People’s Experiences of Using GP Services in Oxfordshire 2017

Healthwatch Oxfordshire
March 2017
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Healthwatch Oxfordshire would like to thank those people who gave time to respond to this survey.
1 Executive Summary

Healthwatch Oxfordshire’s aims were to listen to people’s experiences of access to and care from GP services, including the out-of-hours service and, where possible, to compare them with the results of a similar survey conducted in 2014. The survey tested people’s views about seeking medical advice from medical professionals’1 other than their GP and their opinions on the use of online services. The research was carried out between 5th December 2016 and 2nd February 2017 and the total number of responses was 403. Responses were received from people registered at 67 different medical practices2 across Oxfordshire.

1.1 Key findings

It was clear that most people who responded to this survey value their GP surgeries, are happy with the quality of care they received from their GP, and from others at the surgery, and are generally happy with their access to primary care services.

“I think they do a fantastic job made so much more difficult due to a shortage of GPs. Well done.”

1.1.1 Making appointments

The majority of people still use the telephone to make appointments, with an increased proportion of people using online systems to make appointments. A significant percentage of respondents who currently do not have access to this option from their surgery also expressed their wish for this facility.

Most people still have their call picked up within 5 minutes; with a greater proportion of people happy with the service offered at the end of the line in 2017 than in 2014.

A large minority (34%) of respondents do not want to explain to the receptionist why they are making an appointment with the doctor.

1.1.2 Access to appointments

“If possible increase number of appointments that are not urgent same day, nor three weeks away - some middle ground”.

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1 In this report the term medical professional is used to reflect the understanding of the people who completed this survey that the term applies to any clinical service provided through the GP Surgery, this could include a nurse, physiotherapist, dietician, GP etc
2 Appendix 2 Medical Practices
Overall people are waiting longer to see their doctor with a greater proportion waiting 1-4 weeks than in 2014.

Satisfaction ratings for waiting times has marginally increased on those in 2014. However, as in 2014, people become more dissatisfied if they must wait more than a week for an appointment.

People would welcome Saturday and evening appointments. The desire for Sunday appointments has decreased from 75% in 2014 to 55% in 2017.

The amount of time taken off work to attend GP appointments in the past 12 months is most commonly cited as half a day.

The willingness to have a GP consultation using video technology was fairly evenly split between those who would use it and those who would not with the younger people (16-25 years old) most reluctant.

1.1.3 Alternative medical professionals

72% of respondents said they are happy to see an alternative medical professional other than their GP. Those who do not want to, believe the GP is the person with the right skills for their condition.

A large minority of people (39%) had sought advice from a pharmacist before making an appointment to see their GP.

1.1.4 Out-of-hours services (OOH)

The 111 Service was the most frequently used OOH service used by the 2017 cohort respondents. A high proportion of users rated it ‘good’, ‘fine’, or ‘excellent’. However, 24% of users had a poor experience. One patient reported that they never received a call back from 111.

Experiences of the Minor Injuries Units was positive, though there were a few comments about the long waiting times and poor communications while waiting.

Waiting times to see an out-of-hours doctor was reported as a negative experience of the out-of-hours GP service.

The use of A&E as an alternative to a visit to their GP was noted by a small minority of people (14%) and they appeared to have taken this decision either with medical advice, for broken bones or a self-assessed emergency. Only very few respondents had used A&E because they could not get to see their GP in a prompt fashion.

1.2 Observations, pointers and recommendations [R1-6]

Staff working in GP surgeries and out-of-hours services must be made aware that their people are happy with the care they receive. However, the frustrations of
having to wait for a regular appointment and out-of-hours face-to-face consultations does mar the overall patient experience.

Communication with people is key - why are you asking questions - explain; why are people waiting in MIUs or to see the out-of-hours GP - explain. Primary care services must have a policy and effective practice in communicating with patients throughout their experience from first contact through to the introduction of latest ways of doing things. Staff should be trained to deliver effective communications with all service users. [R1]

People will continue to use the telephone to make doctor appointments or contact the surgery.

