North East Oxfordshire Locality Plans – Survey Results and Demographics
These are the survey responses to the survey that ran 3 November – 3 December 2017.

37 people registered and followed this engagement activity on Talking Health. Of these 37 people, 19 people then responded to the survey.

Demographics
The demographics for the 19 people that responded to the survey are shown below:

Respondent Age Range

Gender of Respondents
**Ethnicity of Respondents**

- **Respondent Ethnicity**
  - No issue: 1
  - Prefer not to say: 1
  - White: 17

**Disability status of respondents**

- **Yes**:
  - 2

- **No**:
  - 14

- *Respondent Do you consider yourself to have a disability?*
  - Yes: 2
  - No: 14
  - Not stated: 3
**Survey Results**

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

Map of respondents - North East Oxon Locality

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

21 people responded to this question. Six people either disagreed or provided a neutral responses to the following idea 'Increased self-care and health and wellbeing support'. The remainder of the suggestions were either agreed with or strongly agreed with.

<table>
<thead>
<tr>
<th><strong>Detailed breakdown for ‘Ensure sustainable primary care’</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Agree</td>
</tr>
<tr>
<td>Neutral</td>
</tr>
<tr>
<td>Disagree</td>
</tr>
<tr>
<td>Strongly Disagree</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>81% (17)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agree</td>
<td>19% (4)</td>
</tr>
<tr>
<td>Neutral</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0% (0)</td>
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<table>
<thead>
<tr>
<th><strong>Detailed breakdown for ‘Increased capacity in primary care to manage housing growth’</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Agree</td>
</tr>
<tr>
<td>Neutral</td>
</tr>
<tr>
<td>Disagree</td>
</tr>
<tr>
<td>Strongly Disagree</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>80% (16)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agree</td>
<td>15% (3)</td>
</tr>
<tr>
<td>Neutral</td>
<td>5% (1)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0% (0)</td>
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</tbody>
</table>
2. **Please could you tell us if you agree or disagree with our approach on how to do this?**

21 people responded to this question. Whilst the majority of respondents agreed or strongly agreed with the approaches identified, a number of people did provide neutral responses to some of the questions. This may indicate there was insufficient information for them to make an informed response.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>New ways of caring for people with long term conditions</td>
<td>29% (6)</td>
<td>57% (12)</td>
<td>14% (3)</td>
<td>0% (0)</td>
<td>0% (0)</td>
</tr>
<tr>
<td>New ways of caring for frail elderly people</td>
<td>48% (10)</td>
<td>38% (8)</td>
<td>14% (3)</td>
<td>0% (0)</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Increased self-care and health and wellbeing support</td>
<td>29% (6)</td>
<td>43% (9)</td>
<td>14% (3)</td>
<td>14% (3)</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Increase access to primary care appointments at evenings and weekends</td>
<td>46% (10)</td>
<td>14% (3)</td>
<td>38% (8)</td>
<td>0% (0)</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Support for practices to work together</td>
<td>38% (8)</td>
<td>33% (7)</td>
<td>29% (6)</td>
<td>0% (0)</td>
<td>0% (0)</td>
</tr>
</tbody>
</table>
3. **What do you like / works well at your GP Practice?**

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

- Access to a nurse practitioner
- Accessibility – online services, online patient access system
- Continuity of care
- Range of services: walk in blood clinic, blood nurse, dedicated emergency doctor

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The quality of the care I have received. Doctors with special interest in specific ailments. Use of practice nurses for routine things that do not require the doctor's expertise.
4. **What could be improved at your GP Practice?**

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

- Waiting times
- Privacy in reception area
- Continuity of care
- Extend online access to appointments with Nurses
- Definition of what is urgent

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**In the Summer I called to get an appt for my daughter, there wasn’t one available for the next 4 weeks so I just had to end the call. 2 weeks later I tried again and I got one the following week.**

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**Better distinction as to what the word URGENT means. To me it means if I could not be seen then I am in danger. The practice seems to think urgent is "I would like to be seen quickly"**

As a consequence non-urgent appointments can be weeks away with the schedules full of people that do not have urgent needs but think that they should be seen.

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**Speed of routine appointments - there seem two options "urgent" or routine - same day through triage which means ringing and waiting at home to see whether you need to go to the surgery or can go to work and routine which is standard 3 week wait. Sometimes it is difficult to know whether you should be waiting for 3 weeks. A concern that some patients will then go for the urgent option when they don’t really need that which then exacerbates the problem.**

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

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

- More GP appointments
- Means testing free prescriptions

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**Make more appointments for different 'conditions' available via nurse specialists - e.g. minor ailments, minor conditions, LTC, aches and pains**

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

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

- Bring secondary care consultations to GP surgeries
- Improve mental health services
- Increase provision, due to housing and population growth

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**Need more capability within the GP practices in the area due to the substantial increase in houses being built in Bicester and villages.**
Following this survey, the draft plan for North 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.

Eight 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 - 39) – have we got them right?**

   8 people responded to this question and raised the following points:

   - The role of advanced nurses (eg tissue viability nurses) is very important.
   - Lack of Funding
   - Develop web-based services
   - Plan for growth
   - Privatisation of the NHS

   *I think it is a worthy plan but is very ambitious given funding availability.*

   *Backroom staff relieve many duties from medical staff.*

   *My concern here is that private providers will prioritise income generation over patient care, which is not the ethos of the NHS.*

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

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

   - Training of other health professionals
   - Access
   - Funding

   *Yes, subject to adequate resourcing of these new services, and adequate training of the professionals providing them. Patients do not want to be treated by practitioners with inadequate training in the interests of saving money.*
Another issue is transport. Village dwellers, particularly the elderly and infirm may rely on this and bus services have been cut.

The plan is ambitious and decreasing costs may mean that prioritisation of the introduction of new services may be necessary.

3. Are there any gaps in our Plan? What do you think we have missed?
   8 people responded to this question and the points raised were:
   - Welcome the new MSK service
   - Need more services for arthritis sufferers
   - Waiting times for physiotherapy
   - Staffing and retention

   Encourage large employers to take more interest in employees' welfare.

   I'm concerned to see that the experienced and knowledgeable staff currently in post are encouraged to stay. Their knowledge of the community is invaluable. I'm also not sure how all this gets funded - seems woolly on this.