

People's experiences of health and care services in Witney

Healthwatch Oxfordshire
October 2017



1	Background	3
2	“Tell us...”	3
3	What do we know now?	4
4	Service ratings.....	5
5	Individual service ratings and comments.....	7
5.1	GPs / surgeries	8
5.2	Hospitals (acute).....	10
5.3	Witney Community Hospital - including Minor Injury Unit and physiotherapy..	11
5.4	Minor injuries unit	12
5.5	Dentists.....	13
5.6	Mental health services	13
5.7	Emergency services - 111, A&E, Out-of-hours, Minor injuries Units.....	13
5.8	Social Care	14
	Appendix A Service ratings	16
	Appendix B ‘Tell us’ form	19

People's experiences of health and social care services - Witney March 2017

1 Background

In March 2017, Healthwatch Oxfordshire focused its community activity in the market town of Witney, West Oxfordshire. The aim of the project was to give the people of Witney an opportunity to tell Healthwatch about their experiences of health and social care services. Healthwatch Oxfordshire visited 14 local groups, spoke at the annual town council meeting, had a stall in the library, spent the day in the local further education college, talked to people using the leisure centre and put up our banners and gazebo on three different days in the town centre. We hosted a voluntary sector market place in the Corn Exchange which was attended by 22 different organisations and which attracted more than 100 members of the public. One visitor commented: *"I never knew there was so much help for me out there."*

We also made direct contact with more than 1,000 people and 487 people told us their experiences of health and social care services. They also told us what was good about these services and what could be improved.

2 "Tell us..."

Our "Tell us..." survey aimed to gather experiences, positive and negative, and find out from people how the services they used could be improved. In all, 487



questionnaire forms were completed either face-to-face, at events and groups, self-completed at events or returned by freepost to Healthwatch Oxfordshire. Not all forms were fully completed i.e. not all had a rating for the service or comments about the service. Of the 487 forms, 344 people rated the service they wrote about and a further 143 forms did not rate the service but did include information about experiences. Sometimes they included comments about what was good about the service and/or suggestions about how the service could be improved.

The questionnaire was divided into five sections:

- 1 Section one asked for the name and location of the service and for a rating between 1 and 5 (where 1 being very poor and 5 being very good).
- 2 Section two asked the respondent to tell us about their experience (what happened, how it made you feel, etc).
- 3 Section three asked respondents to tell us what was good about the service.
- 4 Section four asked people to tell us how they thought the service could be improved
- 5 Section five asked people to give their contact details if they wanted to receive regular news about Healthwatch Oxfordshire (this information was recorded separately). Ninety people completed this section.



The following sections of this report provide an analysis of:

- 1 All services - ratings
- 2 Ratings and comments about:
 - a. GPs / GP surgeries
 - b. Hospitals (acute)
 - c. Witney Community Hospital including the Minor Injuries Unit and physiotherapy (both delivered from the hospital building)
 - d. Minor injury units
 - e. Dental services
 - f. Mental health services.

Comments about services where the number of ratings is too few to be represented as a statistic but where there are a significant number of comments:

- g. Emergency services
- h. Social care services.

3 What do we know now?

People most often told us about their experiences of using:

-  GP surgeries - 235 comments
-  acute hospitals - 133 comments
-  emergency/out-of-hours services - 55 comments
-  community hospitals - 29 comments
-  social care services - 25 comments.

- 70% of people who rated¹ their services said they were good or very good;
- 74% of people who rated GP surgeries said they were good or very good;
- 72% of people thought their experience of acute hospital services was good or very good.

Common negative comments included:

- Waiting times for appointments
- Waiting to be seen at an appointment
- Communications between staff and patient / carer at hospital
- Administration of appointment system including letters (hospital)

Positive comments included:

- 'The staff' - caring, friendly, helpful, professional, do their best, efficient, listen to me
- Being seen quickly

Suggestions to improve services include:

- Reduce waiting times - more staff
- Sort out (hospital) administration of appointments including letters
- Improve staff communication skills

4 Service ratings

The following section provides an analysis of the ratings given by respondents for all services. In total, 344 respondents rated the services they wrote about. The respondents were asked to rate their services on a scale of 1 to 5 (with 1 being very poor and 5 being very good). Overall, services that were rated by respondents, were rated good or very good.

