healthwatch Oxfordshire

Digital health care and the NHS App

Voices from Oxfordshire

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Healthwatch Oxfordshire would like to thank everyone who shared their views and experiences with us in our online and outreach surveys. We are also thankful to community groups, GP practices, Patient Participation Groups (PPGs), and others who supported us by informing patients and people in their networks about our survey.

Executive summary

Background

The recent NHS England **10 Year Health Plan** includes an ambitious expansion of digital health tools and services, including patient's use of the NHS App across all services for access, support, information, advice and feedback. Although there is evidence of the benefits of using digital technology for health care, many people still face considerable barriers using it.

This report summarises the results of a Healthwatch Oxfordshire study in summer 2025 which listened to people's views on digital health care and experiences of using the NHS App.

We ran two surveys: one online to capture people from a variety of backgrounds across all districts in Oxfordshire, and a shortened 'outreach' survey for face-to-face conversations with communities and in public spaces.

Summary of results

The report summarises the results of **823 survey responses**: 585 were from the online survey and 238 from the outreach survey.

Some of the key results included:

- 96% of people in the online survey and 88% in the outreach survey have heard of the NHS App. However, 25% of people we spoke to face-to-face had not used it.
- 57% of participants agreed that the NHS App helps them manage their health and care.
- People value the **ease of use, convenience, efficiency**, and access to information on the App, helping some patients feel more informed and in control of their health.
- A considerable number of people with low digital literacy skills and access to technology risk digital exclusion.
- A common belief is that digital technology is impersonal and overlooks the essential 'human contact' element of health care.

- Patients find missing information and inaccurate records frustrating and are less confident trusting the App.
- Not all GP practices offer access to all of the additional services available on the App, and patients are not aware of some of them.
- Some people feel 'forced' into using the App and are worried that digitisation might affect their access to health care.

Also, a fragmented IT system means that patients currently only have access to partial records and services. BOB-ICS Digital & Data Strategy is overseeing implementation of improvements to digital infrastructures so that health professionals and users of the NHS App can manage their care plans across primary and secondary care.[1]

The responses showed the importance of patient choice. Not everyone agreed with the idea of a digitalised model of health care, and some chose not to use the App. An important concern was that digital tools replace the "human contact" element of health care, which people greatly value. There was also low awareness of the NHS App in some groups, while digital exclusion and low digital literacy made it difficult for others to access it. Some people believed that digital healthcare – and the NHS App – is being 'forced on them'. They feel that their health care choices are being constrained rather than increased.

From 1st October 2025, all GP practices in England were expected to make their online booking system available all day, allowing patients to book a same-day appointment without the need to call their surgery.[2]

Achieving the NHS goals for digital transformation will be helped by:

- Wider communication with the public about the NHS App and its uses, especially among underserved groups
- Addressing and removing barriers faced by digitally excluded people
- Ensuring mechanisms exist to hear about people's views and experiences using the App for their health care
- Making sure that the full range of services are available to all App users

[1] https://www.bucksoxonberksw.icb.nhs.uk/how-we-work/digital-data/
[2] https://healthmedia.blog.gov.uk/2025/09/29/gp-contract-what-you-need-to-know/

Recommendations

If aspirations outlined in the NHS Ten Year Plan are to be realised, addressing barriers to communication and patient understanding of the NHS App, will be critical.

The following recommendations are for: Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB), NHS England (NHSE) and Oxfordshire County Council.

This report will be shared for noting with: Oxfordshire Place Based Partnership, and Oxfordshire GP Leadership Network, Oxford Health NHS Foundation Trust (OH) and Oxford Universities NHS Foundation Trust (OUH) and Thames Valley Pharmacy.

1. Expand reach of digital cafes and workshops in community spaces at convenient times, working through community networks, patient groups, and local authorities including those in isolated rural communities. (BOB ICB)

2. Ensure the NHS App is fully accessible to all users including for disabled people, those with additional learning and language needs. (NHSE)

3. Ensure ongoing and effective communication at place about the development, changes and use of the NHS App, whilst continuing to address people's concerns, for example about security and data privacy. (BOB ICB)

4. Prioritise involvement of patients and patient groups in future testing, feedback and development of the NHS App to ensure that it is person-centred. (NHSE)

5. There are still communities in Oxfordshire that face barriers to using the NHS App, whether this be poor digital network access, cost or location (for example rural areas or those with financial constraints). This infrastructure issue needs to be addressed to ensure inequalities are not widened, and that the move to digital health is accessible across all communities. (BOB ICB and Oxfordshire County Council)

6. Communicate and guarantee continued access through **choice** and mandated provision of **non-digital alternatives.** (BOB ICB)

Background

Digital technology is playing an increasingly important role in our lives, including in health and health care. The government's NHS **10 Year Health Plan** (2025) includes an ambitious expansion of digital health tools and services. These are aimed at providing patients and their carers access to online health information and support, more choice and control over their own health and health care, and to help them access more care in their own community or at home.[3] The Dash Review of Patient Safety (July 2025), also outlines the future use of the NHS App to support patient feedback on services and ensure provider improvement in care.

These changes will be delivered through an expanded NHS App, an NHS programme that runs on a smartphone, touchscreen tablet, or computer that allows users to access support and services,[4] including:

- Search NHS information and advice on hundreds of conditions and treatments
- Find local NHS services
- Order repeat prescriptions and nominate a pharmacy to collect them
- Book and manage appointments
- View their GP health record
- Book and manage COVID-19 vaccinations
- Register for organ donation
- Use NHS 111 online to answer questions and get instant advice or medical help

The goal is for the NHS App to become "the complete digital front door to the NHS".[5] So far, more than **37 million** people have registered to use the NHS App and over **11 million** use it each month to manage their health care.[6]

However, although there is evidence of the benefits of using digital technology for health care, studies and reports have shown that many people still face considerable barriers to using it. They include a lack of access to internet and compatible phones, poor digital literacy (the ability to use digital devices and tools), a reluctance or refusal to use digital tools and technology, and a

[3] https://www.longtermplan.nhs.uk/
[4] https://www.nhs.uk/nhs-app/about-the-nhs-app/
[5] https://www.gov.uk/government/news/managing-healthcare-easy-as-online-banking-with-revamped-nhs-app
[6] https://www.england.nhs.uk/2025/05/amazon-style-prescription-tracking-goes-live-in-nhs-app-for-millions-of-patients/

preference for face-to-face interaction. People who cannot, or choose not to use digital methods to access health care, might experience disadvantages compared to those who do.

The aim of this report is to summarise the results of a survey-based study to explore local people's views of digital health care tools and their experiences of using the NHS App to manage their health care.

What did we do?

We developed two surveys, one online aimed at people with access to the internet and a shorter 'outreach' survey, which we did in-person, in conversation with people in public and community spaces. The surveys were open to anyone in Oxfordshire, whether they used digital technology or not and we tried to include a wide range of people from different backgrounds and communities across the county.

For the outreach survey, we visited many community spaces and events (e.g. community larders, playdays and community groups), and used our networks to hear from people whose needs might otherwise not be considered.

The following table summarises details of the face-to-face outreach activities:

Table 1. Outreach survey activities

Name of place or event	Date	Group
Ferriston Shops, Banbury	8th July	General public from priority wards
Bicester Memory Café	9th July	People living with dementia and their carers
Grimsbury Community Centre	10th July	General public from priority wards
The Lunch Club, The Hill Sports and Community Centre	11th July	General public from priority wards
Summer Information Fair Dementia	15th July	Dementia/carers
The Friendly Bunch group, Banbury Community Support Services	16th July	People with special needs
Health on the move event	17th July	General Public/Partners in Bicester
Sensory Baby	22nd July	Young mums' group
Banbury Larder	22nd July	General public from priority wards
Banbury Play Day	23rd July	General public
Afghan/refugee communities	24th July	Afghan/refugee communities

Henley Play Day	30th July	General public
Hong Kong/Afghan refugee communities	1st August	Hong Kong and Afghan refugee communities
Witney Play Day	7th August	General public
Charlbury PPG /JK Street outreach	8th August	Rural street engagement with Charlbury PPG
Cowley Centre	13th August	Street outreach
Banbury Play Day	13th August	Residents in the local area

Examples of outreach events and activities in the community

Afghan refugee community group

Charlbury Patient Participation Group

Who did we hear from?

