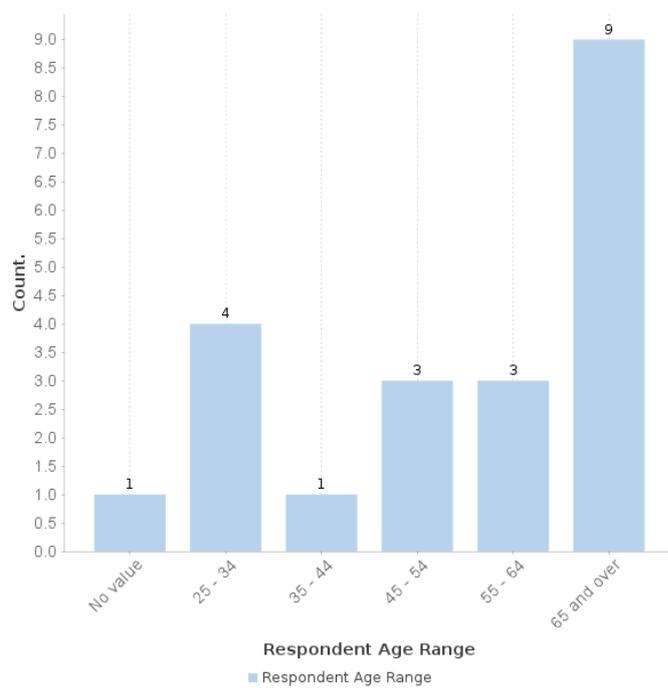
These are the results of the survey that ran from 3 November – 3 December 2017.

60 people registered and followed this engagement activity on Talking Health. Of these 60 people, 21 people then responded to the survey.

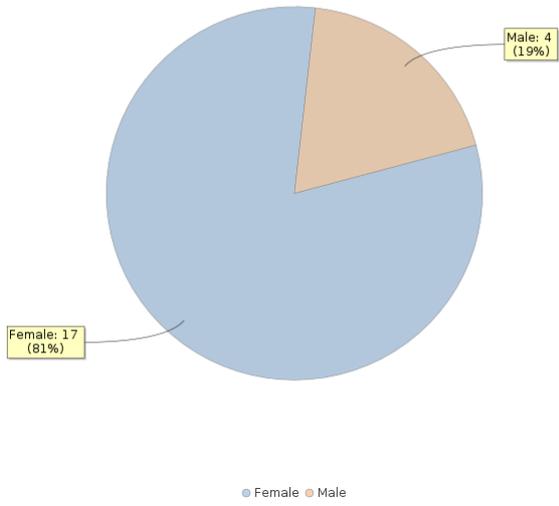
### Demographics

The demographics for the 21 people that responded to the survey are shown below:

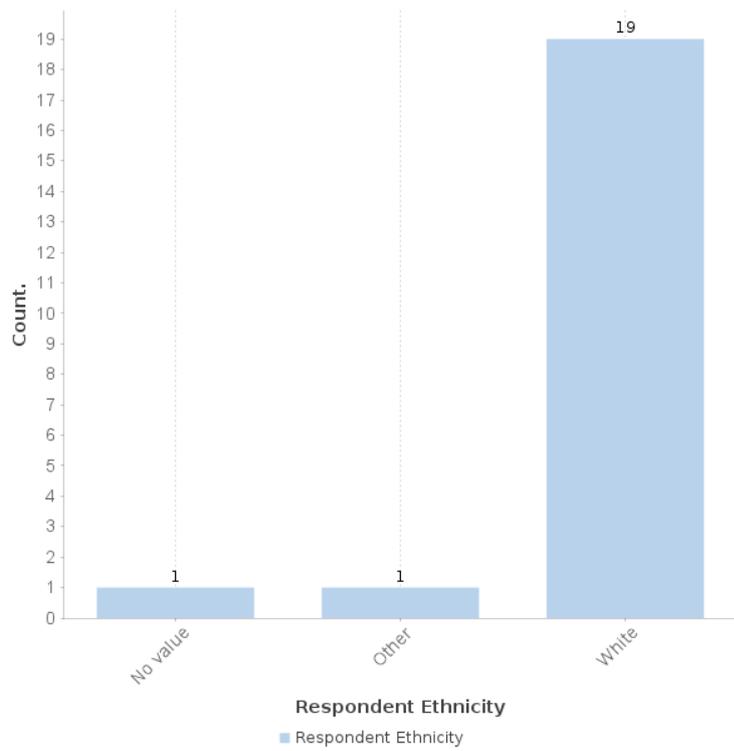
#### *Respondent Age Range*



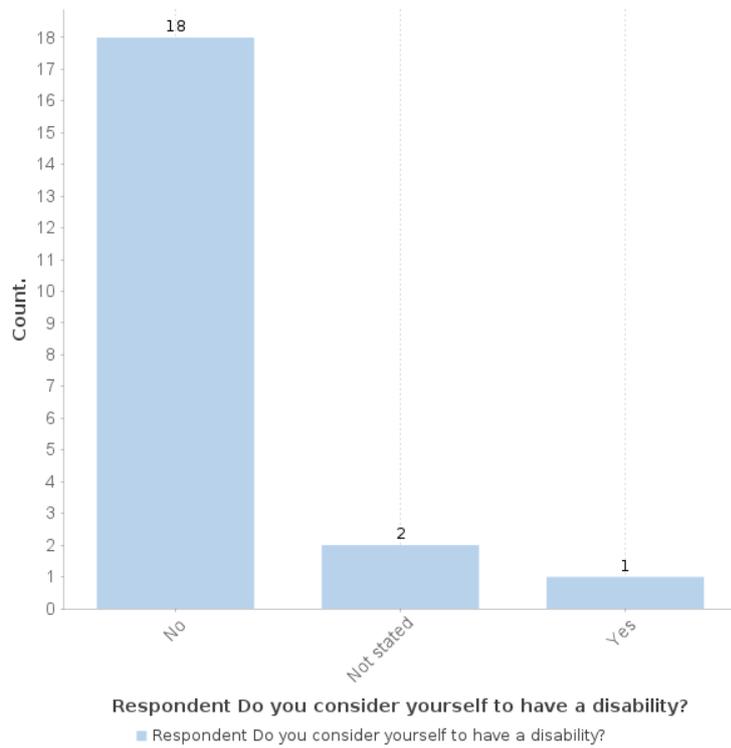
#### *Gender of Respondents*



**Ethnicity of Respondents**



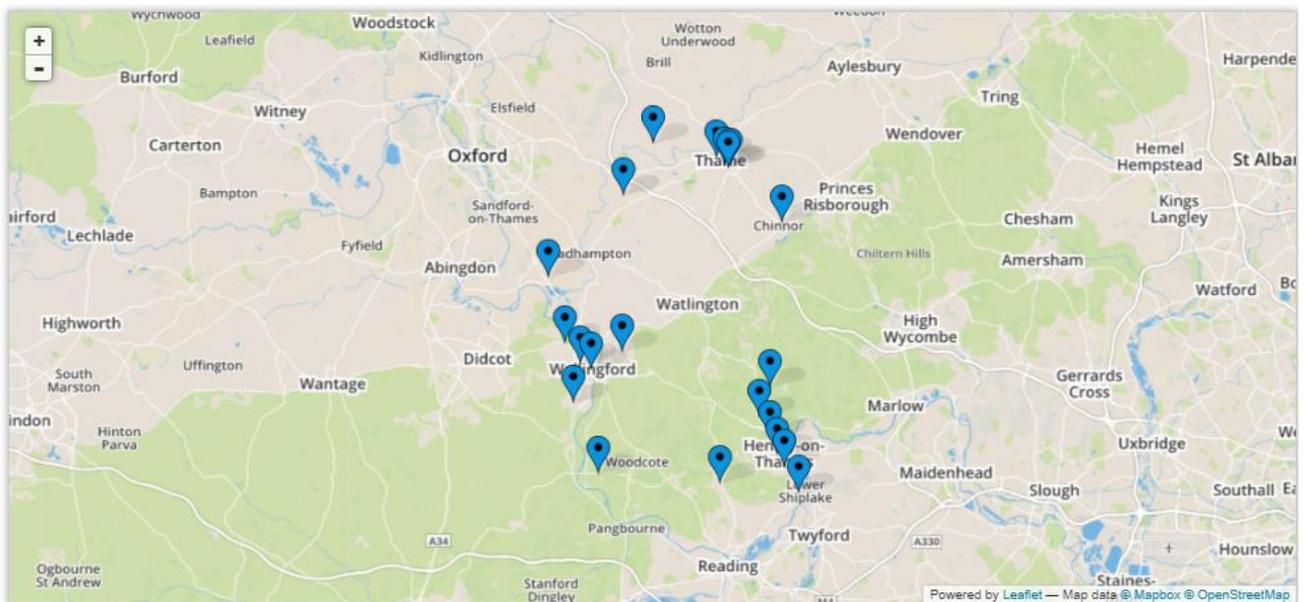
**Disability status of respondents**



## Survey Results

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

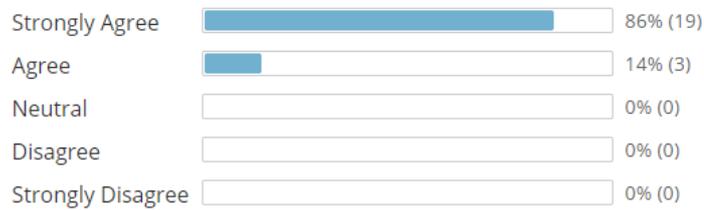
### Map of respondents - South East Oxon Locality



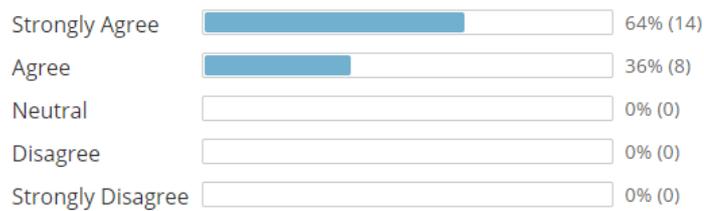
**1. To what extent do you agree or disagree with the ideas/suggestions below:**

Twenty two people responded to this question and agreed with all