¹ Appendix A Service ratings gives in depth as to ratings for each service



Chart 1 Ratings of overall health and social care services

Chart 1 above shows that:

- 70% of respondents rated services good (22%) or very good (48%)
- 14% of respondents rated services poor (6%) or very poor (8%)
- 16% of respondents rated services with a score of 3 - interpreted as expected.

Further analysis shows a breakdown in terms of services themselves:

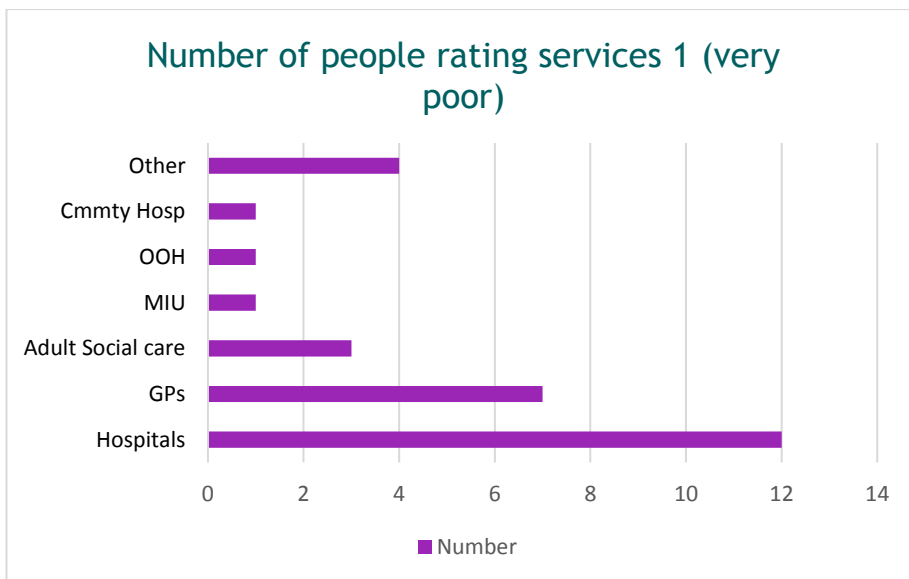


Chart 2 All services rated very poor (1)

In total, 29 people rated a service as very poor, which represents 7% of ratings across all services. Hospitals (12) and GP services/surgeries (7) accounting for 57% of all services rated very poor.



Chart 3 Number of people rating a service poor (2)

A further 19 people rated services poor

Hospitals (3) and GP surgeries/services (9) account for 64% of services rated poor.

5 Individual service ratings and comments

In total, 18 service categories were commented on (and rated) by 344 respondents.

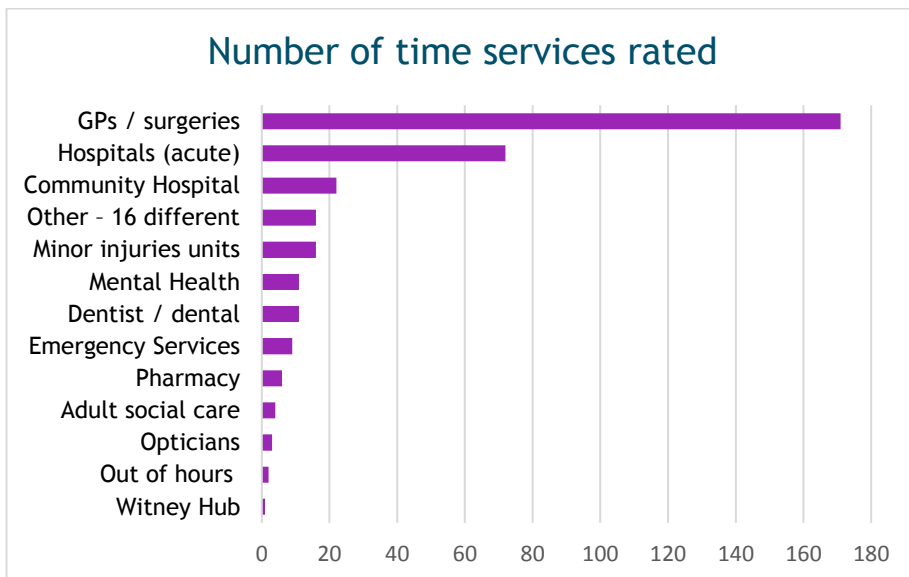


Chart 4 Service category number of times rated

Out of the 478 completed forms, there were 344 which included a rating of the specific service the person was reporting on. The following section includes an

analysis of ratings, where given, and an analysis of the comments made focusing on what people think makes a good service and what could be improved.

