

Future Patient Expectations: Beyond the NHS Plan

- This paper summarises the key insights from the MORI work conducted for the NHS Plan as they pertain to the Long Term Review of Health Trends
- This research informs the DoH internal work outlined in HTRAG(September)01.
- They have been selected with the following aims in mind:
 - To confirm narrative of patient perceptions of the NHS
 - To explore what quality means in the context of the NHS
 - To gain a broad understanding of how patients prioritise these quality factors
 - To understand what comparisons/ benchmarks people use to judge quality in the NHS

Background - MORI and the NHS Plan

- 4 focus groups conducted in December 1999:
 - 📅 2 groups held on 8 December in Bromley
 - 📅 2 groups held on 14 December in Stockport
- Group composition designed to reflect a mixture of ages, social classes, parental status, and recent NHS usage:
 - **Bromley 1:** BC1C2, Parents of children under 5 years, 50% recent users of the NHS
 - **Bromley 2:** C2DE, 55+
 - **Stockport 1:** 18-25 years, DE
 - **Stockport 2:** 35-49 years, AB, 50% parents of children under 5 years
- Issues arising from these initial focus groups was followed up by a quantitative survey among 1,000 adults in England and a further 2 focus groups (January 2000)

MORI FOCUS GROUPS

**Findings Relevant to the
Long Term Review of Health Trends**

Spontaneous Description of Actual NHS

Positive

- Glad it is there
- There when you need it
- Security
- Means well
- Emergency service is first class
- Better than most around the world
- Technology
- Clean
- Pleasant staff

Negative

- Crap most of the time
- Let us down a bit
- Bureaucratic
- Too much administration
- Tight fisted
- Red tape
- Over-stretched
- Waiting lists/times
- Cut backs
- Not enough staff
- Staff working too hard
- Not enough beds
- Under funded - not directed at right places
- Horrible food

Spontaneous Description of Actual NHS

- A key factor in support for the NHS, cited by all groups, is the peace of mind and sense of security that a universal system of care provision provides:

I like the security of the NHS. Despite the private insurance that I have, I like to know that it is there, and is a safety net, and it is always going to be there

Female, Stockport, AB

- Although many draw a distinction between different areas of NHS care:

Isn't it a fact that...the emergency service, when you actually really need it is second to none...it is the day to day running of things when you are waiting a long time

Spontaneous Description - Ideal NHS

- **There is a strong consensus among all groups: descriptions of the ideal service broadly reflect issues raised in describing the current service:**
 - 📖 **Shorter waiting lists/times**
 - 📖 **Prompt attention**
 - 📖 **More caring staff**
 - 📖 **Better choice - of when, where treated**
 - 📖 **More beds**
 - 📖 **Open closed wards**
 - 📖 **Similar standards of care as in the private sector**
 - 📖 **Increased funding**

Current Image

- There is broad agreement among all groups on the dominant images they have of the current NHS:
 - The NHS is
 - 📖 Approachable
 - 📖 Respected
 - 📖 Helpful
 - 📖 Conservative
 - 📖 Professional
 - But not ...
 - 📖 Forward looking
 - 📖 Efficient
 - 📖 Integrated
 - Mixed on whether ...
 - 📖 Complacent
 - 📖 Modern
 - 📖 Accessible
 - 📖 Friendly

Current Image

- There is a some sense that the NHS is improving - although this is not a universally shared view. For example:

Efficient

It's definitely getting better

Helpful

Yes, it is helpful. It does give you information, if you ask somebody they give you information or whatever

The staff try to be helpful. They can only do what they can with limited funds

Respected

For lots of countries it is the envy

Confidence

- **Most feel broadly confident in the NHS and are satisfied with the quality of care delivered by service providers - whether local hospitals, GPs or other non-hospital primary care groups - once they have “entered the system”**
- **However, there is a strong feeling that the system is not as accessible as it could be, or sufficiently flexible enough to deliver a fully patient-focused service:**

To get anything done on the NHS you have to be a pest. You can't wait for them

If you have a GP behind you, if you've got somebody, especially for children, they usually fit you in