the ideas/suggestions. Only one person gave a neutral response increasing preventative and self-care.

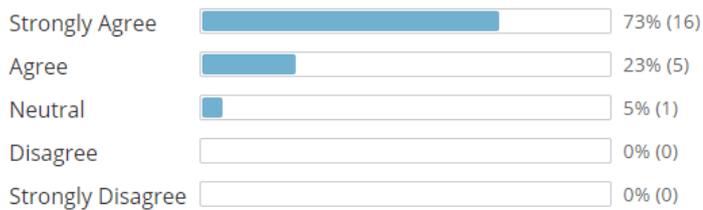
**Detailed breakdown for 'Sustainable primary care'**



**Detailed breakdown for 'Care for the ageing population'**



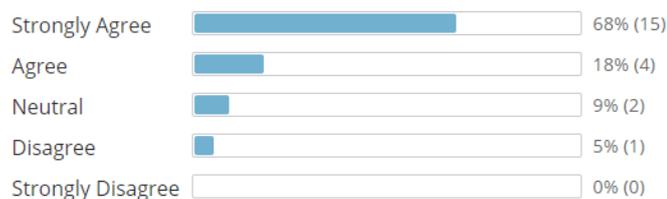
**Detailed breakdown for 'Increase preventative and self-care'**



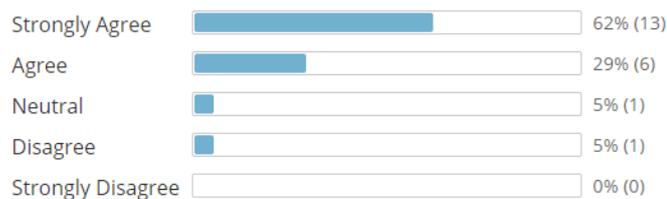
**2. Please could you tell us if you agree or disagree with our approach on how to do this?**

Twenty two people responded to this question and in general they agreed with the approaches highlighted.

