

Report to the Oxfordshire Joint Health Overview and Scrutiny Committee

November 20th 2025.

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1. Healthwatch Oxfordshire reports to external bodies

For all external bodies we attend our reports can be found online at:

<https://healthwatchoxfordshire.co.uk/our-reports/reports-to-other-bodies/>

We attend Health and Wellbeing Board, Health Improvement Board, Children's Trust Board, Health Improvement Board, Oxfordshire Place Based Partnership and Oxfordshire Neighbourhood Health and Marmot Oxfordshire meetings. We bring insight into committees at Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) level.

A summary of our **Quarter 2** (Jul-Sep) activity can be found here:

<https://healthwatchoxfordshire.co.uk/impact/activities-and-achievements/>

We made formal comment on emerging local and national strategy here:

<https://healthwatchoxfordshire.co.uk/news-and-events/correspondence/>

2. Update since the last Health Overview Scrutiny Committee (HOSC) Meeting – Sept 2025

Healthwatch Oxfordshire reports published:

The following reports were published since the last meeting and can be seen here:

<https://healthwatchoxfordshire.co.uk/reports> All reports are available in **easy read**, and word format.

- **Trans and non-binary people's experiences of GP services in Oxfordshire – (October 2025)**
- **Digital healthcare and the NHS App –Voices from Oxfordshire (Nov 2025)**

See below for our two summaries of these reports

To read more about the **impact** of all our reports, and commissioner and provider responses and agreed actions, see here:

<https://healthwatchoxfordshire.co.uk/impact/>

Trans and non-binary people's experiences of GP services in Oxfordshire

Trans, non-binary and gender diverse (trans+) people are more likely to experience poor physical and mental health, and to face barriers in getting the health and care they need.

As part of a national study, Healthwatch England commissioned Healthwatch Oxfordshire to listen to local trans+ people in the county about their experiences of using GP services. We heard from 45 trans+ people via an online survey, in-person outreach and in-depth phone conversations.

What did we hear?

We heard that there are examples of good practice across Oxfordshire, where trans+ people are treated with respect and dignity, and able to access the care they need – but that this is inconsistent.

Some of the trans+ people we spoke to do not feel confident using their GP practice. People told us about barriers and challenges including:

- Long waits for NHS Gender Dysphoria Clinics (GDCs) and a lack of support while waiting
- A 'postcode lottery' of access to gender-affirming hormone therapy
- GPs not having the understanding of, or confidence in, trans healthcare to provide the support people need
- A lack of clarity and transparency in terms of what trans+ people can expect from GP practices and how to access care and support
- Not being respected, or being misgendered, by practice staff
- Problems with changing personal details (such as name, title and gender marker), including people losing their previous NHS records, being misgendered at the practice or in communications, and losing access to preventative screening.

"My GP seems okay with my identity but was not comfortable with continuing my testosterone prescription without specialist involvement even though I have been discharged by the NHS GDC back into the care of the GP."

"GP did not feel qualified to do anything and relied on me to get informed."

"My GP changed my gender marker without my consent or asking me if that was what I wanted at the time. I hadn't started transitioning medically and I would have preferred to wait as I was going through health issues and this just made things more difficult to explain to NHS specialists outside of transition related care."

We heard about the positive difference it makes when:

- GP practice staff are compassionate, respectful and willing to learn
- GPs support people to access and navigate gender-affirming care, for example through referrals, bridging prescriptions, shared care or blood tests
- Administrative changes are made quickly and effectively.

"My GP is empathetic and has been proactive in learning about things that are less familiar and chasing up possible avenues for me to receive some specific procedures."

"We appreciate all the hard work to be inclusive, accepting, patient and understanding. Every doctor has checked my name and pronouns."

What happens next?

We have sent our report to Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board, which commissions GP services in Oxfordshire. They have committed to commissioning training for GP practice staff on understanding and competency in trans healthcare, providing guidance for GPs on prescribing gender-affirming hormone therapy, and setting up an LGBT+ page on their engagement platform, Your Voices.

Talk to us!