Confidence

- The NHS compares unfavorably with the private healthcare
- Waiting lists and overall 'customer care' are cited as key reasons by those with experience of the private sector:

I have experienced private health care, because I was covered by my company...and the difference is amazing. I mean, you get seen when you want to get seen, and the actual treatment when you are there, I mean, it's polarised. It is all down to money obviously

Finance - Level of Funding

- **Opinion is divided on whether funding represents a key issue facing the NHS:**

I would say there is enough going in

Male, Stockport, DE

- **Among those who feel that funding levels are sufficient, there is a general feeling that bureaucracy and mismanagement are core problems facing the system:**

I think what we've got now is OK, but what it needs is to be run better. It's run appallingly, and it has been for years

I mean I don't know how much they've ploughed into it really, but I think there probably is a lot that goes into it, it's just really mismanagement

Finance - Taxation

- All groups claim to support increases in taxation - as long as it leads to increased NHS spending - although the view is slightly more predominant among social class ABC1 than C2DE:

But I would, honestly, If they said to me "You pay an extra pound per week, but every pound you pay will go to the Health Service", I would

John Bromley, BC1C2

I think if they are going to increase taxation specifically for the NHS I think I would be happy to do that, but if they were going to increase it generally to do lots of things then I think I would want a bit more of a say in it

Finance - Private Healthcare

- **Opinion is divided on the effect and desirability of such a change in the NHS. Some feel that it would improve the quality of service provided by the NHS, as well as reduce waiting lists:**

If people who could afford to pay BUPA did pay for BUPA, then we would have a lot more for us people that couldn't afford to pay for BUPA

Steve Stockport, DE

- **Many are, however, opposed - feeling that it would undermine the principal of universal coverage, erode their sense of security, and lead to increased social injustice:**

They are going to get better attention again.... Money always comes in to a situation, doesn't it? They can afford it so they are going to see the consultants first, and we'll be left behind again

Key Performance Indicators

- **More staff - nurse, doctors, technical - not admin/management**
- **Better pay and terms/conditions for “front line” staff**
- **Staff safety**
- **Increased funding**
- **Reduce waiting lists**
- **Shorter waiting times**
- **More beds**
- **Open wards that have been closed**
- **Cleaner facilities**
- **Effective health promotion**
- **Better communication between departments and care groups**
- **Cancer research**
- **Better quality food**

NHS Staff

- Staffing is identified as a core priority by all groups
- This reflects a perceived link between staff issues and the quality, efficiency and effectiveness of service deliveries:

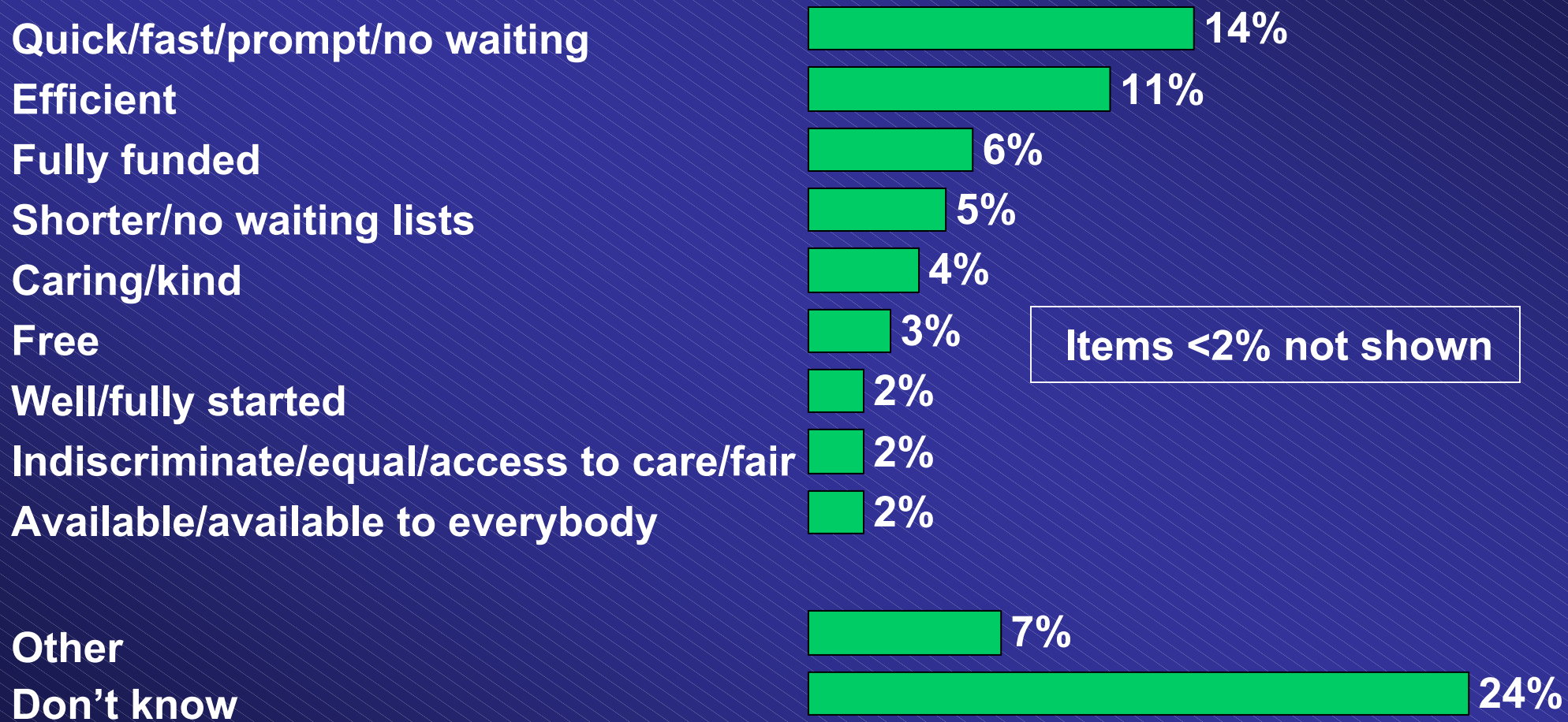
There is a knock on in the system. Because if they are better paid you can get a better service, if they are happy