We received a total of 823 survey questionnaires. 585 were in the online survey and 238 in the outreach survey. The table below summarises participants' age groups.

Table 2. Survey participants by age group (756 responses)

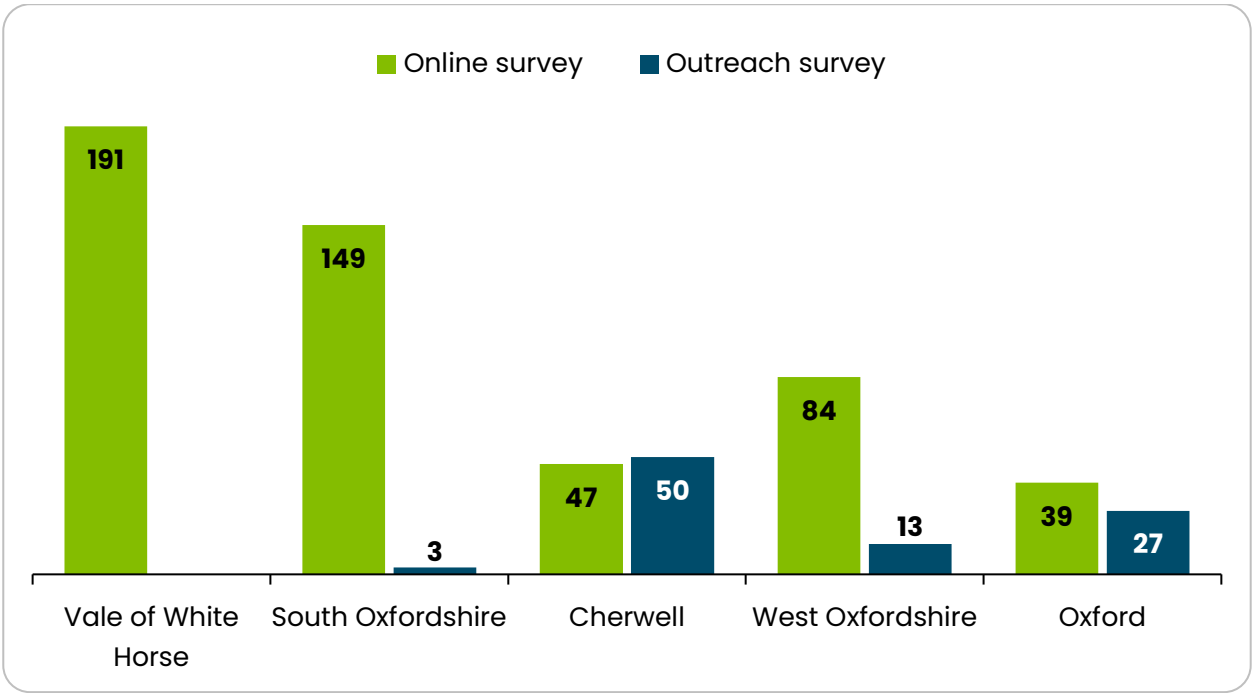
	Online survey		Outreach survey	
Age group	Number	Percent	Number	Percent
18-24	0	0%	9	4%
25-49	79	15%	89	38%
50-64	114	22%	83	36%
65-79	235	45%	43	18%
80 or over	85	16%	10	4%
Prefer not to say	9	2%	0	0%
Total	**522**	**100%**	**234**	**100%**

We heard from a range of age groups. More people in the online survey were aged 65-79 years, while those in the outreach survey were in the younger age groups (25-49 and 50-64). There were more women than other genders (67% in the online survey were women and 78% in the outreach survey).

People who completed an online survey might have been more familiar with digital technology than some of those in the outreach survey. Reaching out to people on the street and building on links with community groups ensures a wider diversity of respondent, including those who live in Oxfordshire's priority areas, seldom heard, and those from global majority communities. We achieved a diversity in views and experiences (for the full breakdown of respondents by ethnicity see **Table 4** in the 'Additional information' section at the end of the report).

Figure 1 below shows the Oxfordshire districts where participants in both surveys lived.

Figure 1. Which district do you live in? (753 responses)



The online survey included people from across all of Oxfordshire's districts. Most were from Vale of White Horse (n=191) and South Oxfordshire (n=149). Because we wanted to ensure that we reached people in Oxfordshire's priority areas, we focused the outreach survey in Cherwell (n=50) and Oxford City (n=27). However, we did not ask everyone at community groups and events where they were from, therefore some of them might have lived in other districts in Oxfordshire.

What did we hear?

The following section summarises what people told us about their awareness of the NHS App, whether or not they used it and how often, and what they used it for.

Awareness and use of the NHS App

Do people know about the NHS App?

Both surveys asked people whether they had heard of the NHS App, as shown in the following table.

Table 3. Have you heard of the NHS App?

	Online survey		Outreach survey	
	Number	%	Number	%
Yes	564	96%	206	88%
No	15	3%	26	11%
Not sure	6	1%	3	1%
Totals	**585**	**100%**	**235**	**100%**

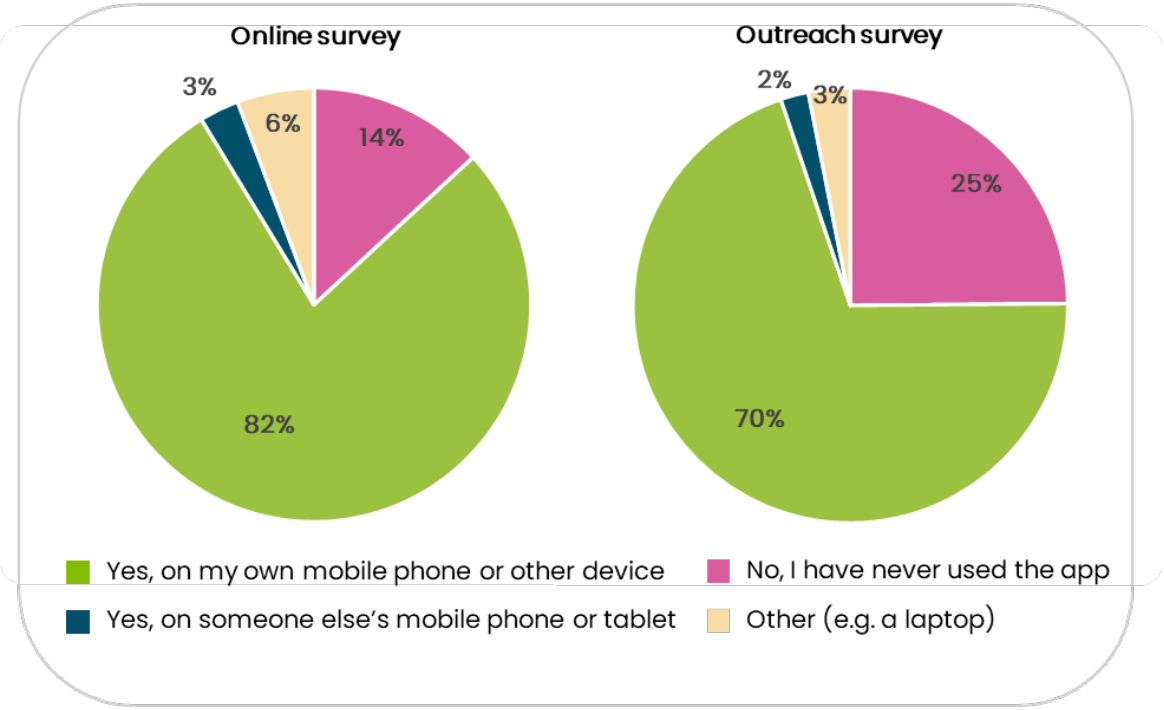
The table shows that most people in both surveys had heard of the NHS App, although it was higher in the online survey (96%) than in the outreach survey (88%). Lower awareness in the outreach survey suggests that some underserved groups might not have the same access to information about the NHS App and its uses.

When we looked at the data in more detail, we did not find any particular age group or gender differences in awareness of the App. Instead, those who had not heard of it were often people who said they did not like or use digital apps or that they preferred to have health care directly with a health professional.

Who uses the NHS App and what do they use it for?

Both surveys asked people whether they used the NHS App, how they accessed it, and what they used it for. The results are summarised in **Figures 3 and 4** below.