5.1 GPs / surgeries

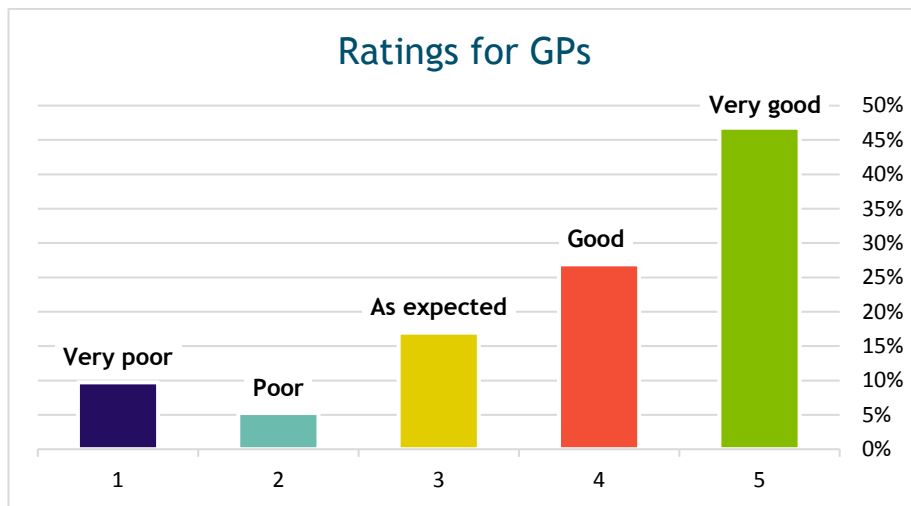


Chart 5 Ratings for GPs / surgeries

233 people commented on GPs/surgeries of which 171 people rated the service

- 74% of people rated their GPs/surgeries as good (27%) or very good (47%)
- 15% (16) people rated the service as poor (9) or very poor (7)

Further analysis, allowing for the fact that 72 (42%) of respondents who rated GPs/surgeries did not name the service they were rating, shows:

- 77% (10) patients at Windrush Medical Centre rated it as good or very good
- 79% (11) patients at Deer Park rated it as good or very good
- 56% (5) patients rated Cogges as good or very good
- 40% (4) of patients at Broadshires rated the surgery as good or very good - this was the lowest proportion of all surgeries named rated as good or very good.

What was good about this service?

The answer to 'what is good about this service?' was **'the staff'**. Friendly, helpful, caring, nice, polite, and professional staff are what patients most value when visiting the GP surgery.

Other comments about what is good about this service included:

- Easy access to their GP with a variety of ways to book an appointment are just as important with short waiting times for appointments.
- People also value their appointments being on time.

- The surgery being accessible, particularly with local parking, was often named as a factor that made the experience good.
- For many people the way the doctor spoke to them and helped them to understand various situations was important.

What can be improved?

The most common comment was about waiting times (29 comments) including:

- waiting for the phone to be answered to make an appointment
- waiting for appointments and
- waiting in the surgery to see the doctor.

Suggestions for improvement included:

- more staff/GPs
- more funding

However, there was a realisation that this would require more doctors and that more funding was not available.

There were several negative comments about the receptionist asking about the reason for wanting to see the GP. “It would have been helpful to have been able to speak to a doctor and not fobbed off by a receptionist...”

There were eight comments specifically about the receptionist/GP/patient experience that pointed to the **need for improved communication skills** needed by doctors (from the perspective of the individual patient experience).

There were concerns expressed about the impact that the closure of Deer Park will have, and for some already has had, on waiting times for appointments with a GP.

Deer Park Medical Practice

In March 2017, when Healthwatch Oxfordshire was in Witney, the closure of Deer Park GP Surgery was imminent. This was a closure which was actively campaigned against by the Deer Park Patient Participation Group, which received much local support.

We received 32 responses that named Deer Park Surgery, of which eight made no comment on the service but pleaded to keep Deer Park open. Overall, 19 comments related to keeping Deer Park open.