A 5-minute wait for a call to be answered would not be acceptable in industry or any other customer-facing business. Investment in training of reception staff, including triage and general communication skills, and telephony equipment should be a priority for all surgeries. [R2]

Developing the role of reception staff to be more engaged in assessing the need for people to see the right medical person at the right time, (triage), comes with a responsibility to ensure that:

Staff have the right communication skills and medical back-up to deliver triage effectively

People are fully informed and aware why they are being asked ‘why do you want to see the doctor?’ and the choice to answer, ‘I do not want to say’ is treated with respect and accepted. People appear happy to answer this question on many occasions but sometimes, for personal or environmental reasons, they are not. Surgeries should consider reviewing the layout of reception area to provide a confidential space in which reception and patient can talk. [R3]

The use of technology in primary care should only be introduced as a single point of entry to services where people have reliable access to the internet.

Alternative access routes - visits, telephone - must remain to accommodate those people who cannot or will not use technology. [R4]

Waiting more than seven days (a week) for a regular appointment increases people’ dissatisfaction with their GP service. Alternative options - Hubs - must be used appropriately e.g. it is no use to the patient to be given an appointment at a HUB who is then referred (back) to their GP; this increases frustration and stress for the patient and delay in their treatment.

Oxfordshire Clinical Commissioning Group (OCCG) should ensure that all GP surgeries offer appointments with the appropriate medical professional within a week of the patient asking for one to avoid delay in treatment. [R5]
“GP is excellent but access to routine appointments is problematic...”

Patient participation groups (PPGs) are a local route into communicating with people at a surgery level. Greater use must be made of this resource. Where PPGs are not well-established, surgeries should invest time in developing them. PPGs can help get messages out to people and aid surgeries to develop services and ways of delivering services that are relevant to their people.

OCCG should assure themselves that all GP surgeries have an active PPG supported by the surgery itself [R6]

1.3 Further research is needed to investigate:

- the experience of people using the 111 Service as 24% of people who had used this service were unhappy with it
- the experience of people using the GP Hubs - the new kid on the block!
2 Background and methodology

2.1 Background

Healthwatch Oxfordshire (HWO) is the statutory and independent consumer champion and watchdog for health and social care users in Oxfordshire. We give communities a stronger voice in how their health and social care services are planned, developed, and delivered. Healthwatch Oxfordshire works to help people get the best out of services, whether it is improving them today or helping to shape them for tomorrow. We do this by:

- Listening hard to people, especially the most vulnerable, to understand their experiences and what matters most to them.
- Influencing those who have the power to change services so that they better meet people’s needs now and into the future.
- Empowering and informing people to get the most from their health and social care services and encouraging other organisations to do the same.
- Providing information about local health and social care services.

In 2014, following concerns raised by people we spoke to about access to GP services, we conducted a survey in partnership with the People Association entitled ‘Survey to determine patient views about accessing their GP service’.

The outcome of the 2014 research was shared with, amongst others, the Local Medical Council and the Oxfordshire Clinical Commissioning Group (OCCG).

In May 2015 OCCG announced “that people in Oxfordshire will benefit from a £4.9m investment in GP services. The funding will help trial different ways of offering better access to GP services for thousands of people. These include more urgent same day visits, email consultations and better use of websites to provide health advice” (OCCG, May 2015)

In March 2017, the Oxfordshire Clinical Commissioning Board received a paper entitled ‘Primary Care Framework’ stating that: ‘This Primary Care Framework seeks to describe a framework for GPs and their teams, working with their people, to further describe how this model and the specific actions can work for their own local populations.’ It is the intention of Healthwatch Oxfordshire that this research and report contributes to the design of GP services across the County.
2.2 Purpose

During 2016 many people continued to raise concerns with us about access to GP services. Healthwatch Oxfordshire decided to conduct a follow-up survey on the earlier 2014 research. The survey was designed to:

- enable comparison between the 2014 research and 2016 research findings
- to test the respondents’ attitudes to services being delivered differently, such as the use of web-based consultations.

This report will contribute to the people’s voices being heard in the development primary care services in Oxfordshire and will help inform the OCCG General Practice Forward View.