Figure 2. Do you use/have you ever used the NHS App? (776 responses)

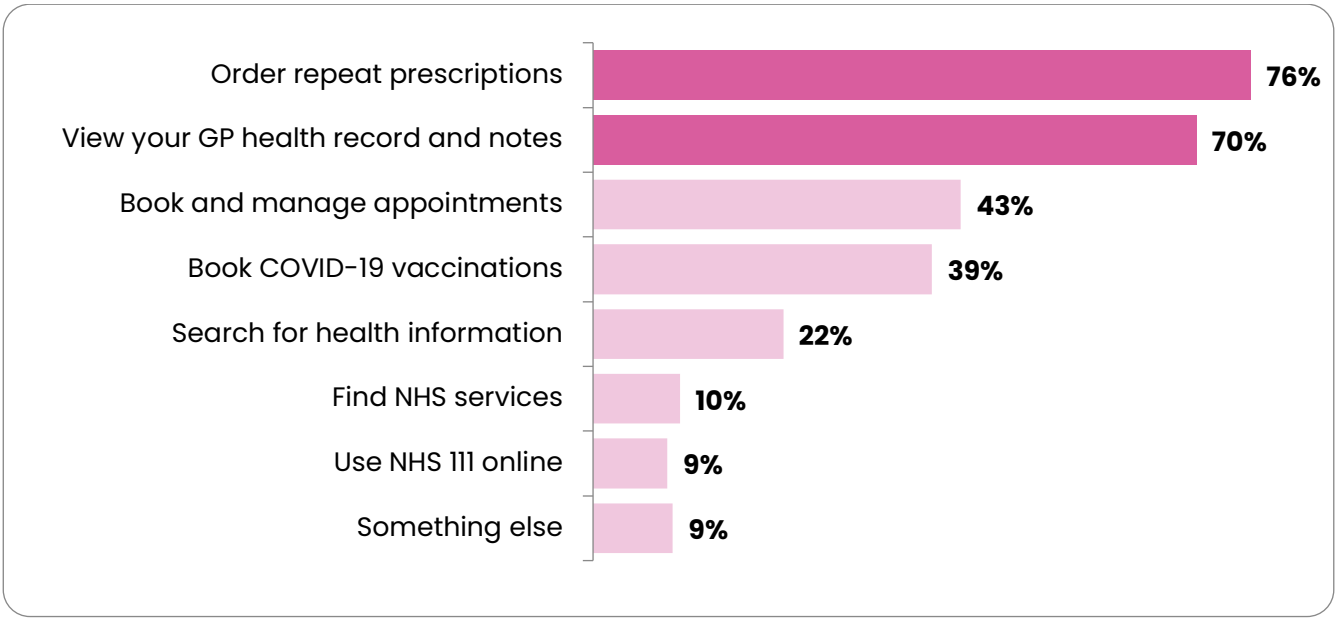


The results showed that 82% of people in the online survey said they had used the NHS App at least once compared with 70% in the outreach survey. **25% of people we spoke to face-to-face had not used the NHS App**. Almost everyone accessed the App on their own mobile phone or another personal device (e.g. touchscreen tablet), and only a few used another device, such as a friend's or relative's.

Almost half of people (47%) who used the App said they used it every month, 20% every few months, and 18% every week. Only 1% used it daily while 8% hardly ever used it. We also found that, on average, people used the NHS App for two or more services.

The following **Figure 4** summarises what people told us about what they used the App for (online survey only).

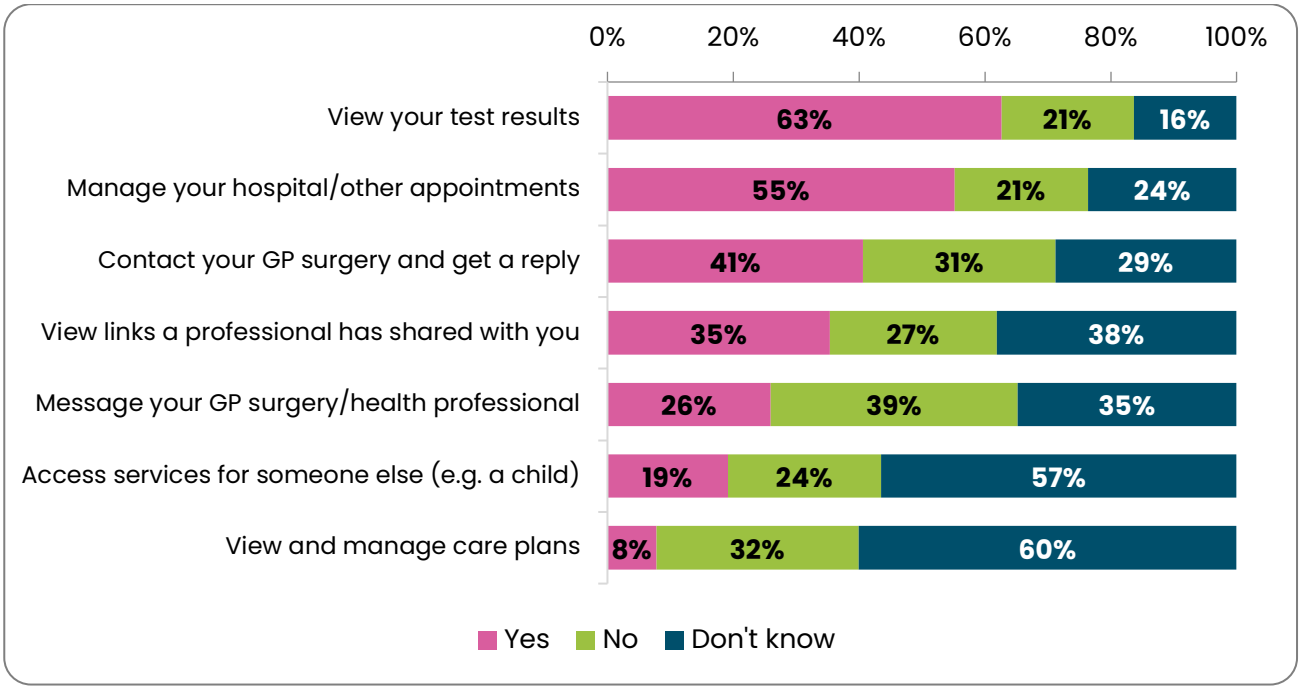
Figure 3. What do you use the NHS App for? (329 responses)



By far the commonest reasons for using the App were to order repeat prescriptions (76%) and view personal health records and GP notes (70%). Others also used it to book or manage health care appointments (43%) and to book or manage COVID-19 vaccinations (39%). Less common uses included searching for health information and accessing other NHS services.

Use of the NHS App varied across GP practices. Individual practices can enable additional services on the NHS App if they choose and their clinical systems allow. They include booking and managing appointments, sending the GP practice a message and receiving a reply, and accessing health services for someone else. We asked people whether they had access to these additional services. Figure 5 below shows the results.

Figure 4. Which other services can you access on the NHS App? (481 responses)



As Figure 5 shows, most people said they were able access test results (63%) and view and manage their healthcare appointments (55%) on the App. Some were able to contact their GP practice directly (41%), but fewer had access to the other services. The results also show that patients are not aware of the full range of digital services (e.g. booking appointments and messaging the GP practice) available. However, they suggest that some GP practices are not making all of the services available to all patients, presumably because they cannot provide the services or have chosen to disable them in the App. People that noticed the difference sometimes questioned its rationale and fairness:

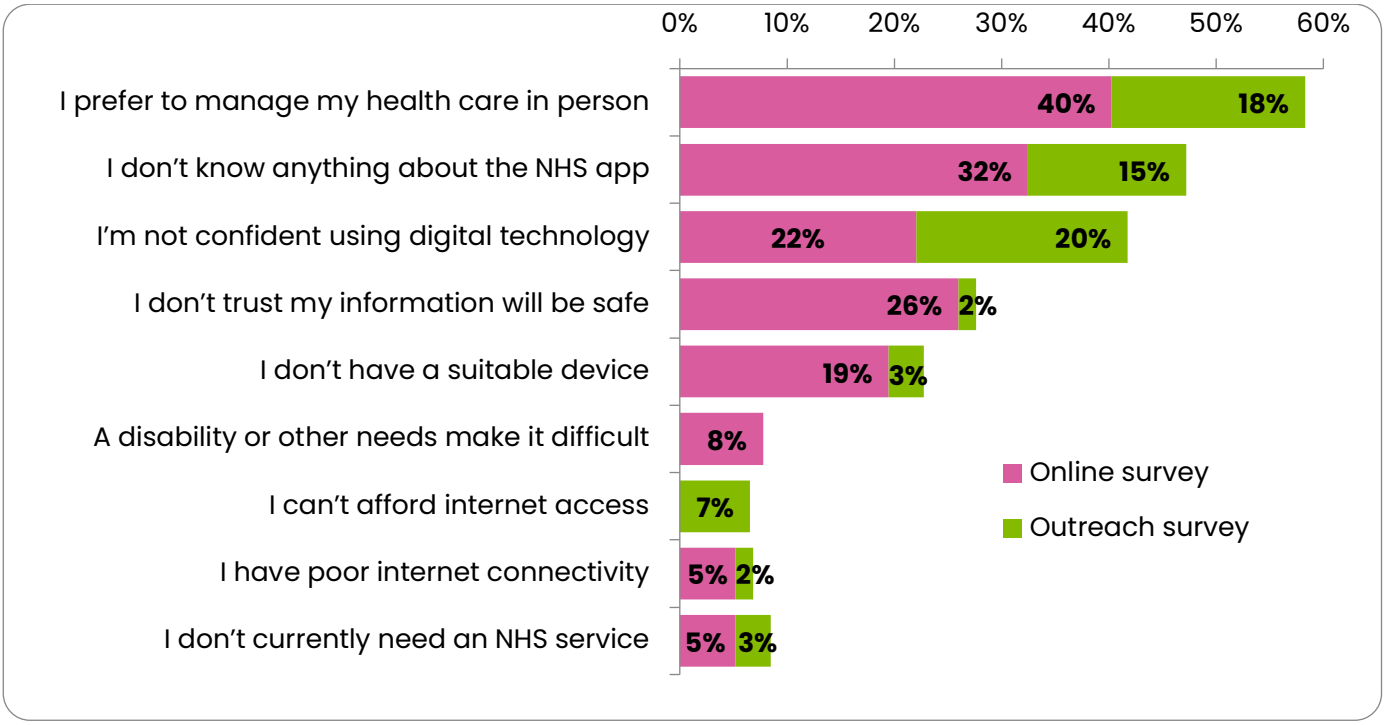
"A lot of the info is good. But if the GP surgery doesn't use it/allow full access then it's misleading and could cause problems."

"What is the point of a push to digital if each GP practice doesn't have to offer at least a standardised mandated level of access?"

Why do people not use the NHS App?

The data in Figure 3 above showed that between 14% and 25% of survey participants do not use the NHS App (25% of people we spoke to face to face told us they did not use the NHS App). We asked people to tell us the main reasons. The results are shown in Figure 7.

Figure 5. Reasons for not using the NHS App (138 responses)



As **Figure 7** shows, people gave various reasons for not using NHS App. Of those in the online survey who said they had never used the NHS App, 70% were over 65 years old.

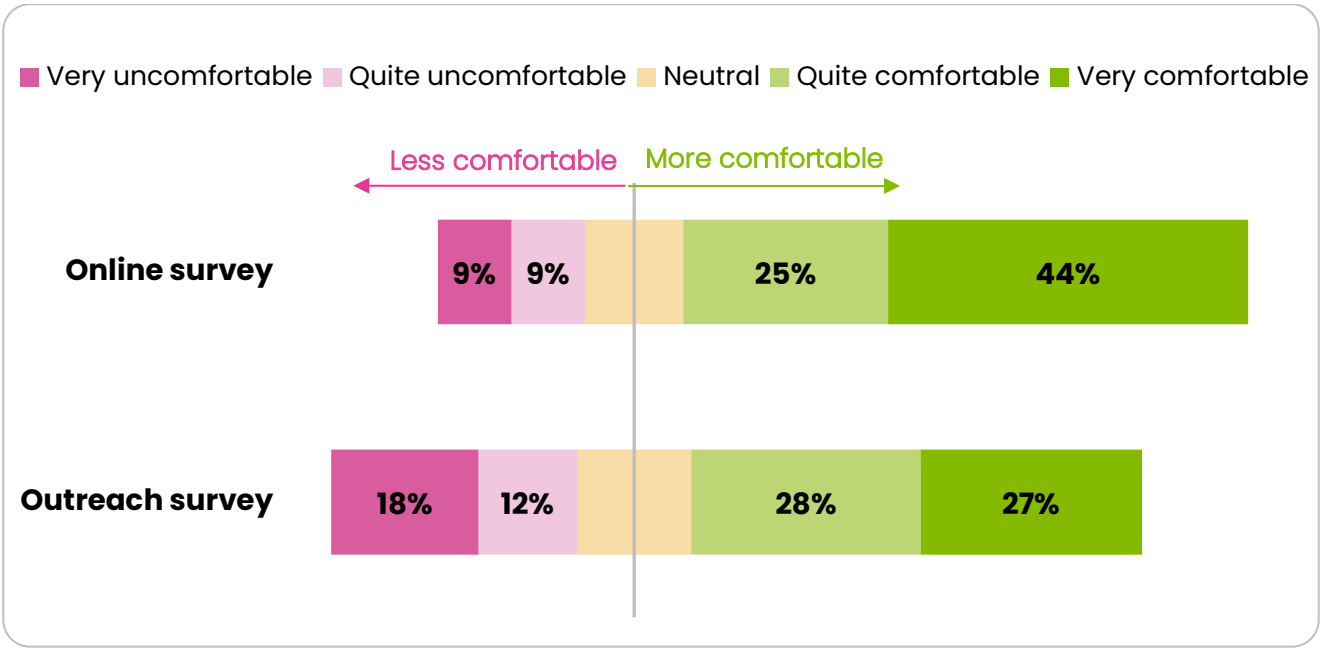
The commonest reason for not using the App was a **preference for in-person health care** rather than digital (40% in the online survey and 18% in the outreach survey). The second reason, especially in the online survey, was **lack of awareness** of the App (32% online and 15% outreach), followed by a **lack of confidence using digital technology** (22% and 20%). Another important reason in the online survey (26%) was **distrust in the safety and confidentiality of personal information**, while 19% of people said they **do not have a suitable device** to use the App.

These results reflect people's understanding and experiences of digital health care, the influence of digital literacy and exclusion, and concerns about how digital technology might affect patient access to care. These issues are explored in the following section.

How do people view digital health care?

We asked participants to tell us how comfortable they are with the *idea* of using digital technology to manage their health care. In both the online and outreach surveys participants chose one response from a list of five options, from 'Very uncomfortable' to 'Very comfortable'. The results are shown in **Figure 2** below.

Figure 6. How do you feel about the use of digital tools for health care? (782 responses)



In the figure above, the horizontal bars summarise the percentages in the online survey (top bar) and the outreach survey (bottom bar). The grey vertical line through the 'Neutral' section divides less comfortable views (to the left) from the more comfortable ones (to the right).

Overall, we found that most people were comfortable with the idea of digital health care, although there were differences between the surveys. Online survey responses were more positive (25% were 'quite comfortable' and 44% 'very comfortable') than in the outreach survey (28% and 27%). Twice the percentage of people in the outreach survey said they were 'very uncomfortable' (18%) compared with the online survey (9%). One of the reasons for this difference might be that the outreach survey targeted more people in priority areas and global majority groups, some of whom may experience more barriers accessing and using digital technology.

Although in the online survey, older age groups tended to be less comfortable with the idea of digital health care, this was not universal, and we heard from people in their eighties who embraced and used digital tools. One person said, *"I am 81 - I love digital technology and the NHS App."*

People who were comfortable with the idea of digital health care already used technology and digital apps for things like personal banking, online shopping, or work. They related to its potential to improve services for patients.

"[I've] Grown up using applications for most things – it's the easiest way to get things done."

"Digital healthcare is the future and will help to ensure patients can access the right information in a timely way."

During the COVID-19 pandemic, access to health information and services was largely online. People who had a computer or smartphone and internet access were able to book COVID vaccinations via the NHS website or NHS App. This introduced many people to digital health care and, for some, the potential value of managing their health care digitally.