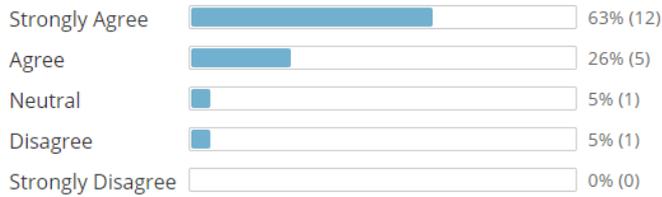
**Detailed breakdown for 'Continue to retain GP trainees and support GP practice mergers where requested.'**



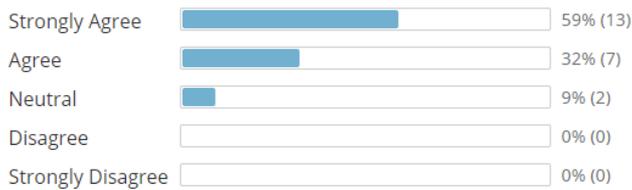
**Detailed breakdown for 'Expansion of ambulatory care for frail / elderly people which means patients are assessed, diagnosed, treated and go home the same day, without being admitted into hospital overnight.'**



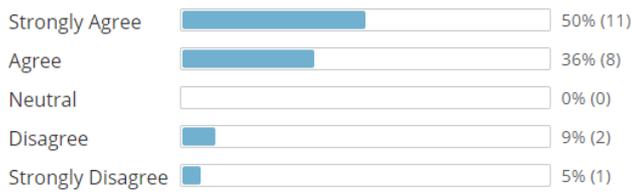
**Detailed breakdown for 'Expansion of ambulatory care for frail / elderly people which means patients are assessed, diagnosed, treated and go home the same day, without being admitted into hospital overnight.'**



**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.'**



**Detailed breakdown for 'Integration of mental health services with other healthcare services.'**



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

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

- Same day telephone consultations
- Engagement from the practice/GPs in the PPG
- Staff are friendly and welcoming
- Good range of nurse based services
- DIY blood pressure checks in the waiting room

*Same day appointments. Knowledgeable staff, continuity of care.*

**4. What could be improved at your GP Practice?**

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

- Staff training/empathy
- Privacy
- Better layout of Reception
- Website and communications
- Parking
- Routine appointments take longer to get
- Waiting times

- Access to appointments on the weekend
- Social Care provision

*It should be easier for GPs to be able to find local care for frail patients and for patients leaving hospital, but not yet ready to return to their own homes. here in Thame there is frequent problem of Oxfordshire Medical Care and Bucks Social Services. This can waste a lot of GP's time.*

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

17 people answered this question. The key themes raised were:

- Increase capacity to meet demand/population growth
- Improve communication
- Consider different approaches/models for caring for the elderly
- More local care
- Better use of technology
- Expand the role of the community hospital

*Would be good to be able to email a specific GP about on-going matters, as this might save them time - they could respond when convenient.*

*So far as the care of the elderly is concerned, perhaps the trust could contract a number of GPs/nurses/social workers etc to work in a specialised service caring for the elderly, especially people living in residential care. These people could work together to provide people with appropriate care focusing on independence and quality of life. Palliative care could also be included in this provision. So essentially an extension of the existing care home initiative. Expansion of ambulatory care for the elderly is a great idea but only if the resources are available to stop people needing to be re-admitted and to ensure that they get appropriate aftercare.*

*Better communication with patients verbal, via website, email, twitter etc.*

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

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

- Improve patient education
- Access to minor injury units from rural areas is difficult
- Need to address the lack of funding in the NHS

*Many just want to go, see a doctor, and leave. Many others would like more guided information about their condition and where to find more advice, or patient groups.*

Following this survey, the draft plan for South East 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.

Thirteen 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 18 - 31) – have we got them right?**

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

- More emphasis on self-care and prevention
- No clear actions identified in the plan
- Access
- Continuity of care

*It is important for patients who are disabled or feeling quite seriously ill to be able to gain access to a parking place close to the surgery.*

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

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

- Integration of services
- Infrastructure is missing – lack of transport

*The integration of health and social care provisions is vital.*

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

13 people responded to this question and raised the following points/concerns:

- Encourage patients to self-care – purchase their own equipment (blood pressure monitors)
- Establish an independent service to manage care homes
- No mention of Thame in the plans
- Access – impact parking and lack of public transport
- Lack of staff
- Charge for ‘Do not attend’ appointments
- Remove free prescriptions for non-chronic conditions

- Suspend care for people that do not self care
- Continuity of care

*I would like to see encouragement, for those patients who can afford it, to purchase their own diagnostic equipment such as Blood Pressure Monitors. This would put less strain on demand on existing GP Practice equipment allowing it to be made available to those unable/unwilling to purchase their own - and opens an opportunity for more frequent/regular (home) monitoring where individuals are interested to do so. Hopefully thereby encouraging Self care in medium term.*