2.3 Survey Methodology

A questionnaire, designed for self-completion, was:

1. Available online at www.healthwatchoxfordshire.co.uk
2. E-mailed to the Healthwatch Oxfordshire mailing list
3. Promoted in the Healthwatch Oxfordshire newsletter
4. Paper copies were sent to anyone who asked for one along with a freepost envelope
5. Copies were distributed at outreach events across Oxfordshire.

Face-to-face interviews were conducted by Healthwatch Oxfordshire staff and trained volunteers.

The interviews and were semi-structured, qualitative interviews conducted with people in their GP surgery, using the questionnaire. People were interviewed before they had accessed care.

Interviewers approached people who were waiting to be seen, asking if they’d like to share their views as they waited.

All interviews were ended when people were called to see a health care professional.

In total 403 responses were received and analysed. The numbers of responses to each question varied. Responses were received from people of 67 medical practices\(^3\) across Oxfordshire.

\(^3\) Appendix 2 Medical Practices
3 Detailed Questionnaire Results

3.1 Respondent Profile

Of those respondents who completed the questionnaire 69% (270) identified as female and 30% (115) identified as male. The majority of respondents, 85% (343) who completed this questionnaire indicated they were white British and the age profile was as follows:

![Chart 1: Age Distribution](image)

3.2 Please tell us the name of your GP surgery?

403 people responded to this question representing 67 medical practices across Oxfordshire. The full list of medical practices represented is included in Appendix 2.

3.3 Have you attended a GP appointment within the last year?

![Chart 2: Attendance](image)
3.4 How do you normally book your appointments?

<table>
<thead>
<tr>
<th>Method</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
<td>294</td>
</tr>
<tr>
<td>Email</td>
<td>10</td>
</tr>
<tr>
<td>In person</td>
<td>71</td>
</tr>
<tr>
<td>Website</td>
<td>87</td>
</tr>
<tr>
<td>Other</td>
<td>37</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>499</strong></td>
</tr>
</tbody>
</table>

Using the telephone and the GP’s website for online booking are the most common way of booking appointments. Some respondents who ticked “other” quoted using EMIS and Patient Access - both offer 24 hour patient gateway providing online access to local GP services. This equated to an additional 4% people who used online services to book their appointments.

Chart 3 above shows the comparison between 2014 and 2017 data.

27% of people in 2017 used a variety of online / electronic means of booking an appointment with their GP - up from 13% in 2014

The percentage of people using the telephone fell from 74% in 2014 to 59% in 2017. With the percentage of people visiting the surgery to make an appointment similar in 2014 and 2017. Although some people will be willing to use other means to book appointments, such as an online booking system, a majority seem to still want to use the telephone and in person at the surgery. There should be adequate systems in place to deliver these services efficiently and effectively.

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4 Some people selected more than one option
3.5 Is this your preferred way of booking an appointment?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>340</td>
</tr>
<tr>
<td>No</td>
<td>54</td>
</tr>
<tr>
<td>Total</td>
<td>394</td>
</tr>
</tbody>
</table>

The questionnaire explored whether the method that people currently use to book their appointments is their preferred one. Overall, 86% of people who responded to this questionnaire could use their preferred method to book appointments, this is in comparison to 2014 when only 68% of people were able to use their preferred way of booking an appointment.

Of those respondents who answered no, it was not their preferred way of booking an appointment, 76% stated that online would be their preferred method.

“Would to prefer to book online, but while the functionality is there, the appointments simply are not.”

3.6 If booking a GP appointment by phone, how long did it take you to speak to someone?

Chart 5 If booking a GP appointment by telephone how long did it take you to speak to someone? 2014 / 2017 comparison
There has been no notable change in waiting times for people to speak to someone when telephoning surgeries with a majority (64%) still waiting 5 minutes or more.

3.7 If booking an appointment by phone within the last year, on a scale 1-5 (with 1 being very unhelpful and 5 being very helpful) how helpful was the person answering the phone?

“Receptionist very good and very helpful.”

78% (267) of respondents said the person answering their call was helpful or most helpful. This represents an improvement since 2014 when 71% of people said the person answering their call was helpful or most helpful.

![Chart 6 How helpful was the person answering the phone?](image)

“Really depends upon which receptionist you get, some are much more helpful than others.”