Despite a general support for digital health care, both surveys revealed several doubts and concerns. A common concern was that, because digital technology is impersonal, it overlooks the human contact element of health care.

"Society is getting farther and farther away from hands on, face-to-face personal care that humans need and crave, especially those growing older and have no friends or family around them. It should not be pushed on onto everyone. Let's get back to proper face-to-face care."

"Digital care is literally black and white - there is no room for expression of feelings, how people are managing to live with health conditions, or to have a discussion with HCP [health care professionals]. It is a very reductive/biomedical model of care, does not include emotional, social, psychological aspects or individual thoughts and concerns. Some issues are very sensitive, personal and private and need to be explored in a confidential environment where people feel safe and not typed into a Q&A document."

Many people told us they felt that digital tools are unsuitable for managing their health conditions and care planning, and they much preferred to deal directly with health care staff and medical professionals.

"I'm quite old fashioned in my views and whilst technology could be useful, I personally prefer to see a Dr face-to-face as it's more impersonal via an App."

"I would rather not have my health managed by an app. I would prefer to see a GP."

"The App doesn't replace the need to speak with a healthcare professional to manage my diabetes. Yes, I can get information on diabetes, but it should not be a one size fits all. It just adds to the feeling that GP surgeries find patients an inconvenience and not worthy of help."

Another concern was that people who do not want to, or cannot, use digital technology (for example, because they do not have a compatible device or internet access, or because they are not very confident using digital technology) might be disadvantaged or have difficulty accessing health care services.

"Certain generations do not have smart phones and do not understand the meaning of apps. We should not be excluded from the health system, just because we do not use apps and technology."

"I feel people that cannot use digital tools will be excluded from the health system in the future. I do not know how to use a computer and don't know how apps work."

"The App is good for some things, but I worry that with all the new technology we are being pushed further away from actually seeing a GP."

Rather than seeing digital tools such as the NHS App as an addition or support to traditional in-person care, some people felt that they undermined care and that it went against the principles of the health system. One person said:

"The NHS is based on care, community, equality of access and treatment. The App use is very unequal, alienating."

Comments like these reflect the importance that people place on human interaction in health care and the perceived limits of digital technology when it comes to patient expectations around trust and empathy.

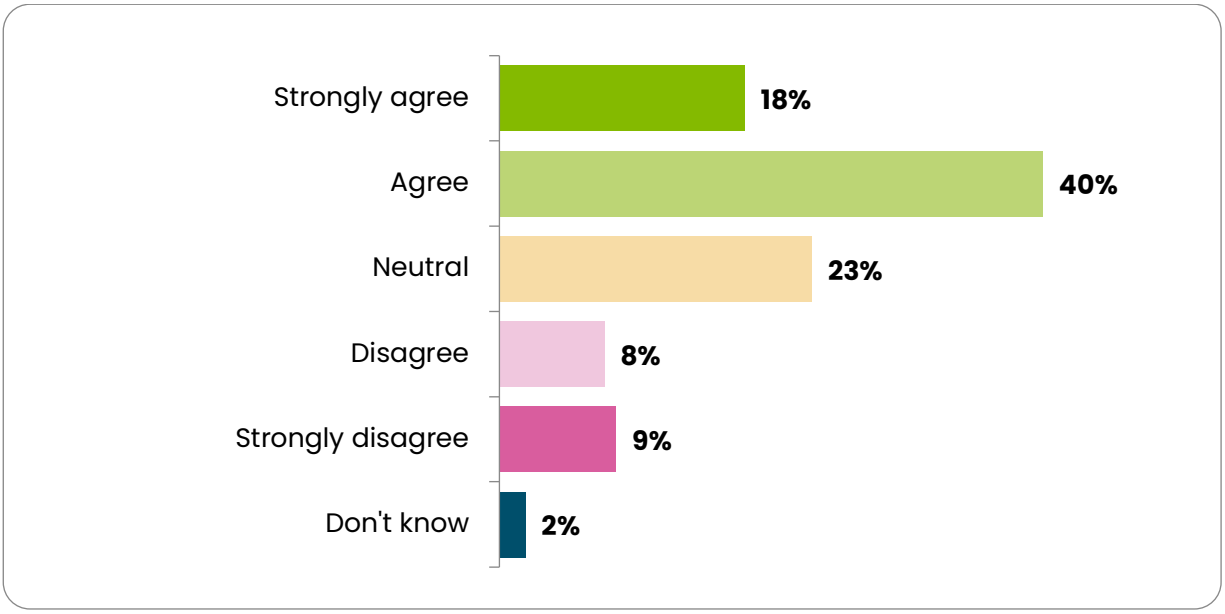
Patients' experiences of using the NHS App

This section summarises people's responses about their experiences of using the NHS App, the benefits and advantages, and the problems and disadvantages.

How useful do people find the NHS App?

We asked whether the App helped patients manage their health and health care. **Figure 6** below summarises what we heard.

Figure 7. Does the NHS App help you manage your health and care? (460 responses)



More than half of all participants agreed that the NHS App helps them manage their health and care (18% Strongly agree, 40% Agree), while 23% were neutral, 17% disagreed, and 2% were not sure. Although most people believe they benefit from using the App, a substantial number are unsure or disagree.

What are the main benefits and advantages of the NHS App?

We found that people who felt the NHS App helped them manage their health and care highlighted the **ease of use, convenience** and **efficiency** of accessing information and using the services.

"All the information and services that I need are at hand 24/7. Paperless prescriptions is great and I'm able to check when they are ready."

"It also saves money, e.g. on postage for hospital letters and is timely since sometimes the letters arrived after the appointment dates, hence increased non-attendance and a waste of precious appointments."

Many App users said they found it **quick and easy for administrative tasks**, especially ordering repeat prescriptions and **accessing personal and health information,** such as viewing their health records. Many described how "quick and easy" it was to do these tasks on the App.

"I'm on lots of medication and ordering repeats is very easy for me."

"Ordering repeat prescriptions has never been so hassle-free."

"I find the App easy to use and access my records easily. I have a young baby so having the App saves a lot of time."

Using the App meant patients avoid having to call their GP practice and wait in a telephone queue, visit and explain everything to staff, or often to wait for appointments in the post.

Having the option to view current and historical records increased transparency and helped people track their health conditions and treatment. Many said that this made them feel more informed and it helped them be prepared for appointments with their doctor.

"Seeing detailed test results gives me the full information that the GP is able to see."

"Personal access to information is useful and things discussed at appointments are easily forgotten, so it is good to have this on the App."

"I can see my test results and compare so I'm ready for my appointment with the Dr… I can see a history of my condition (though it can be hard to find!) to discuss with the Dr."

A benefit of being more informed was that some people felt **more involved and in control** of their health and care, helping them to take more responsibility.

"I think it's great and really helps people like myself. Since using it I feel more in control of my own health records that I've not seen for decades. It gives me a clearer picture and understanding of my conditions and needs

and I've found it helpful that I've been able to share something I've read with my GP and we could work together on it."

"I think it's helpful for patients to be able to take responsibility for their care. It makes us feel we are in partnership with our doctors."

What are the main disadvantages of the NHS App?

Although the survey data showed that most people felt the App improved their experience of health care (see Figure 6 above), not everyone agreed.

Some people simply said they disliked the NHS App while others were against the idea of managing their health care digitally. As discussed above, they were concerned about the digitalisation of health care through the App and the effect it might have on their access and experiences of care.

"There is nothing I like about using apps! I want to be able to phone for a doctor appointment when necessary!"

"I don't like any apps. Give me a real person every day."

"It does work quite well but I find you feel very isolated having to use an app rather than seeing a human being face to face… I feel using an app takes away face to face communication and a lot of elderly people are very lonely and would be scared by this if they cannot use technology."

The feeling that digitalisation of health care is inevitable meant that some people felt they did not have a choice and were being forced to use the NHS App. For them, the ability to choose alternatives was being taken away.

"The problem is I can see that I will be forced online as everything is heading that way – where's my choice?"

"Definitely feels like something is being done without any patient choice. Feels as though things are being done to me rather than with me."

