

Health and Community Care Research Programme

Public Attitudes to the National Health Service in Scotland – 2004 Survey

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In order to inform health care policy, the Scottish Executive commissioned NOP Social and Political to carry out a survey of public perceptions and experiences of the NHS in Scotland. The survey explores public attitudes to modernisation of the NHS to bring about increased access, choice, public involvement and responsiveness.

Main findings

- The survey found high levels of patient satisfaction (c.90% very or fairly satisfied) for key NHS service areas. These figures are at least as high as those found in a survey of public attitudes to the NHS carried out in 2000 and significantly higher for primary care and inpatient services.
- Despite high levels of satisfaction with services, among the sample overall, while 45% thought the NHS had stayed about the same over the last few years, more people thought it had got worse (27%) than better (20%). However views were more optimistic for the future with 39% overall expecting improvements over the next few years while 23% thought things would get worse.
- Awareness of a range of new or modernised NHS services varied with most people (69%) having heard about day admissions and 56% about Out-of-hours services, however awareness was lower for initiatives designed to extend patient choice, such as patient-focused booking (30%).
- Although most patients thought that physical access to key services was very or fairly easy, many also thought there was room for improvement of car parking, availability of suitable appointment times and ease of getting through to health professionals by telephone. Patients also identified a need to improve the speed of receiving test results from out of hours, outpatient and inpatient services.
- Most patients saw or spoke with a member of the Primary Health Care Team within 48 hours of first contact, 59% waited up to two months for an outpatient appointment and 62% waited less than three months for hospital admission. Satisfaction was strongly linked to waiting times.
- A minority of patients (circa 25%) discussed options for the location of outpatient appointments and inpatient admissions and these patients were generally aware that they might get a choice of date or time. Those offered choice tended to be more satisfied with the service they received.
- Most patients who wanted to give positive feedback about the service they received (14%) did so (10%). Although 18% of patients wanted to give negative feedback, only 1% made an official complaint, although 6% made their views known informally.

Introduction

There have been substantial changes to NHS services in Scotland since *Our National Health: A Plan for Action a Plan for Change (2000)*, set out the Scottish Executive's agenda for modernisation with the aim of increasing access, choice, public involvement and responsiveness. In order to assess progress and identify areas for further action, NOP Social and Political was commissioned to conduct a survey of public perceptions and experiences of the NHS building on the survey conducted in 2000 to inform the Health Action Plan. A representative sample of 2,600 adults aged 16 and over was interviewed by telephone in March and April 2004.

Awareness and use of services

Respondents were asked about their awareness and use of a range of new or modernised NHS services. Awareness of services varied considerably with most people (69%) having heard of admission as a day case and the availability of other professionals trained to deal with a range of health issues (63%).

Just over half of the sample were aware that they could consult pharmacists for minor ailments (57%), of the availability of NHS 24 (53% overall with 57% in 'live' areas and 48% elsewhere), of Out-of-hours services (56%), and treatment as an outpatient rather than being admitted as an inpatient (53%). However, people were less likely to be aware of new initiatives designed to increase access and choice including telephone consultation (37%), nurse or pharmacist prescribing (34%) and patient-focused booking (30%).

Women and people from A, B and C1 households were more likely to be aware of these new or modernised services than the rest of the population.

Of those who knew about NHS 24, only 24% had called the service in the last 12 months while 40% of people aware of pharmacist consultations had used this service in the last year. Some 17% of people who had heard of getting prescriptions from someone other than a doctor had done so in the last 12 months.

In the 12 months up to April 2004, most (75%) of the sample had used at least one of the six NHS services examined in detail as part of the survey – the Primary Health Care Team (PHCT) at the local surgery (65%), outpatient services (34%), inpatient admission (17%), telephone consultation (14%), Out-of-hours services (12%) and home visits (9%).

Women were generally more likely than men to have used these services, other than outpatient and inpatient services. Younger men (under 35) were least likely to use NHS services.

Satisfaction with the NHS

The survey demonstrated very high levels of satisfaction among service users for each of the six key service areas explored, with about 90% of users very or fairly satisfied. This varied from 93% satisfied with their experience of the practice nurse to 86% satisfied with outpatient services. There have been significant improvements since 2000 for satisfaction with primary care and inpatient services. There was a clear correlation between shorter waiting times and higher satisfaction with services, reflected in the number of people who were very satisfied.