MORI SURVEY

**Findings Relevant to the
Long Term Review of Health
Trends**

Ideal NHS - Spontaneous Descriptions

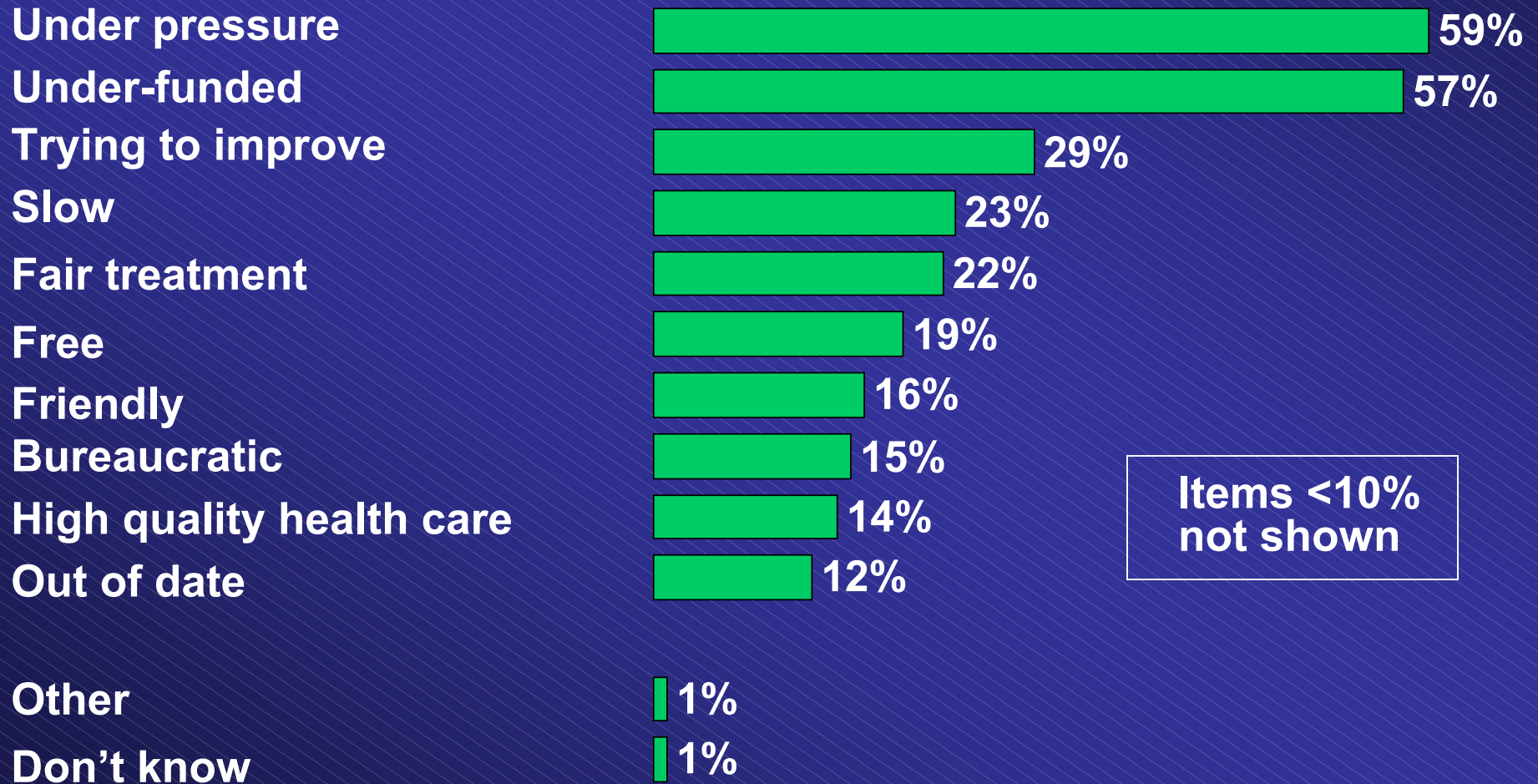
Q4 And what three words would you like to describe your ideal NHS?



Base: 1,046 adults aged 16+, living in England, interviewed 14 April - 7 May 2000