You can share feedback about your GP practice and other health and care services at:

- healthwatchoxfordshire.co.uk/services
- hello@healthwatchoxfordshire.co.uk
- 01865 520520

Local support

Here are details of some local support organisations:

- Local events and organisations for trans+ people in Oxford oxfordtransrights.org/trans-in-oxford
- Abingdon Queer Action [@abingdonqueeraction](https://www.instagram.com/abingdonqueeraction) on Instagram and [@abingdonqueer](https://www.facebook.com/abingdonqueer) on Facebook
- Topaz – social group for LGBT+ young people www.topazoxford.org.uk
- Silver Pride – Age UK events for older LGBTQ+ people in Didcot and Banbury. Contact community@ageukoxfordshire.org.uk or 01235 849434
- My Life My Choice LGBT self-advocacy group – for LGBT people with a learning disability mylifemychoice.org.uk/lgbt-group

Thanks to everyone who shared their views with us!

You can read our full report by scanning the QR or at healthwatchoxfordshire.co.uk/report/trans-experiences



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Digital health care and the NHS App – voices from Oxfordshire

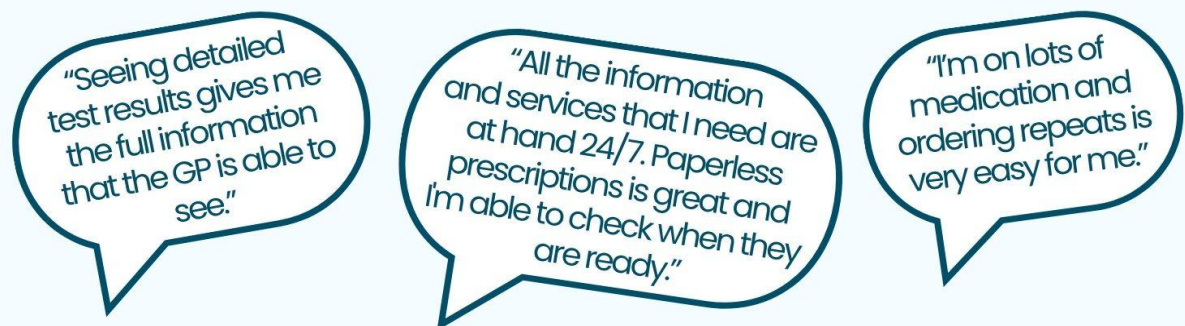
What did we do?

NHS England is undergoing major reform, including the expansion of digital health tools and services such as the NHS App. Although there is evidence of the benefits of using digital technology for health care, many people still face barriers using it.

We ran two surveys (one online and one face-to-face) to capture the views and experiences of people from a variety of backgrounds across Oxfordshire. In total we heard from 823 people.

What did we hear?

- Almost everyone said that they had heard of the NHS App, and most people had used it at least once.
- The commonest reasons for using the App were to:
 - Order repeat prescriptions (76%)
 - View personal health records and GP notes (70%)
 - Book and manage health appointments (43%)
- 58% of people 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.



Those who told us they had poor access to technology (signal, cost or equipment) or low confidence or skills in using digital methods, and those wanting to maintain choice around use of digital health care, found it difficult to use the NHS App or chose not to use it.

- A quarter of the people we reached face-to-face across the county told us they had not used the NHS App.
- There is geographical variation – not all GP practices offer access to the full range of digital services on the App.
- Many people said they felt that digital technology is too impersonal and overlooks the essential ‘human contact’ aspect of health care.
- Some people feel ‘forced’ into using the App and are worried that digitalisation might affect their access and choice in health care.

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

"I feel people who 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."

What do we think should be improved?

Based on what you told us, we have made a series of recommendations for improvements, around:

- Increasing tailored support and accessibility for patients to use the NHS App
- Clarity about choice and data safety
- Involving patients in testing future NHS app development
- Addressing barriers in Oxfordshire, including rural digital access and cost



You can read our recommendations in full in our report – see the link below.

What happens next?

We have sent our report and recommendations to the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) and other health leaders in Oxfordshire.

We will continue to share what you told us about using the NHS App with health and care decision-makers in Oxfordshire.

Thanks to everyone who shared their views with us!

You can read our report in full by scanning the QR code or at www.healthwatchoxfordshire.co.uk/nhs-app



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- **Enter and View Visits**

We have statutory powers under the Health and Social Care Act 2012 to make **Enter and View** visits to publicly funded local health and social care services. The aim of these visits is to identify what works well and what could be improved to make people's experiences better. Since the last meeting we made Enter and View visits to the following services:

- Breast Imaging Unit -Churchill Hospital
- Children's Ward – Horton Hospital
- Wintle Ward, Warneford.