Some people perceived the need to use the NHS App for some tasks as being "bullied into using it." For example, we heard that staff at some GP practices were requiring patients who wanted to make appointments in person or by telephone

(seemingly to shorten queues and waiting times), to do it online or through the App[7].

"I have witnessed people in my previous doctor's surgery being told that they have to do things online - there must be options for people who are not able or do not have access to mobile phones or a laptop to be able to walk into their surgery and be helped to get an appointment in person at any time of day!"

One person shared with us a more detailed account of her elderly parents' experiences booking appointments at a GP practice that seemed to have a 'digital-only' policy. We heard similar stories from other people, some of whom did not have digital access and were told that they should seek support at their local library. This illustrates the need for clear communication with patients so that they can understand how to navigate access. The person's story is in the box below.

An experience of digital-only access to appointments

"My mum is 78, she cares for my dad who is also 78 and lives with Alzheimer's and Crohn's disease. My mum went into her surgery in [place removed] to try to book an appointment for him. She was told that she couldn't make an appointment in person and to return home and use the NHS App. She said she didn't know how to, so she was told to go home, phone the surgery and they would assist her over the phone.

She went home, couldn't make an appointment over the phone and she was then advised to attend a tutorial at the surgery to show her how to use the App. She did this and managed to make an appointment.

The next time she needed to make an appointment, she forgot about the previous situation and again visited the surgery in person. She was turned away again.

I contacted the practice manager to voice my concerns but was advised:

[7] GP Contract: What you need to know – Department of Health and Social Care Media Centre

- They will not make appointments for patients who visit the surgery in person as they get complaints about waiting times at reception.
- They will not make appointments over the phone because they get complaints about waiting times on the phone.
- I should make the appointments on the App for my parents. I stated that I work full time and you can only make appointments during surgery opening times. I was advised to visit my parents at their home before I go to work to make the appointments for them. I was not asked if I live close to my parents or how far I travel to work.

Fortunately, I am able to visit my parents at 7am at their home to book appointments when the system opens and then go on to work but the situation isn't ideal.

What happens to those patients that don't have family support close by?"

People who could not use the NHS App themselves (for example, because of a disability or difficulty using digital technology), sometimes felt pressured to ask family or friends -if they could - to help them.

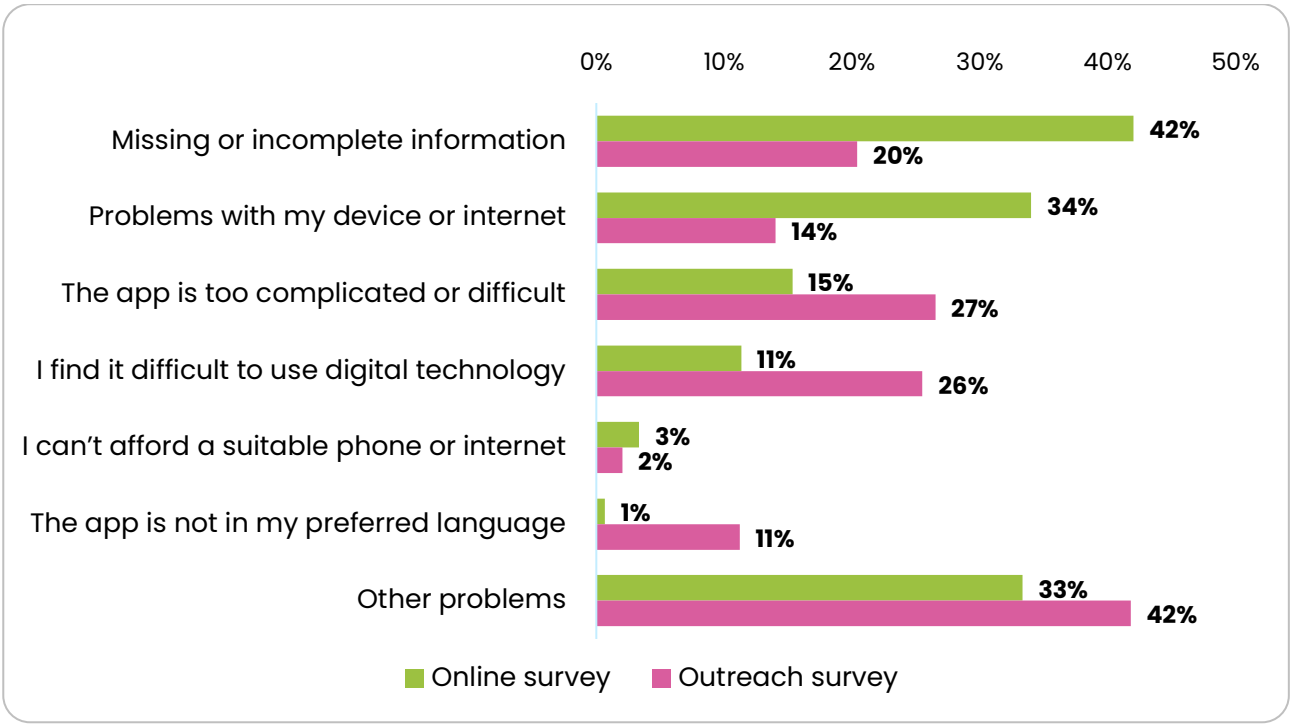
"For those who cannot or do not wish to use NHS App then this pushes more responsibility onto family members/carers or friends if they take on that role of using technology."

These examples of the 'digital-first' policy highlight the potential for conflict and confusion for patients and staff during the transition to digitalised health care system. Besides causing some people to feel "forced" into using the NHS App, it can make others feel less empowered and feel more dependent on others.

What other problems do people experience using the NHS App?

In the online survey, we found that 34% of people had experienced one or more problems using the NHS App compared with 56% in the outreach survey. Figure 8 below summarises the main problems people experienced.

Figure 8. Have you experienced any problems with the NHS App? (248 responses)



As **Figure 8** shows, people reported a range of problems and difficulties. A common issue was **missing or incomplete information**, which accounted for 42% of problems identified in the online survey. Many people said they had **problems with a digital device or internet**, for example because their phone was incompatible or slow, or that their internet connection was limited. For example, in our outreach in Didcot we heard that digital network coverage in rural villages along the Downs was inconsistent and patchy.

More people in the outreach survey found the App **complicated or difficult to use** or said they had **difficulty using digital technology**. This was probably because this survey included more people from underserved groups.

'Other problems' category were mainly **technical and usability issues.** They included:

- Setting up the App, registering, and verifying their account
- Signing in (e.g. accounts and email addresses not recognised)
- Registering an account with a new (changed) email address
- Getting locked out of the App
- App freezing or crashing
- Receiving notification of a message from the GP practice but, when signed not finding any message

People reported various types of missing or incomplete information, including health records, letters, and test results at both primary (GP practice) and secondary (hospital) levels.

"Loads of missing health records, and even some incorrect records. Items called "test results" that are not. Consultation section records "clinical letters" that are not loaded (I currently have 2, one has been received nearly a week ago, but I cannot see it)."

"Almost all of the hospital data is missing. I was once talking to a radiologist. She asked for the date of a procedure. I couldn't remember. I said, "It will be in my notes." She could only see the history in her department! Similarly, my oncologist couldn't see my breast scan data."

Some people reported inconsistencies and omissions in information and record-keeping between providers, such as health care appointments and treatments at some hospitals or departments that were not recorded on the App.

"Not all the hospitals in the Oxfordshire Trust use the NHS App. For example, I can find all my appointments for the Churchill on it, but not those for the JR."

"I've tried using it for hospital appointments but it seems only physiotherapy use the App. Other departments I have been referred to do not. It's very confusing how different services use different methods."

In both surveys, inaccuracies and omissions raised concerns, with one person saying they "*wouldn't trust the App in ordering a prescription or making an appointment*." Similarly, some people questioned its usefulness if they did not have access to all their records.

"Use is fairly limited at the moment. Although I can see hospital appointments, I cannot manage them through the App and some appointments aren't there."

"It's quite helpful in terms of GP health management, but completely unhelpful in terms of records of appointments and treatment from other NHS departments."

"I can see test results, medication and can order prescriptions, however, I can't book a GP appointment as it takes me out of the App to my GP website – so what's the point of trying? I may as well go straight to the GP and cut out the middleman."