Levels of satisfaction with overall use of NHS services were slightly lower than for individual service areas. While 53-69% of those surveyed were very satisfied with individual service areas, only 37% were very satisfied with the NHS overall. Younger patients (aged 16-34) were the least satisfied and older patients (aged 65+) the most satisfied.

Among the sample overall, while 45% thought the NHS had stayed about the same over the last few years, more people thought it had got worse (27%) than better (20%). Views were more optimistic for the future with 39% overall expecting improvements over the next few years while 23% thought things would get worse.

Access to services

A key aim of modernisation of the NHS is to ensure that all patients get the right care, at the right time and in the right place. The drive to improve access to health care goes beyond better physical access to include telephone consultation and increasing the range of professionals who can provide services thereby reducing waiting times and increasing choice.

Most people found physical access to the six key services covered in the survey relatively easy, from 90% for the PHCT down to 79% for Out-of-hours, outpatient and inpatient services. While the oldest (75+) and youngest (16-24) found it easiest to access outpatient and inpatient services, those with disabilities or limiting illnesses and women of 65 and over found it most difficult to access local surgeries. Those

who found access easy were more satisfied with the services they received.

Most people referred by their GP for an outpatient appointment (59%) said that they waited less than two months from the referral letter. The majority of elective inpatients (62%) were admitted less than three months from joining the waiting list

Choice in health service provision

Most users of PHCT, home visiting and telephone consultation services saw or spoke with a health professional within 48 hours of making the request. Access to, and appointments with, primary care professionals are however determined by a range of factors including clinical need and patient preferences. Those requesting or accepting an offer of a telephone consultation waited less time than those requesting or being offered a personal appointment – 87% inside two days compared with 65% for those wanting to see their own doctor in person. However, the latter figure is around 10% higher than in the 2000 survey.

Of those referred by a GP for an outpatient appointment, 27% had discussed choice of location with their GP and most of these had also been informed about waiting times compared with those who did not discuss options. Similarly, 28% of those referred by a GP to an outpatient clinic were told that they might be offered a choice of dates or times.

While 37% of patients discussed the possibility of a choice of dates or times for planned hospital admissions with their GPs, only 21% discussed choice of hospital. Patients offered choice were more likely to be satisfied with the service they received.

Public involvement and responsiveness in the NHS

A wide gap remains between the level of influence people think they should have over how the NHS is run compared with perceptions of the level of influence they have in practice. Of those surveyed, 86% said that people should have a great deal or some influence while 73% felt the public had little or no influence. These findings are similar to those found in the 2000 survey.

A substantial minority of the sample (32%) wanted to pass on comments about the service they had received from the NHS. Although 18% of service users wanted to make a negative comment, only 7% actually passed on their views and 1% made a formal complaint. In contrast, 14% of users wanted to pass on positive views and 10% did so, mainly by thanking staff.

Where are improvements needed?

Some improvements identified in the survey applied across most parts of the NHS, while others were specific to individual services. In general terms, many patients said there was room for improvement in respect of some access issues: car parking, availability of convenient appointment times and ease of getting through to health professionals by telephone. Patients identified a need for improvement in the speed of receiving test results for out-of-hours, outpatient and inpatient service.

Other identified improvements to the NHS concerned communication issues such as being given information about treatment, encouragement to ask questions and the general usefulness of information.

Within primary care, people identified a greater need for improvements in all aspects of service when thinking about contact with another GP based at the practice, rather than their own doctor.

Conclusions

The survey shows that there has been progress in the modernisation of the NHS in Scotland – for example, patients experience faster access to consultations in primary care and higher levels of contact with a wider range of health professionals, notably Practice Nurses, are valued.

Satisfaction with NHS services is at least as high as in 2000 and in some cases has risen over the last four years. Importantly, there is a clear link between user satisfaction and some of the key concepts of modernisation, especially shorter waiting times and the extension of choice. There is scope for improving both awareness and implementation of initiatives to extend choice. A wide range of initiatives has been introduced or rolled out since April 2004 and this survey provides a baseline against which to measure progress in the future.

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