3.8 When talking to the receptionist are you happy to explain the reason you need to see the GP?

This question was asked to test respondent’s views about reception staff asking the reason they need to see a GP. Expanding the role of the receptionist in triage is currently being explored by the OCCG. This question was not asked in 2014.

“I think it is quite important to let them know why as they can understand better how urgent it is or isn’t to see a GP.”
34% of respondents were not happy to explain the reason why they wished to see the GP.

Reasons quoted included:

- the reason for the appointment
- the fact they live in rural areas and know the reception staff personally
- concerns over confidentiality by having to explain the reason to see a GP in a public environment - either in the surgery or on the telephone

3.9 Did you consider seeking advice from your pharmacist before making an appointment to see your GP?

“Never thought of it.”

This question was included to collect information about how people use their pharmacy and was not included in the research conducted in 2014.

Of those respondents who answered this question, 39% (152) indicated that they had considered taking advice from a pharmacist before seeking an appointment with their GP.
Of the respondents who indicated they had not considered taking advice from a pharmacist, 11% (26) gave the reason as management of long term conditions.

“Problem too serious/not appropriate for pharmacist advice.”

3.10 Instead of seeing your GP, would you consider seeing another medical professional such as a nurse, physiotherapist etc.?

This question was asked to test respondents’ views on seeing other medical professionals instead of their GP and was not included in the questionnaire of 2014.

“It depends on the health issue arising.”

72% indicated that they would be happy to see an alternative medical professional to their GP.

![Chart 9](#)

Reasons given for not seeing an alternative medical professional to their GP included:
- management of long-term conditions
- inability of nurse to prescribe medication
- the appropriateness of the medical professional

3.11 Would you consider using video calls such as Skype or FaceTime for a consultation with your GP?

This question was included to test respondents’ views on the use of technology which is being piloted in Oxfordshire.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>209</td>
<td>178</td>
</tr>
<tr>
<td>Total</td>
<td>387</td>
<td></td>
</tr>
</tbody>
</table>
Further analysis showed that of those respondents who said yes, they would consider using video technology, 69% identified as female and 31% identified as male.

The age group most likely to use this technology was 41-65 years old followed by those 26-40 years old.

Young people under 25 years old are least likely to use video calls for a consultation with their GP.

Of those who said yes, they would consider using video technology the respondents further qualified their answer with the following comments (verbatim):

<table>
<thead>
<tr>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>If I was shown how.</td>
</tr>
<tr>
<td>A reluctant yes, not the same as a face to face appointment.</td>
</tr>
<tr>
<td>If I could save myself coming out of the home when I am poorly, yes. But also, it depends on the network because it is pretty useless around here. It is hard enough to get a signal, let alone internet.</td>
</tr>
<tr>
<td>Or just being able to talk to the GP by phone is always really helpful.</td>
</tr>
<tr>
<td>With the proviso that my internet connection was working</td>
</tr>
</tbody>
</table>
Those respondents who indicated that they would not consider using video technology for a consultation with their GP commented on the quality of internet connection in a rural area, finding a private space for consultation, as well as being “impersonal”.

3.12 How soon were you able to get an appointment?

Respondents were asked how long it took them to get an appointment and the responses were as follows:

<table>
<thead>
<tr>
<th>Time Duration</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Same day</td>
<td>89</td>
</tr>
<tr>
<td>Within 48 hours</td>
<td>53</td>
</tr>
<tr>
<td>Within a week</td>
<td>115</td>
</tr>
<tr>
<td>Within a month</td>
<td>118</td>
</tr>
<tr>
<td>Longer than a month</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>389</td>
</tr>
</tbody>
</table>

There is no difference to the percentage of people being able to access a GP on the same day, however a significantly smaller percentage of people could access their GP within 48 hours in 2017 than in 2014.

The data shows that a greater percentage of people are waiting over 48 hours for an appointment with the greatest increase being: having to wait between 2-4 weeks for an appointment (34% in 2017 compared to 29% in 2014).

The data shows longer waiting times for all people who are not able to make an appointment within 48 hours of contacting the surgery.
3.12.1 Was this time acceptable to you?

Respondents in 2017 were more satisfied with their waiting times for an appointment with their GP than those in 2014.

