

Health and Community Care Research Findings No. 2

Public attitudes to the NHS in Scotland

MORI Scotland and System Three

Against a background of change in the NHS and to inform the preparation of the Health Plan for Scotland, the Scottish Executive commissioned MORI Scotland and System Three to carry out a survey of public perceptions and experiences of the NHS in Scotland.

Main Findings

- When asked about their perceptions of change in the NHS, roughly half those interviewed thought it had stayed 'about the same', but more thought it had got worse than improved. There was more optimism about the future, with almost half thinking it will improve over the next few years.
- Levels of overall satisfaction with the quality of service received were generally high – ranging from 81% ('very' or 'fairly' satisfied) in relation to admittance to hospital as an inpatient, to 91% in relation to receipt of home care.
- People were generally very positive about many aspects of the care they received and, in particular, about the way their consultation was handled and the overall environment in which it took place. Assessments of service provision were relatively less positive in relation to issues of convenience, information and communication.
- There was some gap between what the public wanted and what it experienced in relation to waiting times for appointments for GP and outpatient services. For outpatient care, 84% of patients wanted an appointment within 2 months or less compared to 67% who reported getting an appointment within this period. For GP services, 77% of patients wanted an appointment within 2 days against 52% who reported getting an appointment within this timescale.
- Improvements in the service were considered "essential" or "important" by between 20% to 48% of users. Key areas of improvement were the provision of better information (including test results), faster and more convenient appointment times, more time with service professionals, more convenient access by car or bus and the provision of child friendly facilities.
- The young were consistently less positive than the old in their assessments of service provision and quality. A further significant predictor of dissatisfaction was the length of time spent waiting for treatment.
- Just under 1 in 4 (23%) NHS users in Scotland have made or have wanted to make a complaint about the service they received. 5% actually went ahead and raised an issue or made a complaint. Of these, around half were dissatisfied with the process and a similar proportion with the outcome. Reasons for dissatisfaction with the outcome included 'nothing being done' or 'not enough importance being placed on the issue'.
- The main barriers to complaining, for the 18% who wanted to complain but did not, included a feeling that 'it would not make a difference' (38%) and that 'they did not want to make a fuss' (20%).
- While at the moment, 57% of NHS users believe that they have 'little' or 'no' influence over the way the service is run and priorities are set, 93% believe the public should have an influence (64% a great deal of influence).

Introduction

Against a background of change in the NHS and to inform the preparation of the Health Plan for Scotland, the Scottish Executive commissioned MORI Scotland and System Three to carry out a survey of public perceptions and experiences of the NHS. To do this, a representative sample of 3,052 adults was interviewed by telephone during the period 28 September to 22 October 2000.

General attitudes

When asked whether they thought the NHS had got better, worse or stayed the same over the last few years, roughly half (48%) thought it had stayed 'about the same', but more thought it had got worse (30%) than improved (14%).

There seems to be a degree of optimism, however, about the future, with 44% thinking the NHS will become 'much' (14%) or 'a bit' better (30%) over the next few years. Men, those in the youngest (16 to 24) and oldest (65 plus) age groups, and those in social class DE are most likely to be optimistic about the future of the NHS.

Roughly 8 people in 10 (79%) had used one of the four NHS service types asked about during the previous 12 months: 74% had seen a GP; 34% had visited an outpatient clinic; 14% had been admitted to hospital; and 10% had received care at home. Women are more likely than men to have used each individual type of service and to have used more than one type of service. Overall, one person in seven (14%) had used at least three types of service.

Contact with services

Visiting a GP

There was a high level of use of GP services across the population as a whole, with 74% of people saying they had visited a GP's surgery during the previous 12 months. Roughly 1 in 4 of those (23%) described their visit as 'urgent'.

Transport and access issues did not appear to pose major problems for most people. Half (46%) said that they lived within a mile of their GP surgery, while a further 28% lived less than two miles away, and most people felt it was either 'very easy' (66%) or 'fairly easy' (28%) to get to the surgery. The main reasons given for difficulty in getting to the surgery were illness or injury and poor public transport.