Actual NHS - Prompted Descriptions

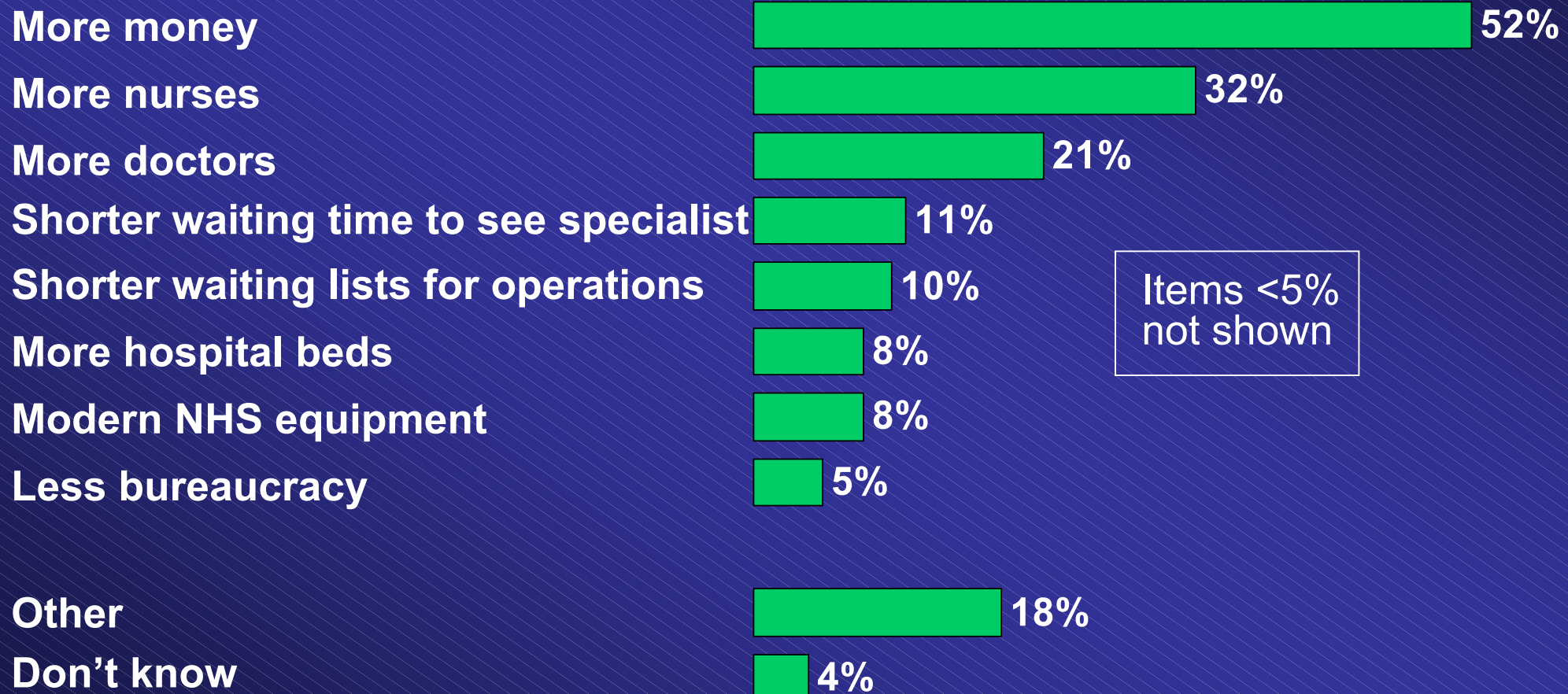
Q5 *From what you know of the NHS, and all of the services it provides, which three words or phrases best describe the NHS for you?*



Base: 1,046 adults aged 16+, living in England, interviewed 14 April - 7 May 2000

Getting Better - Key Reasons

Q8b Why do you think it will get better?



Base: All expecting the NHS to get better (486)