3.12.2 Chart 13 illustrates the level of acceptability for appointment waiting times in 2017.

Levels of acceptability of waiting times decrease with the length of time respondents waited for an appointment. The highest level of acceptability was among respondents who had a wait of 48 hours to see their GP. Of those respondents who waited longer than one week, 59% said this was not acceptable and all respondents (100%) indicated that a wait of longer than one month was not acceptable.

Further analysis of the data is not able to explain the reasons why 5% of respondents indicated that an on the day appointment was unacceptable.
The results of this question broadly replicate the finding of the questionnaire of 2014 which found that waiting time of up to one week was perceived as generally acceptable, but that levels of acceptability reduce with the waits of greater than one week.

3.13 If you have visited a GP did you have to take time off work to attend the appointment?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>142</td>
<td></td>
</tr>
<tr>
<td>n/a</td>
<td>170</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>392</td>
<td></td>
</tr>
</tbody>
</table>

21% of respondents said they has taken time off work to attend their GP appointment, this is in comparison to 23% of respondents who answered yes to this question in the 2014 survey.

![Chart 14: If you have visited a GP did you have to take time off work to attend the appointment?](chart)

![Chart 15: If you answered "yes" to the last question, how much time in total have you had to take off work within the last year to attend GP appointments (n=86)](chart)

42% of people who responded yes to having to take time off from work to attend a GP appointment took half a day over a 12-month period.
42% of people took between half a day and two days off work over the year to attend a GP appointment.

3.14 Does your surgery offer early morning, evening or weekend appointments?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>196</td>
<td>79</td>
<td>113</td>
<td>388</td>
</tr>
</tbody>
</table>

29% of respondents did not know if their surgery offered early morning, evening or weekend appointments, a slight increase from 2014 (27%)

3.14.1 If no, is this something you would like?

Respondents who answered no, to the previous question were asked if they would like their GP surgery to offer extended opening hours. 147 respondents answered this question with 72% (106) saying yes, they would like their surgery to offer extended opening hours.

3.14.2 What appointment times would you prefer?

Respondents were then asked to indicate their preference for extended opening times. 140 respondents answered this question with some respondents choosing more than one preference:

<table>
<thead>
<tr>
<th>Appointment Times</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early mornings - before 8am</td>
<td>78</td>
<td>34</td>
</tr>
<tr>
<td>Evening appointments after 6.30pm</td>
<td>104</td>
<td>17</td>
</tr>
<tr>
<td>Saturday appointments</td>
<td>116</td>
<td>8</td>
</tr>
<tr>
<td>Sunday appointments</td>
<td>59</td>
<td>43</td>
</tr>
</tbody>
</table>
Chart 17 above illustrates:

- of those who responded to this question in 2014 and 2017 most people would find evenings and Saturday mornings easier
- Sunday appointments were the least popular choice in 2017 with only 55% of respondents indicating that this time would be easier for them - this is a significant change in the responses given in 2014 when 75% indicated this as an option.

3.15 Have you used any out-of-hours (OOH) services in the last year?

This question was modified from the questionnaire from 2014 when respondents were asked if they had used the GP out-of-hours service.

Some respondents indicated that they had used more than one out-of-hours-service in the last year.

<table>
<thead>
<tr>
<th>Service</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>GP OOH</td>
<td>58</td>
<td>274</td>
</tr>
<tr>
<td>Minor Injuries Unit</td>
<td>69</td>
<td>261</td>
</tr>
<tr>
<td>111</td>
<td>103</td>
<td>238</td>
</tr>
</tbody>
</table>
3.15.1 Please give details of your experiences of this?

Respondents were asked to comment upon their experience if they had used any of the above services.

3.15.1.1 Minor Injuries Unit (MIU)

Of those respondents who had used the MIU and commented on their experience 68% reported their experience was ‘fine’, ‘good’, or ‘excellent’.

“MIU Abingdon - exceptional staff, quick efficient and effective. Slight nonsense however that X-ray department not open past 6ish when MIU is open until 10:30”.

“Very good service. Prompt attention, antibiotics given from MIU”.

However, a small number of respondents commented on waiting times and communication.