Roughly half those who had visited their GP (53%) were able to get an appointment within two days, with a further third (31%) having to wait between 3 and 7 days. One person in seven had to wait more than a week to get an appointment (14%).

While waiting time at the surgery does not seem to be a significant problem for most people (70% waited no more than 15 minutes before being seen), 7% waited half an hour or more and this seems to be an important factor in driving dissatisfaction with the overall service.

Respondents' assessments of service provision and quality of care were generally positive, with between 49% and 90% rating the service as a 4 or a 5 on a five-point scale (where 5 equals 'excellent'). In relation to general service provision, straightforward environmental factors (such as cleanliness or availability of toilets) scored more highly than those relating to convenience (for example, of parking or appointment times). In relation to care provided, the items which scored highest related to the general way in which the consultation was handled (e.g. 'being treated with respect'), while those which scored lowest related to issues of information and communication and the amount of time available for the consultation.

These assessments of service quality were broadly reflected in priorities for improvement, with items rated low in terms of quality generally being identified as high priorities for improvement. On both assessments of quality and of priority for improvement, there was a clear age effect, with younger people less likely than older people to rate service quality highly and more likely to place a high priority on improvements.

Overall, over half those who had visited their GP (54%) were 'very satisfied' with the service they received, while a further 36% were 'fairly satisfied'. Again, age emerged as an important predictor, with older people generally exhibiting higher levels of satisfaction, as did the length of time spent waiting at the surgery.

Receipt of home care

One in ten (10%) had received care at home during the previous year from either a GP, health visitor or district nurse. In all age groups, women were more likely than men to have received home care, and older people were more likely than younger people to have done so.

Roughly half (55%) were visited on the day they sought an appointment. One in five (20%) said the visit was routine and no appointment was needed.

Ratings of service quality and care for home visits were even more positive than for visits to a GP surgery, with scores of 4 or 5 (5 being 'excellent') from between 62% and 91% of those interviewed. Issues of convenience, information and communication again attracted lower ratings than those relating to the general way in which the consultation was handled.

Overall, 67% of those who had received a home visit reported they were 'very satisfied' with the service provided, while a further 24% were 'fairly satisfied'.

Visiting an outpatient clinic

Roughly a third of those interviewed (34%) had visited a hospital outpatient clinic during the previous 12 months. Women were more likely than men to have had an outpatient appointment, and older people more likely than younger people.

Six out of ten (59%) of those who had had an outpatient appointment said they lived within five miles of the clinic, while a further 17% said they lived between five and ten miles away. Roughly one person in eight (13%) said they found it either 'very' or 'fairly difficult' to get to their last appointment, with the main reasons for this being 'poor public transport' and difficulty with car parking.

Appointment times do not appear to be a problem for most people (42% saying the clinic's hours were 'very convenient' and 45% that they were 'fairly convenient'). Younger people and those in full-time employment were more likely to feel that opening hours were inconvenient. Of those whose most recent visit to an outpatient clinic had been a first appointment arranged by a GP, half (49%) had waited a month or less, with a further 18% waiting between one and two months. One in five waited three months or more. By contrast, when asked what they felt was an acceptable waiting time for an outpatient appointment, three-quarters (73%) felt they should be able to get an appointment within a month and only 2% felt it was acceptable to wait three months or more.

Again, general 'environmental' factors were rated highly in assessments of service provision, while issues relating to convenience and to the availability of child-friendly facilities scored less highly. In terms of the quality of medical care provided, the general way in which the consultation was handled was again rated highly, with issues of information and communication rated less highly. The speed with which test results were received emerged with the lowest rating. These assessments were reflected in the importance attached to improvements in different aspects of service provision and care.

Overall, half of those who had visited an outpatient's clinic (50%) said they were 'very satisfied' with the quality of service they received, while a further 34% were 'fairly satisfied'. The key factors driving overall satisfaction appear to be age and the length of time spent waiting at the clinic.