Common comments found the staff as ‘caring’, the doctors as ‘good’, and ease of access to the surgery was a positive. Other individual comments included ‘small and personal’, on time (appointments), ‘constant staff’ and ‘reliable’.

“From our experience, some doctors have been rude and uninterested. They need training in how to deal with people”

“Get GPs to listen would be a great start.”

“Train doctors in people skills...”

5.2 Hospitals (acute)

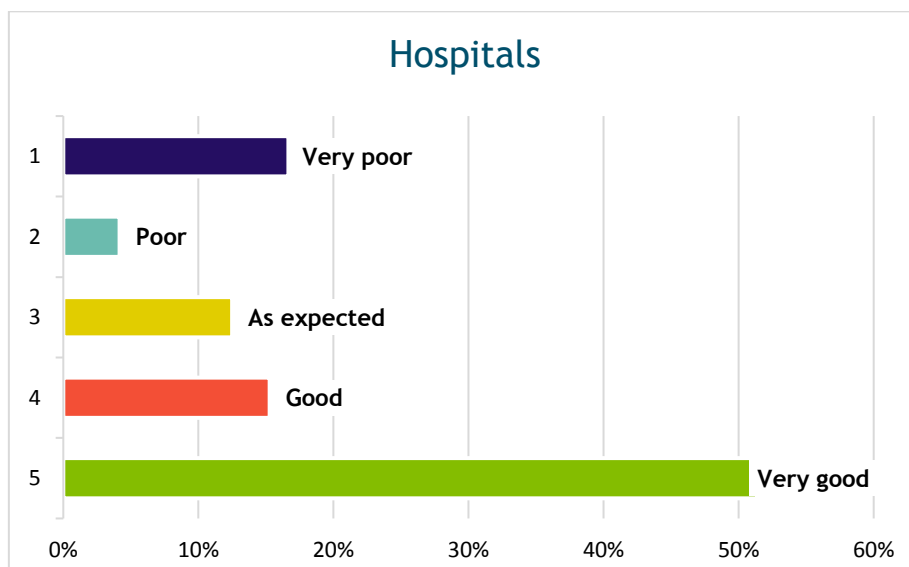


Chart 6 Ratings for hospitals (acute)

In total, 72 people rated the (acute) hospitals including 36 people who rated either John Radcliffe, Churchill and Nuffield Orthopaedic Centre (NOC).

- 66% (48) people rated them good or very good
- 21% (15) people rated them as poor or very poor

Further analysis shows:

42% (30) respondents did not name the hospital but did write down which department they were referring to. Hospitals rated included Stoke Mandeville (1), Horton (3) and Oxford Eye Hospital (2).

What can be improved?

Many people commented on how the hospitals were *'first class'*, and that nothing could be improved.

However, there were common concerns raised with suggestions for improvement including:

1 Administration of appointments:

The need to be more organised with other departments as there was very poor communication

2 Record management could be improved:

"the staff do their best and I have never met anyone who was not kind and efficient...but the record management system should be improved..."

The need for an improved appointment system at the clinic to minimise waits, deal with patients in one go and don't make them come back next day

"Better coordination...and not a computer throwing out letters..."

"More efficient admin when making referrals." "Improve referral processing time..."



"The appointment letters are inefficient. I got a letter inviting me for an appointment after I'd already seen the consultant and had my appointment"

3 Communication:

"More communication with nurses"

"Better communication for relatives from other busy staff, i.e. we were not told she was being transferred - we arrived to find belongings on the bed!"

More information for waiting relatives [A&E]. *"I only found things out by going to find staff and question them. Without me doing this I'd have had a five hour wait not knowing anything..."*

Patient information...[re] medicines...

"Communication between hospital and patient [reasons for delay of surgery]"

"Timely test results - the delay caused anxiety"

"Communication was appalling in hospital. Ensure staff have a good command of English"

4 Getting to the hospital and parking:

"I can go to JR but it's hard for me to get there"

"Car parking...makes you feel stressed before you get to appointment"

"Parking is a real challenge. I usually go really early to ensure I can park."

Waiting times - for appointments and when arrive for appointment



5.3 Witney Community Hospital - including Minor Injuries Unit and physiotherapy

Many people who indicated that they were writing about Witney Community Hospital were commenting on different services delivered from this building - particularly physiotherapy and Minor Injuries Unit. This indicates that often people associate a building with a service, rather than the

services associated with the building e.g. hospital beds in the case of a community hospital.