Getting Worse - Key Reasons

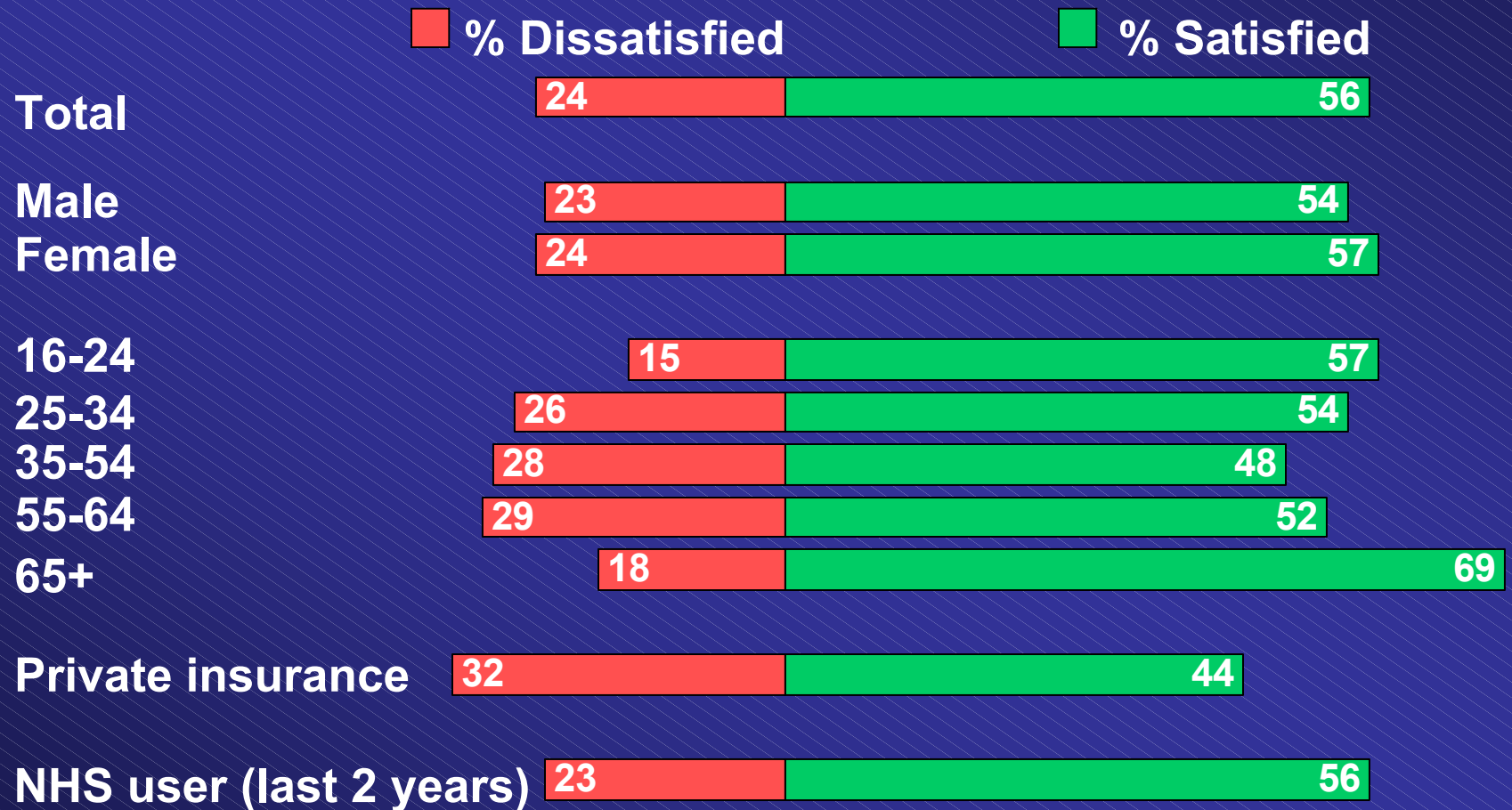
Q8c Why do you think it will get worse?



Base: All expecting the NHS to get worse (235)