We published the following **Enter and View report:**

(<https://healthwatchoxfordshire.co.uk/our-work/enter-and-view/>) on our observations from visits to the following services:

- Well Pharmacy, Marston (October 2025)

All published Enter and View reports and actions from providers are available here:

<https://healthwatchoxfordshire.co.uk/our-work/enter-and-view> including impact <https://healthwatchoxfordshire.co.uk/impact/impact-of-our-enter-and-view-visits/> and information <https://healthwatchoxfordshire.co.uk/wp-content/uploads/2024/01/Enter-and-View-easy-read-information.pdf>

Healthwatch Oxfordshire Webinars: Since the last meeting we held two public webinars:

- September on the '**NHS Ten Year Plan**' with speakers from BOB ICB attended by 60 people.
- October on **Cancer Care** and support with speakers from Maggie's and Thames Valley Cancer Alliance.

To see our webinar programme, zoom links and recordings of all past webinars:

<https://healthwatchoxfordshire.co.uk/news-and-events/patient-webinars/> All welcome.

Our **next webinar** will be on:

- '**Neighbourhood Health**' **Tuesday January 20th 2026. 1-2pm.** Zoom link via above.

Our ongoing work includes:

- A focus on hearing from people about views on **end of life care**, <https://healthwatchoxfordshire.co.uk/have-your-say/complete-a-survey/> with online survey supplemented by focused outreach. Working alongside Oxfordshire Palliative Care network and others.
- In Quarter 2 we engaged directly with approximately 506 people across the county through attending events, hospital stands, community gatherings and play days and Patient Participation group meetings.
- Additional funding with OCC (Oxfordshire Community Research Network) to undertake community led development of a toolkit for community researchers in Oxfordshire. This takes place from Sept-Dec via 4 workshops to co-produce the materials. Over 20 people attending from grassroots groups in Oxfordshire's priority areas.
- Community research including, focus on hearing from families living in temporary accommodation, members of the Chinese community.
- Working with Sunrise Multicultural Centre with a focus on cancer awareness, and bringing in Breast Nurse to speak with the women's group.

3. What we are hearing from the public:

Along with our themed research above, we hear from members of the public via phone, email, our advice and signposting, and online feedback on services (see here for reviews and to leave a review <https://healthwatchoxfordshire.co.uk/services>), We also hold conversations when out and about on street, in community settings, with patient and VCS groups and services. This enables us to raise what we are hearing, including emerging themes with health and care providers and commissioners.

The top three services we hear about are: GP services, outpatient services, and Muscular Skeletal services (Cora Health). Examples of comments include:

Arriving by ambulance at A&E after a serious fall out walking, my wife was admitted efficiently and without undue delay. I felt she was treated efficiently and with great consideration and understanding for her situation. She was in great pain following what was later diagnosed to be an upper limb fracture. The staff were incredibly kind and attentive to her needs as the diagnosis and treatment progressed. I felt it was an example of the NHS proving itself at its best. The experience demonstrated

to us both that the people of the NHS were exceptional people. (Online review. John Radcliffe)

I visited Henley MIU to have stitches for a laceration on my face. Nurse [name] and nurse associate [name] were both amazing. (outreach at Henley)

Henley MIU Nurse was efficient, friendly and gave me the time I needed. They explained how my wound was being treated and how I needed to care for it. I left reassured, clutching an NHS sheet on wound care, thinking how lucky I was. (outreach at Henley)

I have been waiting for an appointment for my knee since march of this year, every time it gets close to my appointment I get a message to say the that appointment has been cancelled, it's extremely hard to get through via the phone system... I am left in constant pain, my mental wellbeing is badly affected by this, I am struggling with my job and potentially my job is at risk due to lack of action from Cora Health, they simply are not fit for purpose! (online review Cora Health)

Months after leaving hospital, still waiting for a telephone assessment let alone treatment. Effectively no NHS physio after discharge. (online review Cora Health)

For one of the referrals they forgot to send a piece of paper so by the time I had the appointment it was out of date and I had to go back to the doctor. Then numerous appointments were cancelled. It's been confusing - I was given a phone appointment but then was given another one and told 'you can't have more than one appointment on the system'. I had an appointment yesterday which I'd been led to believe would involve an injection but in fact it was just an assessment and the next appointment isn't until after Christmas. (online review Cora Health)