These weaknesses in functionality undermined people's views on usability and confidence in the App, which, in turn, influenced their experiences of health care. The sense that the App didn't always meet their needs undermined its added value compared to conventional ways they were used to.

We heard from certain groups that **digital exclusion** was a problem, including some elderly people, people who could not afford a smartphone or internet access, migrants and people whose first language is not English, boat dwellers, and people with certain physical or learning disabilities. People in these groups often did not have access to compatible devices or were not confident or able to use digital technology necessary to access the NHS App or manage their health care digitally.

"Older people and ill people often find technology challenging. Digital technology is fine for those brought up on it, and those who are well. Therefore, an app is the wrong tool for medical support."

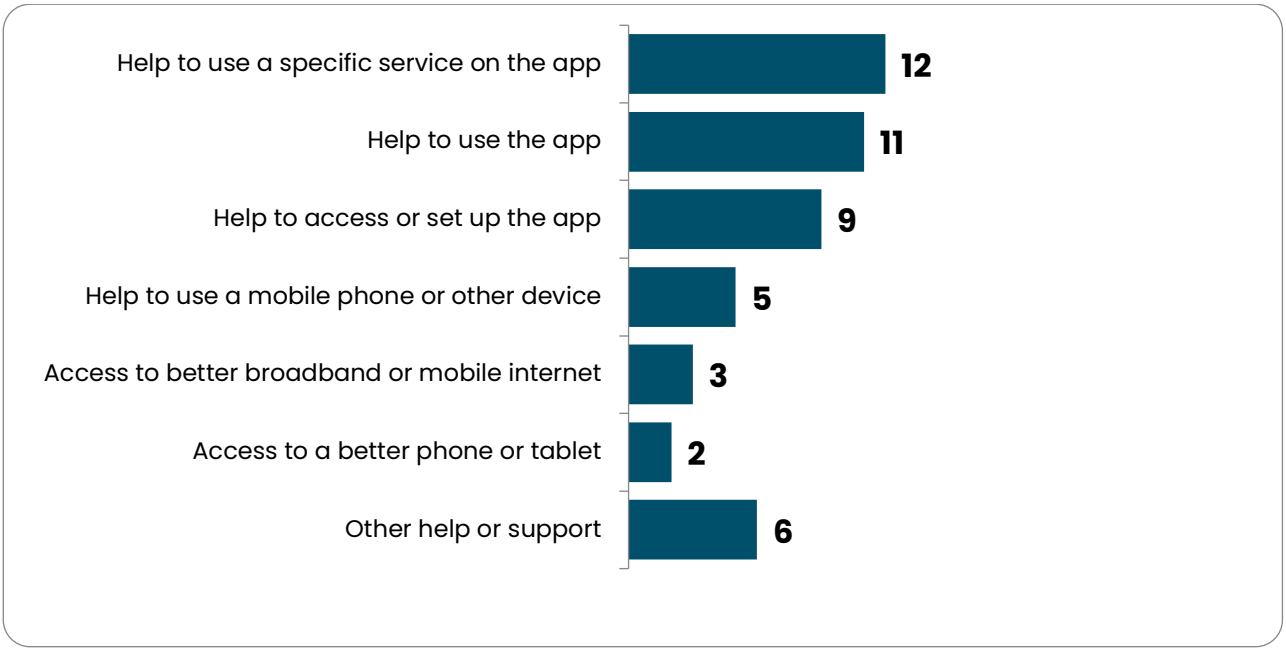
"I am dyslexic and have mental health issues. The GP practice keep telling me to go through the App. I really struggle and just want to cry and they make it so hard for me to see the doctor… Support people with the App who have dyslexia and mental health issues, instead of treating us all the same."

We also heard about language barriers. People from underserved groups such as the Afghan and refugee communities told us that they struggled with the **language** in the App and found it **complicated and confusing** to use.

What types of support have people needed to use the NHS App?

A following question in the online survey asked whether people had needed help or support to access or use the NHS App. Only 67 people (14%) said they had needed help or support at least once. Figure 9 below shows the different types.

Figure 9. Which type of help or support have you needed? (63 responses)



The main issues for which people had needed support were mostly related to **downloading and setting up the App** on their device, **navigating the App** in general, and **accessing or using a specific service** within the App, such as setting up a repeat prescription. Other types of support included **technical help** with passwords and user verification. It is worth noting that BOB ICB run regular 'Digital Cafes' across the area, offering one-to-one support to navigate digital technology, and the NHS App.[8] Patient Participation Groups, Age UK Oxfordshire and others across the county also offer support, reaching out to people in local libraries and other venues.[9] This is an example of an approach that will need to be expanded if ambitions for use of the NHS App are to be realised.

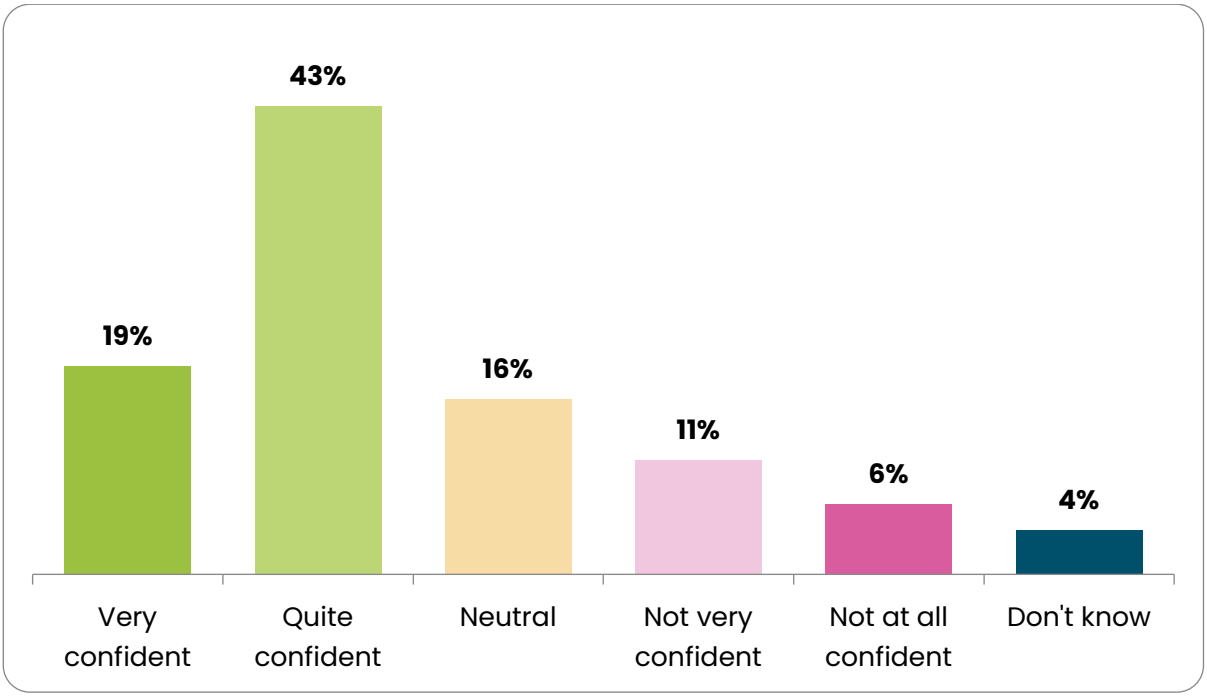
A follow-up question showed that most of these people asked for help from a friend or relative, or a member of staff at their GP practice.

How do people feel about their personal and health information in the NHS App?

We asked people how confident they felt that the NHS App keeps their personal information confidential and safe. The results are summarised in Figure 10 below.

[8] https://www.bucksoxonberksw.icb.nhs.uk/digital-cafes/
[9] https://news.oxfordshire.gov.uk/digital-cafe-helps-to-get-people-online/

Figure 10. How confident are you that the NHS App keeps your information safe? (462 responses)



As the figure above shows, most people said they felt confident in the safety and confidentiality of their personal information. This is interesting because people also told us that they were reluctant to use the App because of concerns about the safety and privacy of their information. Some worried which organisations might have access to patient health data and how it might be used. This was related to beliefs and experiences, and news of how organisations and commercial companies store and use digital personal information, and the risk that it might be hacked, stolen or sold.