“MIU at Witney, wait v. long, no information about system or waiting times. They should separate x-ray from injuries. Seems a bit disorganised, no explanations”.

“...followed up with a telephone consultation (which did not take place during the time frame specified however)”.

3.15.1.2 111 Service

The 111 Service was the most used out-of-hours service. 45 respondents commented on their experience. 58% (26) rated it as ‘good’, ‘fine’, or excellent.

“Very good. I think it’s brilliant that it exists”.

“111 is a very good service”.

29% (13) of respondents reported that they were unhappy with the 111 Service citing a number of reasons including poor communication, poor quality advice, and call handlers being over-cautious.

“However kind and helpful the call-taker, the fact that they are not trained medical people and can only judge the necessary action from their "script" has made trying to get the help I need almost impossible”.

“Advised to go to minor injuries, seen by nurse/physio - issue would have waited for non-urgent GP appointment. Probably wrong advice from 111”.

“111 said they would return the call but didn't”.

3.15.1.3 Out-of-hours (OOH) GP Service

Of the 58 respondents who had used this service 45 left a comment with 55% (26) saying they were happy with the quality of the service, “Excellent service”, “GP OOH - exceptional service” and “very attentive service”.

However, 29% (13) of respondents cited waiting times to see the OOH GP as a negative experience.

“Asked by the GP to attend, 5 hours waiting time”

“Their appointments were running 2 hours late... I was in too much pain to wait...”

3.16 Have you attended A&E instead of seeing a GP?

The following responses were given to this question:

14% of respondents said they had attended A&E instead of seeing a GP, compared to 22% of respondents in 2014. When asked to say why they had attended A&E instead of seeing the GP reasons given included:

- 17 respondents who attended A&E did so because, in their opinion, it was an emergency.
- A medical professional advised 6 respondents to go to A&E.
- 8 respondents had a broken bone or had been involved in an accident
- They did so because they were unable to access GP services.

_Sometimes the thought of waiting for appointment with an ailment which is painful or worrying is too much and I want to get it sorted so it doesn't linger on._

_Because I couldn’t get an appointment soon enough._
3.17 GP Hub

Respondents were also asked if they had used the GP Hub. This service is delivered in normal GP surgery hours and so not an out-of-hours service.

Although the number of people who answered this question was small it is important to include the patient experiences related to these as the OCCG is expanding the funding for this service across the County.

19 respondents used the GP Hub and 5 commented on the service. Two respondents praised the service and a further two respondents were re-referred to their own GP. One respondent indicated that as they had long term conditions a referral to the hub may not have been the most appropriate for them.

3.18 Would you like to make any other comments about you GP services?

When asked if they had any other comments about their GP services of those 315 who commented, a few common themes emerged in what they had to say.

Happy with quality of care

The most oft repeated comment was how happy people were with the quality of the service and care provided by their GP surgery.

“**Brilliant, never had a problem, always willing to help and fit us in when possible wonderful absolutely excellent.**”

Another said: “I have been registered with our local health centre for twenty-three years and found it to offer excellent all round service, without exception. Long may it continue.”

“**Broadly very happy with the service from this GP practice; excellent nursing services as well.**”

Concern over access to GP services

This was the second most common theme to emerge. In all 11% (35) of respondents raised the difficulty they have in accessing their GPs; many stating long waiting times to get an appointment as the main barrier. For example:

“**Generally a high quality of service when you are able to access it. The overwhelming problem is difficulty obtaining appointments, especially with own GP. This is getting worse.**” Another said: “**Very aware that GPs are under pressure and do their best but appointment times are long. I can see a GP quickly in an emergency.**”
However, another person said: “The surgery GPs seem to have very little time, it is extremely difficult to get an appointment within a week unless it is an emergency.” Yet another said, “The waiting time (in days/weeks) to see a GP for general (non-emergency) issues, is far too long.” Another said: “If you ring up AT 8.00 am you will normally get a same day appointment, otherwise it is likely to be 3-4 weeks.”