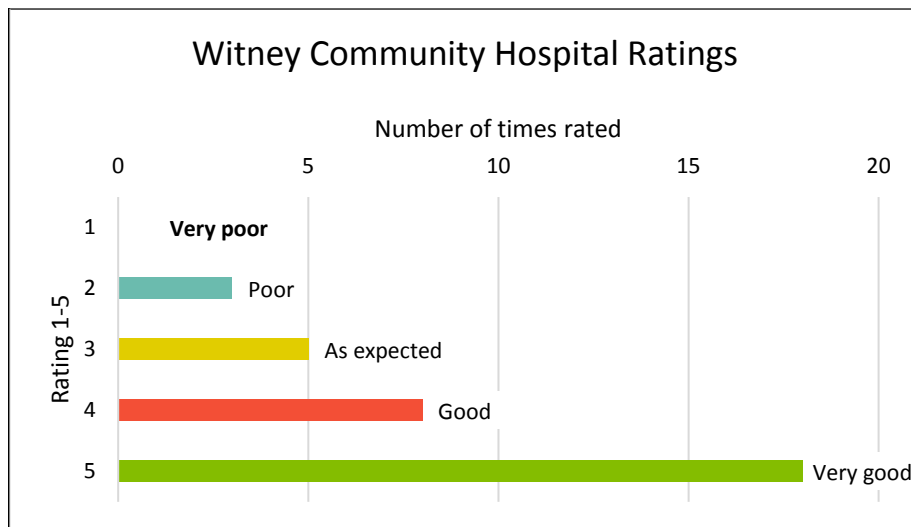


Chart 7 Ratings for Witney Community Hospital - including Minor Injury Unit and physiotherapy

In total, 34 people rated Witney Community Hospital - including MIU and physiotherapy

- 77% (26) rated them good (8) or very good (18)
- 9% (3) people rated the hospital as poor or very poor

What can be improved?

Many of the people who rated Witney Community Hospital talked about their experience of:

- the Minor Injuries Unit (MIU) at Witney - an estimated nine respondents
- A further eight respondents commented on the physiotherapy service based at the Witney Community Hospital
- Three people commented on outpatient clinics and one on being on a ward at the Witney Community Hospital.

The common story is one of friendly, polite, helpful, and professional staff.

Waiting time was most often quoted as being something that could be reduced.

5.4 Minor injuries unit

In total, 16 people rated MIUs of whom 78% rated them as good or very good

A single MIU was rated very poor - this was in High Wycombe; Witney MIU was rated poor by two people

Three people rated the Witney MIU as 'OK'. The majority rated it as good or very good.

What can be improved?

Waiting time was the area most often suggested as needing improvement, although only one person stated their waiting time - two to three hours.

5.5 Dentists

- 11 people rated dentists of whom 82% of respondents rated dentists as very good (55%) or good (27%)
- No one rated their dentist as poor or very poor

What can be improved?

Overall, people reported that they had had a good or excellent experience. One person commented on fees, describing them as "exorbitant" in relation to charges and another said that "it would be good to have an NHS dentist in Charlbury".

5.6 Mental health services

11 people rated mental health services of whom:

- 54% rated mental health services as good (18%) or very good (36%)
- 45% rated their experience of mental health services as poor (2) or average (3).

Analysis of this data is limited by the small number of people who rated the service.

What can be improved?

Generally, the comments related to increased waiting times for appointments and the sense that the service appears to increasingly "under strain lately".

One suggestion for improvement was for more information about other services to be made available.

There were several accounts of very poor experiences with this service, which will be relayed to the service provider and not recorded here, in order to protect confidentiality of individuals.

5.7 Emergency services - 111, A&E, Out-of-hours, Minor injuries Units

A total of 34 people reported what was good about their experience of emergency services - including 111, A&E, Minor injuries unit and out of hour's service. Most often the comments related to:



- Staff being caring, nice, kind, efficient, focussed on their job, communicating well with the patient / person attending with the patient
- Prompt action - being seen quickly.

What could be improved?

- Waiting times - when at the MIU or A&E - many people reported long waiting times with several suggestions that this could be solved by having more doctors and nurses on duty. One person reported waiting two to three hours, others did not say how long they waited to be seen.
- Information for relatives waiting - better communication with relatives waiting on what was happening; on medicines.
- Reduce the number of people going to A&E, MIU by better information about how to look after ones-self; alternatives to emergency services.