"My main concern is about potential personal data breaches with Digital technology around healthcare. I use the NHS App to manage my prescriptions and I am worried about so much personal data on an app that might be breached."

"I have a fear of using technology in the light of recent events i.e. big companies being hacked and data stolen and sold on."

"I am a digital helper in an Oxfordshire library and I support people who need help with technology. I am very aware of the barriers that older people face when trying to learn and use digital tools and apps. I am also aware of the potential danger of putting personal information online,

especially in relation to healthcare. My 'Quite comfortable' response reflects this awareness of the potential danger of personal information online."

Some people knew that a US company (Palantir) is contracted to manage aspects of NHS patient data and health records.[10] They wanted to be reassured that access and privacy of patient health data, and that its proper use was safe and guaranteed to be in line with UK data safety regulations.

"I have anxiety about some of the tech partners that may be involved in computerising medical records. Particularly those based in the USA."

"I am strongly against any of my data being sold or given or in any other way made available to any third party or external entity, such as Palantir, for profit or any reason other than open-source research. The only acceptable use of patient data would be if wholly anonymised, aggregated, and used solely for research purposes by reputable and thoroughly vetted academic institutions."

How could uptake and experiences of the NHS App be improved?

We heard about a number of areas where efforts could be made to improve people's access to and experiences of the NHS App. These included:

- Raising awareness of the App across diverse communities and underserved groups:

"Many people across diverse communities are not aware of the App and what and why it is useful. Promotion and explanation is poor…Work with the diverse communities to support and communicate clearly if you want to drive change."

- Expanding help and support with digital access, financial barriers and literacy:

[10] See https://www.england.nhs.uk/long-read/federated-data-platform-update/

"More needs to be done in our communities and neighbourhoods to help those who struggle to use technology, are digitally excluded, are in financial hardship, or are isolated. It is those who are hard to reach that most need help."

"Maybe there should be some sessions on how to use the App. It's easy for the young but we were brought up using pen and paper and telephones. New technology not always clear."

"More help is needed to get people signed up and more information needed on the alternatives so that people don't get left behind or second-class services because they can't use it."

- Making sure that patients and the public are included and involved, and that their concerns and experiences are heard:

"The march towards "digital first" is accelerating and I feel it will make life more difficult for some of the most vulnerable members of our community: older, financially vulnerable, not working, people with disabilities and people with learning difficulties. These people should be at the forefront of decision-making to ensure equality of access to all NHS services."

- Ensuring the full range of services are available to everyone and integration between health service providers and sectors:

"I think consistency across the board would be really helpful. If all patients used the same method of accessing services and information, across all GP practices, ICBs, etc; that would be much easier for us over time. It could mean that I could (for example) help older relatives to access services because I would already understand the system because I would be using the same system they do."

"I would like to see all my medical data from all sources accessible from the App. Furthermore, I should be able to allow other technologies to have

access to provide better analysis, understating, visualisation of medical documents, test results etc."

What we learned

Experiences with the NHS App are mixed. While some App users find it useful and empowering, others feel frustrated or excluded. For many, the App makes it an easy and convenient way to manage aspects of their health care. Others value the way it improves access to information, helping them feel more informed and less reliant on contacting their GP practice. It can promote a sense of control and supported self-care by giving patients access to their records and services in one place.

However, not everyone shares these views. Some people doubt the 'digital-first' model of care, emphasising the "human connection" aspect of health care, and the importance of having direct contact with a health care professional. There are also concerns about accessibility, particularly for people who are digitally excluded or choose not to use the NHS App. Even among those who are able to use it, the range of services available is still limited. Although it clearly works well for many users, there are some limitations, particularly for those who feel that digital convenience comes at the expense of personal care. Users also need to trust that the App works, that their information is secure, and it is reliable.

BOB ICS has developed a comprehensive Digital & Data Strategy (May 2023) aimed at reducing health inequalities by improving the way digital technology is used in local health care services, including the ability to share health care records across health care providers, improving digital inclusion and health literacy, and adding services to the NHS App.

The current NHS 10 Year Health Plan outlines huge ambitions to transform the way the population manages and receives health care through the advancement and expansion of digital technology. However, many parts of the NHS are fragmented and under significant pressure (e.g. workforce shortage, difficulty sharing records, departments working in silos etc). These problems will need to be resolved for digitalisation to reach its potential. Understanding people's views and experiences of digital care and the NHS App will also play a crucial role in the development of future technology, and whether and how they engage as digitalisation continues.

Recommendations

Based on the findings in our report, we recommend the following:

1. Expand digital cafes (https://www.bucksoxonberksw.icb.nhs.uk/digital-cafes/) and workshops in community spaces at convenient times, working through community networks, patient groups, and local authorities including those in isolated rural communities. (BOB ICB)
2. Ensure the NHS App is fully accessible to all users including for disabled people, those with additional learning and language needs. (NHSE)
3. Ensure ongoing and effective communication at place about the development, changes and use of the NHS App, whilst continuing to address people's concerns, for example about security and data privacy. (BOB ICB)
4. Prioritise involvement of patients and patient groups in future testing, feedback and development of the NHS App to ensure that it is person-centred. (NHSE)
5. There are still communities in Oxfordshire that face barriers to using the NHS App, whether this be poor digital network access, cost or location (for example rural areas or those with financial constraints). This infrastructure issue needs to be addressed to ensure inequalities are not widened, and that the move to digital health is accessible across all communities. (BOB ICB and Oxfordshire County Council)
6. Communicate and guarantee continued access through **choice** and mandated provision of **non-digital alternatives**. (BOB ICB)

Additional information

Table 4. Survey participants by ethnicity (757 responses)

	Online survey		Outreach survey	
Ethnicity	Number	Percent	Number	Percent
White: British/English/Northern Irish/Scottish/Welsh	439	84%	182	78%
White: Any other White background	31	6%	1	<1%
Black/Black British: African	4	1%	13	6%
Asian/Asian British: Indian	5	1%	4	2%
White: Irish	5	1%	0	0%
Mixed/Multiple ethnic groups: Asian and white	3	1%	1	<1%
Any other Mixed/Multiple ethnic groups	2	<1%	2	1%
Mixed/Multiple ethnic groups: Black Caribbean and White	2	<1%	0	0%
Asian/Asian British: Pakistani	1	<1%	13	6%
Asian/Asian British: Chinese	1	<1%	1	<1%
Arab	1	<1%	0	0%
White: Roma	1	<1%	0	0%
Asian/Asian British: Bangladeshi	0	0%	1	<1%
Black/Black British: Caribbean	0	0%	7	3%
Other Asian/Asian British background	0	0%	5	2%
Any other Black British background	0	0%	1	<1%
Any other ethnic group	6	1%	2	1%
Prefer not to say	21	4%	2	1%
Total	**522**	**100%**	**235**	**100%**

Further resources and reading

About the NHS App https://www.nhs.uk/nhs-app/about-the-nhs-app/

Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB-ICB) Digital and data strategy: https://www.bucksoxonberksw.icb.nhs.uk/how-we-work/digital-data/

Dash review of patient safety across the health and care landscape (https://www.gov.uk/government/publications/review-of-patient-safety-across-the-health-and-care-landscape)

Good Things Foundation report, Belief and trust barriers to using digital health services: learning from a research and co-design project.' https://www.goodthingsfoundation.org/policy-and-research/research-and-evidence/research-2025/beliefs-and-trust-barriers-to-using-digital-health-services

Healthwatch Norfolk report on people's awareness and experiences of the NHS App: https://healthwatchnorfolk.co.uk/news/assessing-awareness-and-user-experience-of-the-nhs-app/

Healthwatch Oxfordshire – What we heard about pharmacy (Ap 2024-Mar 2025) https://healthwatchoxfordshire.co.uk/wp-content/uploads/2025/04/What-we-heard-about-pharmacy-April-2025.pdf

King's Fund (2023), Moving from exclusion to inclusion in digital health and care: https://www.kingsfund.org.uk/insight-and-analysis/long-reads/exclusion-inclusion-digital-health-care

NHS 10 Year Health Plan for England: https://www.longtermplan.nhs.uk/

Reidy, C., Papoutsi, C., KC, S. *et al.* Qualitative evaluation of the implementation and national roll-out of the NHS App in England. *BMC Med* **23**, 20 (2025). https://doi.org/10.1186/s12916-024-03842-w

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