Levels of Satisfaction

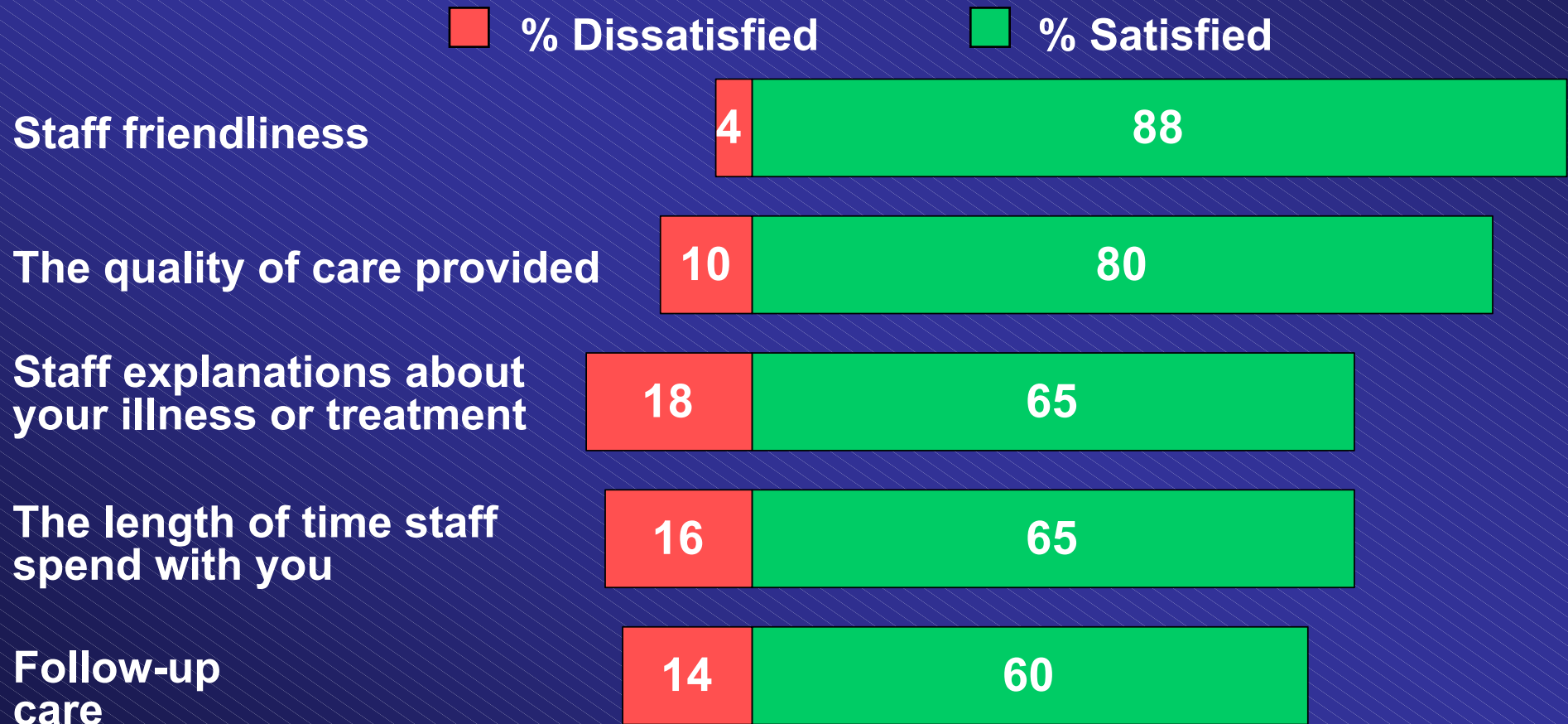
Q1 Overall, how satisfied or dissatisfied are you with the running of the National Health Service nowadays?



Base: 1,046 adults aged 16+, living in England, interviewed 14 April - 7 May 2000

Quality of Care

Q14 Thinking now about treatment you have received when you last stayed in hospital, to what extent were you satisfied or dissatisfied with each of the following aspects of the NHS?



Base: All who have been an NSH inpatient in the last 2 years (234)

Hospital Services and Facilities

Q14 *Thinking now about treatment you have received when you last stayed in hospital, to what extent were you satisfied or dissatisfied with each of the following aspects of the NHS?*

■ % Dissatisfied ■ % Satisfied

Overall appearance and cleanliness of hospitals 17 69

Facilities for patients, such as shops, hairdressers, telephones, books and TV 11 61

The quality of hospital food 34 47

Public transport to and from the hospital 22 29

Car parking 47 27

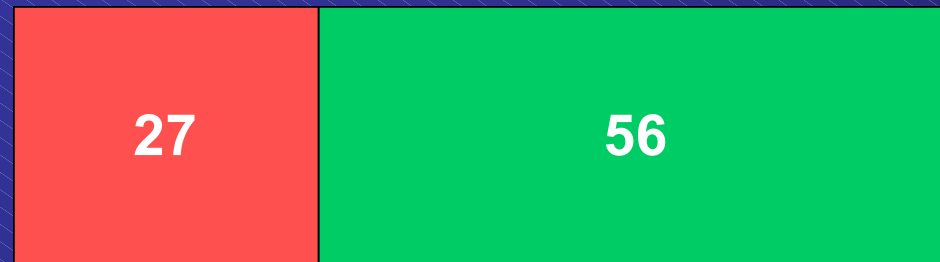
Base: All who have been an NHS inpatient in the last 2 years (234)