“needs to be information for people about where to go/how to look after themselves / selfcare”

“put in a minor injuries unit at A&E”

One person was sent to Adams Ambulatory Unit by their GP and reported their experience as good:

“...everything from nurses, doctors and efficiency under very trying circumstances”. They suggested “more wards like this would maybe take the strain off A&E units”.

There was some indication that A&E was being used when people felt they could not access their GP. One paramedic reported that “we receive a lot of calls from people in their 40/50s who call 111/999 because they haven’t been able to get an appointment with their GP”, and suggested that “there needs to be more information for people about where to go/how to look after themselves/selfcare”.

5.8 Social Care

People’s experiences of services under the broad heading ‘social care’ included:

Day Centres

There was much concern expressed about the forthcoming changes in day centres, and the closure of day centres (Leonard Cheshire in Witney). This was raised by older people and people with learning disabilities and their carers. The main concerns were:

- Lack of information about what was happening;
- The proposal to merge both services (older people and learning disability) with the expressed consequence that staff will not have the appropriate skills and experience to support both sets;
- Disruption to and emotional impact on centre users.

Assessment process (social care)

People reported that the waiting time for an assessment was very long and time given were not adhered to:

“Told it was six weeks waiting time [supported living assessment] - been waiting four months with no named worker”

“...very long waits for assessment let alone any practical care”

followed by the comment that service needs to be *“Better financed. It was better before cuts*

One person commented that health care assessment and social care assessment were separate and that health staff were very reluctant to contribute to the social care assessment:

“Social care assessment for my son - son’s health needs not looked into...Social care assessment form doesn’t include information on health needs...asked to sign off social care assessment form but doesn’t include

health - how do I know these will be me?”

One parent was told “they couldn’t do the social care assessment until health assessment was done - felt it was a delaying tactic so social worker didn’t have to complete the social care assessment”.

The need for information about advocacy support during assessment process was raised by one person.

Support at home

Several people commented that they were unable to find a local agency (in Witney) to provide care at home.

One person reported that they now pay for care (and physio) as they were not guaranteed the same carer each time and this was very unsettling for the person, who is a stroke survivor.

“...with care at home you have to fit into the service rather than the other way around. Times don’t work and not person-centred. Need to have a multi-disciplinary team that can come home to help”

Occupational therapy (OT)

Two people commented on their experience of occupational therapy service at home with quite different experiences.

In relation to a matter concerning the Personal Independence Payment (PIP) Form, the occupational therapist said she would sign it so she could be the contact for them. The person concerned got more than expected and it was a really good experience”.

Another experience was not so positive following the occupational therapy support:

Although it was recognised this was not the occupational therapist's fault it raised the question of how joined up the services are to ensure referrals are actioned in time and that 5/6 months' wait does not equate to 'rapid response'.

"Mum (carer) was very ill last year. The occupational therapist referred the person to Rapid Response¹ in September. Rapid response got in touch in late Feb/March..."

Carers

"The more I've had contact with care services, the more I know what's available".

Several people commented on the need for support for carers and more accessible information about what is available at the start of the process. This was summed up well by one person:

¹ Rapid response is used here to refer to the Urgent Response service. The aim of this service is to provide rapid response to crisis situations in the community which pose a serious threat to a person's health, safety or wellbeing. For more information follow this link <https://livewell.oxfordshire.gov.uk/Services/3005/Urgent-Response-and>

Appendix A Service ratings

Service ratings - where 5 is highest and 1 lowest

Chart A1 Services rated 5 (highest - very good)