**Concern about increased pressure on GP services**

11% of people raised concerns about what they felt was increasing pressure on GPs including the following comments:

“*My GP service is brilliant but very stretched.*”

“*They do well under excessive pressure.*”

“*GPs do a fantastic job and they should be supported more to carry that job out, there’s too much pressure on services which can affect quality of service.*”

**Concern over lack of continuity of care**

Several people expressed anxiety over the lack of continuity of care they received from their GP. Comments included:

“*Too many changes of staff at our surgery. We’ve been on 8 different GPs’ lists there over the last 2 years.*”

“*All the doctors at the practice are part-time, which makes consistency of care and follow-up a big issue and is, I’m sure, part of the reason you have to wait so long for appointments.*”

“*Would prefer to see the same doctor.*”

“*Everyone seems caring but it is difficult to get continuity. You have to work out in advance to see the same GP.*”
Appendix 1: GP Questionnaire

The NHS is currently undergoing major changes and Healthwatch Oxfordshire is conducting a survey to better understand the experiences of people using GP services. If you have seen a GP in the last year it would be really helpful to hear about your experience. Following the survey, we will produce a report detailing the findings with recommendations aimed at influencing service change. The closing date for this survey is 31st January 2017.

Primary Care Survey

Healthwatch Oxfordshire: People’s experience of using GP services in Oxfordshire

1. Please tell us the name of your GP surgery?

2. Have you attended a GP appointment within the last year?
   Yes
   No
   Other (please specify)

3. How do you normally book your appointments?
   Phone
   Email
   In person at the surgery
   GP website
   If you answered no, would you please tell us your preferred method?

4. Is this your preferred way of booking an appointment?
   Yes
   No

5. If booking a GP appointment by phone, how long did it take for your call to be answered?
   Got through straight away
   Waited up to 5 minutes
   5-10 minutes
   10+ minutes
   I gave up waiting

6. If you booked a GP appointment by telephone within the last year, on a scale of 1 to 5 (with 1 being very unhelpful and 5 being very helpful) how helpful was the person answering the phone?

Please give a reason for your answer.
7. When talking to the receptionist are you happy to explain the reason you need to see the GP?

Yes
No
If no, why not?

8. Did you consider seeking advice from your pharmacist before making an appointment to see your GP?

Yes
No
If no, why not?

9. Instead of seeing your GP, would you consider seeing another medical professional such as a nurse, physiotherapist etc.?

Yes
No
If no, why not?

10. Would you consider using video calls such as Skype or Facetime for a consultation with your GP?

Yes
No
If no, why not?

11. How soon were you able to get an appointment?

Same day
Within 48 hours?
Within a week
Within a month
Longer than a month

12. Was this time acceptable to you?

Yes
No
Please give details

13. If you have visited a GP did you have to take time off work to attend the appointment?

Yes
No
N/A
14. If you answered "yes" to the last question, how much time in total have you had to take off work within the last year to attend GP appointments?

- Half a day
- 1 day
- 1-2 days
- 2-3 days
- 3-5 days
- 5+ days

15. Does your surgery offer early morning, evening or weekend appointments?

- Yes
- No
- Don’t know

16. If no, is this something you would like?

- Yes
- No

17. If you answered yes to Q16, what appointment times would you prefer?

- Early morning appointments - before 8.30am
- Evening appointments- after 6.30pm
- Saturday appointments
- Sunday appointments

18. Have you used any of the following out-of-hours services in the last year?

- GP
- Minor Injuries Unit
- GP Hub
- 111
- Other (please specify)

19. If yes please give details of your experience of this?

20. Have you attended A&E instead of seeing a GP?

- Yes
- No

21. Would you like to make any other comments about your GP services?
22. What is your gender?

Male
Female
Prefer not to say

23. Which age bracket best describes you?
16-25
26-40
41-65
66-75
75+
Please describe:

24. What is your ethnicity?

White British
White Irish
White Gypsy or Irish traveller
White other
White and Black Caribbean
White and Asian
Any other mixed background - please describe
Indian
Pakistani
Bangladeshi
Chinese
Any other Asian background - please describe
Black African
Black Caribbean
Other Black/ African/Caribbean background - please describe
Arab
Any other ethnic group - please describe

25. We like to keep people informed about the work of Healthwatch Oxfordshire. If you would like to be added to our mailing list please place your contact details in the box below.