The NHS as a Service

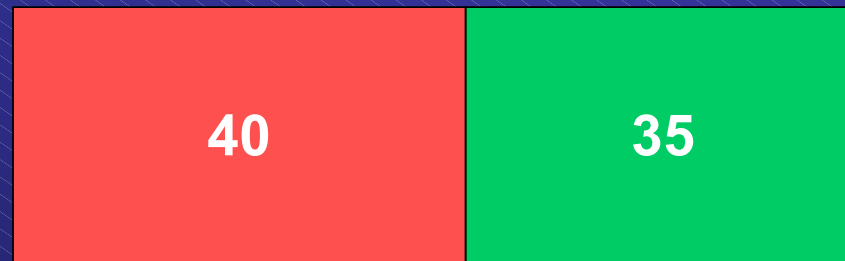
Q29 *To what extent, if at all, do you agree or disagree with the following statements?*

 % Disagree  % Agree

The NHS is failing to provide a satisfactory service for the British public

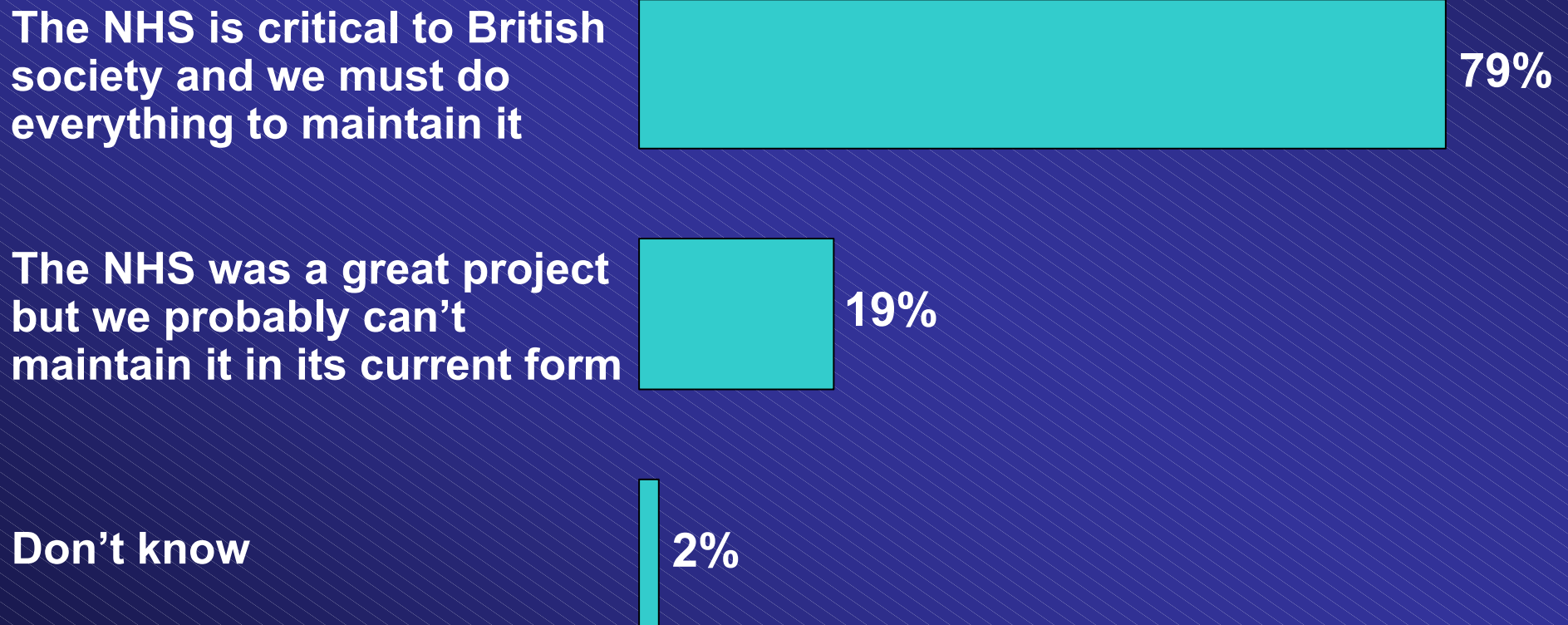


The NHS is failing to provide me with a satisfactory service



The NHS as a Project

Q24 *And which of the following statements best reflects your thinking about the NHS?*



Base: 1,046 adults aged 16+, living in England, interviewed 14 April - 7 May 2000