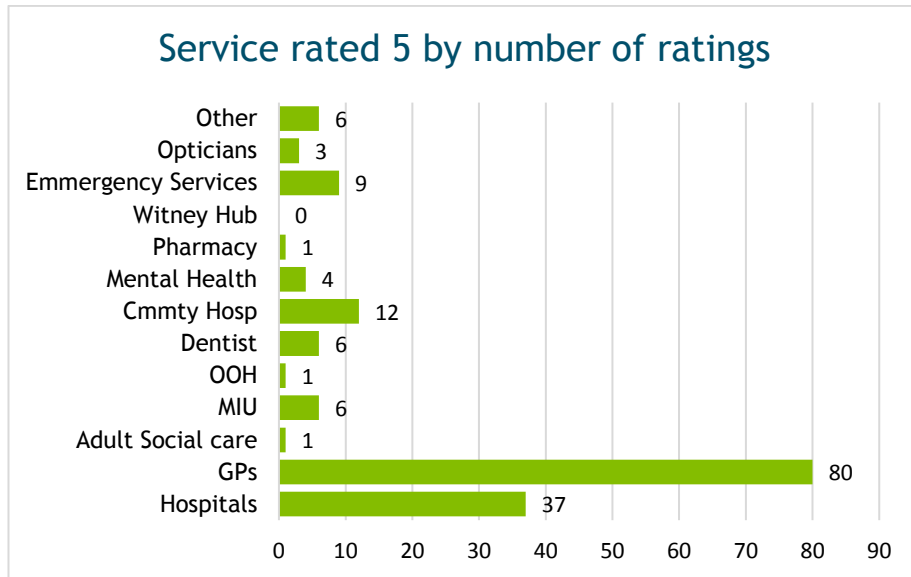


Chart A2 Services rated 4 (good)

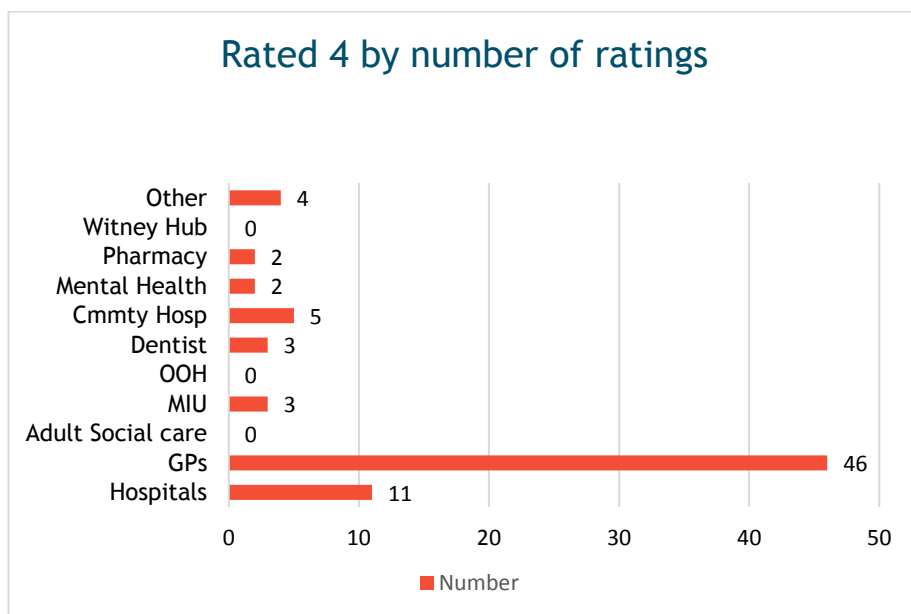


Chart A3 Services rated 3 (ok)

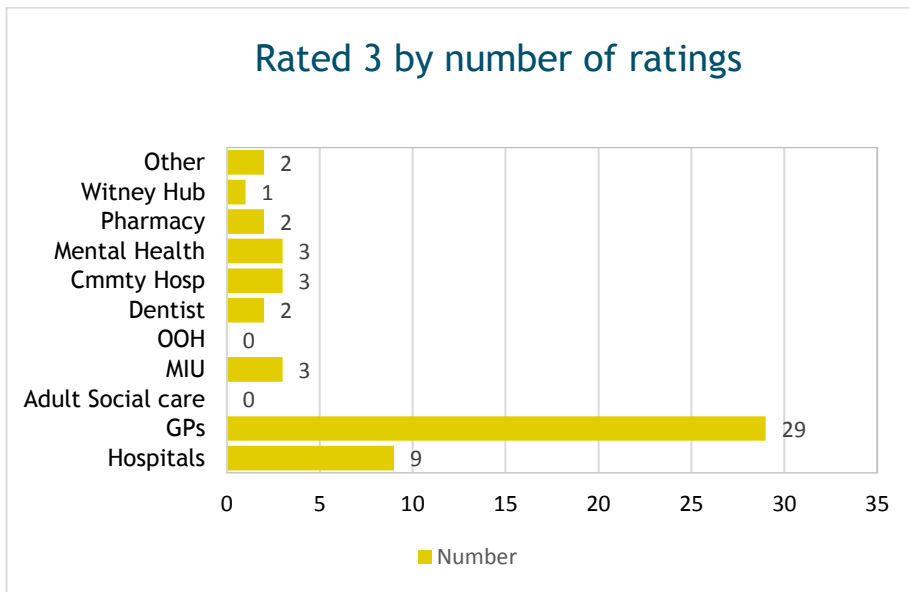


Chart A4 Services rated 2 (poor)