Being admitted to hospital

Overall, 14% of those interviewed had been admitted as an inpatient during the previous 12 months. There was no significant difference between men and women in this respect.

Of this group, 62% described their last inpatient stay as 'urgent'. Roughly a third (37%) had stayed in hospital for only a day, 36% stayed for between two and seven days and 26% stayed for longer than a week.

Three quarters (74%) lived within ten miles of the hospital, while a further 18% lived between 5 and 10 miles away. Most felt it was either 'very' (50%) or 'fairly easy' (35%) to get to the clinic.

Eight in ten (80%) said they had waited less than three months to be admitted. This compares with 86% who felt that three months or less was an acceptable time to wait to be admitted.

The aspects of service quality rated highest again related to the general environment (e.g. availability of toilets, standard of cleanliness), while those given the lowest ratings related to the choice or quality of food. In terms of assessments of clinical care, in addition to the now familiar issues of information and communication, arrangements for discharge, speed of receipt of test results and the amount of time available from clinical staff attracted the lowest ratings.

Levels of overall satisfaction with inpatient stays are comparable with those for outpatient appointments, but lower than for contact with GP services or home visits – half of those who had been admitted to hospital (50%) said they were 'very satisfied' with the service they received, while 31% said they were 'fairly satisfied'.

Consultation

Around half of those interviewed (57%) felt that the public has 'very little' or 'no influence at all' over the way the NHS is run and how it sets its priorities. To set this in context, people are slightly more likely to feel that the public has influence over their local council and much less likely to feel it has influence over the local water authority. However, more than nine out of ten people (93%) feel that the public should have

some influence over the way the NHS is run and how it sets its priorities, with 64% feeling the public should have a great deal of influence.

Feedback & complaints

Of those who have used NHS services during the previous 12 months, three-quarters (77%) say they are generally satisfied with the service received and have had nothing to complain about. Roughly a quarter (23%) feel they have had something they wanted to complain about, though only one in twenty (5%) have actually done so.

Despite their higher levels of use of NHS services, older people are generally more likely than younger people to be satisfied and less likely to have wanted to complain or to have actually complained. Those who describe their health as 'not good' or who have a disability are more likely to have had something they wanted to complain about.

One person in six (18%) said they wanted to raise an issue or complaint but did not actually do so. The main reasons given for not complaining were that it 'would not make a difference' or that they 'did not want to make a fuss'.

Of the one in twenty (5%) who did raise an issue, half made an actual complaint while the other half raised the issue informally. Two-thirds of the former (66%) and half of the latter (49%) said they were dissatisfied

with the way the issue was dealt with and similar proportions (60% and 45%, respectively) were dissatisfied with the final outcome. Moreover, on both these measures, there was a high proportion of people saying they were 'very dissatisfied'. The most common reason given for dissatisfaction was that 'nothing was done'.

Though a third (34%) thought their issue or complaint was handled fairly, half (53%) feel that it was handled unfairly.

Conclusion

The above findings provide a wealth of information into public perceptions and experiences of the NHS in Scotland. The overall picture is encouragingly positive, with satisfaction levels regarding the quality of the services received, high and consistent across the different types of NHS provision. In particular, the way the consultation was handled and the environment in which the consultation took place were rated highly by respondents.

However, the research also identifies possible areas for priority development in the NHS, such as better provision of information, faster and more convenient appointment times and more efficient systems to ensure quicker access to diagnostic and other test results. On a practical level, improvements in access to public transport and child-friendly facilities are identified.

If you wish further copies of this Research Findings or have any enquiries about the work of the Central Research Unit, please contact us at:

Scottish Executive Central Research Unit
Room J1-0
Saughton House
Broomhouse Drive
EDINBURGH
EH11 3XA
Email: cru.admin@scotland.gov.uk
Web site: www.scotland.gov.uk/cru

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