Please note we do NOT release your information to any third parties.
Name:
Address 1:
Address 2:
Address 3:
Address 4:
E Mail address:
Appendix 2: Medical practices

<table>
<thead>
<tr>
<th>Practice Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>19 Beaumont Street</td>
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<tr>
<td>27 Beaumont Street</td>
</tr>
<tr>
<td>28 Beaumont Street</td>
</tr>
<tr>
<td>Abingdon Surgery</td>
</tr>
<tr>
<td>Banbury Road Medical Centre</td>
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<tr>
<td>Bartlemas Surgery</td>
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<tr>
<td>Bell Surgery, Henley-on-Thames</td>
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<tr>
<td>Berinsfield Health Centre</td>
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<tr>
<td>Bicester Health Centre</td>
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<tr>
<td>Bloxham Surgery</td>
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<tr>
<td>Botley Road Medical Centre</td>
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<tr>
<td>Broadshires Health Centre</td>
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<tr>
<td>Burford Surgery</td>
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<tr>
<td>Bury Knowle Medical Centre</td>
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<tr>
<td>Charlbury Medical Centre</td>
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<tr>
<td>Chalgrove and Watlington Health Centre</td>
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<tr>
<td>Chipping Norton Health Centre</td>
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<tr>
<td>Church Street Practice, Wantage</td>
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<tr>
<td>Clifton Hampden Surgery</td>
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<tr>
<td>Cogges Surgery, Witney</td>
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<tr>
<td>Cowley Road Medical Practice</td>
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<td>Cropredy Health Centre</td>
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<tr>
<td>Deer Park Medical Centre</td>
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<td>Didcot Health Centre</td>
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<tr>
<td>Donnington Medical Centre</td>
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<tr>
<td>Eynsham Medical Centre</td>
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<tr>
<td>Goring &amp; Woodcote Medical Centre</td>
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<tr>
<td>Gosford Hill Medical Centre, Kidlington</td>
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<tr>
<td>Hart Surgery</td>
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<tr>
<td>Hightown Surgery, Banbury</td>
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<tr>
<td>Hollow Way Medical Centre</td>
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<tr>
<td>Horsefair</td>
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<tr>
<td>Islip Medical Practice</td>
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<tr>
<td>Jericho Health Centre</td>
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<tr>
<td>Kennington Health Centre</td>
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<tr>
<td>Langford Village - part of Alcester Medical Group</td>
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<tr>
<td>The Leys Health Centre</td>
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<tr>
<td>Long Furlong Medical Centre</td>
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<tr>
<td>Long Hanborough</td>
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<tr>
<td>Malthouse Abingdon</td>
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<tr>
<td>Manor Surgery Headington</td>
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<tr>
<td>Marcham Rd Health Centre</td>
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<td>Marston Medical Centre</td>
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<tr>
<td>Millstream Surgery, Benson</td>
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<tr>
<td>Montgomery House Bicester</td>
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<tr>
<td>Morland House Surgery</td>
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<tr>
<td>Nettlebed Medical Centre</td>
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<tr>
<td>Location</td>
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<tr>
<td>Newbury St, Wantage</td>
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<tr>
<td>Nuffield Health Centre, Witney</td>
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<tr>
<td>Sonning Common Health Centre</td>
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<tr>
<td>South Oxford Health Centre, Lake Street, Oxford</td>
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<td>St Bartholomew's Medical Centre</td>
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<td>Summertown Health Centre</td>
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<tr>
<td>Temple Cowley Health Centre</td>
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<tr>
<td>The Abingdon Surgery</td>
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<td>The Key Medical Practice Exeter Hall Kidlington</td>
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<tr>
<td>The Manor Surgery</td>
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<tr>
<td>The Windrush Surgery Witney</td>
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<tr>
<td>Victoria House (Alchester Medical Group)</td>
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<tr>
<td>Wallingford Medical Practice</td>
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<tr>
<td>Wantage Health Centre</td>
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<tr>
<td>West Bar Surgery</td>
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<tr>
<td>White Horse Practice, Faringdon</td>
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<tr>
<td>Windrush Health Centre</td>
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<tr>
<td>Woodlands Surgery Didcot</td>
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<tr>
<td>Woodstock</td>
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