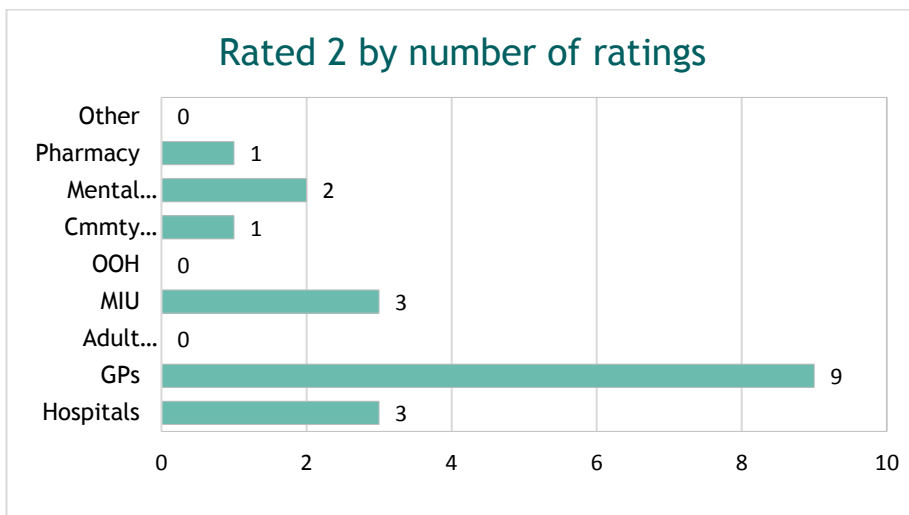
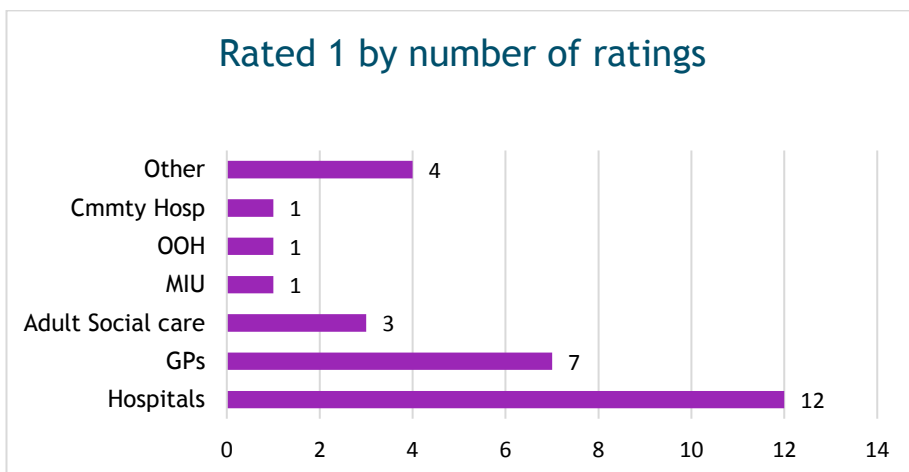


Chart A5 Services rated 1 (very poor)



Appendix B 'Tell us' form

Moisten and seal

Which service you are sharing your experience about?

Name and location of service

On a scale of 1 to 5 (with 1 being very poor and 5 being very good) how good was the service? Please circle your answer.

1 2 3 4 5

Please tell us about your experience (what happened, how it made you feel etc)

Moisten and seal

Moisten and seal

What was good about this service?

How could this service be improved?

Moisten and seal

To receive regular news about Healthwatch Oxfordshire, complete the form below.

Name:

Address:

Postcode:

Email address

We NEVER share this information with anyone else.

Moisten and seal

Published by Healthwatch Oxfordshire, The Old Dairy, High Cogges Farm, High Cogges, Witney OX29 6UN

Moisten and seal