



**NHS User Survey
Results**
Conducted on behalf of
Oxygen Market Intelligence
Nigel Jacklin, May 2012



1 INTRODUCTION

This document presents the results of 20 semi-structured telephone interviews conducted amongst the general population regarding the service provided by the NHS. They are intended to illustrate one of the research approaches we use...short semi-structured telephone interviews using a succinct well designed set of questions. A sample of 20 (as used here) is sufficient to explore issues, develop an initial understanding and spot major trends. A sample of 50 allows more confident analysis and can identify major differences between sub-groups.

Interviews were conducted in early March prior to the House of Commons debate on the Health and Social Care Bill (which was voted in on the 20th March 2012). The table below shows the spread by age and gender which was deliberately skewed towards the older half of the adult population. All those interviewed had been to their GP practice in the last 6 months; half had also been to hospital and half also helping to look after other family members who are on medication (including older relatives in care).

Under 45	45-64	65+	Female	Male
4	8	8	14	6

A summary is given on this page followed by full results. *Our commentary is in italics.*

2 KEY FINDINGS

High levels of importance are placed on most aspects of the service provided by the NHS; as an organisation it is regarded as of utmost importance and people's experience of it is generally appreciative. Nevertheless there were two areas where the service came in for some criticism:

- Many had difficulty making an appointment to see their GP (both in terms of the process required to make the appointment and getting to see the individual GP with whom they are registered)
- Several had concerns about getting the correct diagnosis or being able to follow the treatment prescribed...just under half (9 respondents) expressed concern in this area ranging from anger at misdiagnosis to fragmented care and the need for four consultations to get a correct diagnosis (see commentary below).

In terms of awareness of Health and Social Care Bill and likely changes to the way the NHS is organised, despite extensive media coverage during the fieldwork period, many were unfamiliar with the specifics of the changes; most of those who were aware of specifics thought that GPs would have more power or responsibility.

With approximately 300 million general practice consultations per annum it is difficult to do justice to the scale of the NHS service with just 20 interviews. Nevertheless this exploratory project suggests that the debate over the future of the NHS risks being dominated by the politicians and the profession, missing the opportunity to engage with potentially widespread public concerns over effective diagnosis and consistency of care.

The full results are provided on the following pages. To discuss this or other research please contact:

- Nigel.Jacklin@ThinkMediaConsultancy.com 0788 777 6491
- Peter Welland (Peter@OxygenMI.com) 0118 988 9309

3 AWARENESS OF CHANGES TO NHS

When asked what they had heard about proposed changes to the NHS the sample split three ways:

- 9 were not aware of anything or had heard something but could not remember the details
- 6 cited specifics relating to GPs taking on more responsibility
- The rest (5) gave a range of other answers including patient choice, having to pay for services and discontent within the profession.

Gender/Age	Are there any changes you are aware of...what have you heard recently?
	GP's Taking on More Responsibility
Male 25-34	All about GP's choosing all the services...i.e. being responsible for what the patient needs
Male 55-64	Only that on the news they want to delegate more accountability to local practice Doctors and Nurses
Male 55-64	GP's are going to take over a lot of duties that the PCT used to
Female 75-84	The idea sounds good in principle...particularly GP's having a high involvement in getting treatments and organising them for their patients...but how can they manage to do their job and all that extra work...My Chief GP...one of four at surgery...if he has to go to a committee with other Doctors and work out whether to use local hospital etc...it's too much for one person and the treatment of ordinary patients will suffer
Female 55-64	All to do with doctors having more control...very difficult to have a measured opinion...different levels of satisfaction in different areas of Southampton...it's fine where we are
Female 65-74	Doctors to have more responsibility in whether you can go here or go there. Lots of fighting and debate...I fear for the poor doctors...I wish I knew more...am sure we'll all be affected...doctors are supposed to care for us in terms of medicine...now asking more of them...hard pressed as it is
	Other Specifics
Female 55-64	Isn't it something like you don't have to stay within your own area...if you need treatment you can ask elsewhere if the waiting list is shorter
Male 35-44	Trying a revamp...I don't know all the changes...people in the medical profession not happy with Andrew Lansley's views
Female 45-54	Not up to date with it at all...just re privatising parts of it...a scary thing. Changes...don't make them...worried it may disappear and we'll all have to pay...bottom line
Female 65-74	Only that the GP's get an enormous amount of money for putting through patients...some of them they do not even see
Male 25-34	I think it was something about students having to pay for NHS stuff

4 CHANGES OR IMPROVEMENTS

When asked an open and unprompted question regarding changes or improvements they would like to see to the service five gave purely positive answers, with no criticisms, including the three quotes below, one had no comment:

“Quite happy.”

“Fortunately I have not had to use a great deal...in my limited experience I would say it works well.”

“It is difficult for me to be honest...it's all been 100% in my experience...no complaints whatsoever...back up has been great...nurses come to my house...appointments have been first class.”

The remaining 14 comments are shown below; all containing some form of criticism or call for improvement. The most common themes were waiting times and ease of access to your GP (mentioned by 6) the remainder giving a range of answers relating to the quality of care and how the service is organised reflecting the complexity and breadth of the service.

	Regardless of any current or proposed changes, what changes or improvements would you like to see to the service you receive from the NHS?
	Waiting Times
Male 25-34	Reduced waiting times.
Female 45-54	That is hard to put into context after the previous question...I'd rather have it as it is, or I suppose, shorter waiting times for seeing specialists.
Female 65-74	Making appointments more flexible and easier to book. With some surgeries you cannot see a Doctor for a few days, unless it is urgent. Also I was at a friends who has a broken ankle and it was getting hot on one side...called the Doctor and he just suggested keeping an eye on it. In past times she would have got a home visit...she's immobile.
Female 55-64	Probably cut down on waiting times...hospitals and surgeries.
Female 35-44	Improve waiting times in terms of appointments at hospital.
Female 75-84	I would like to see my own doctor quicker. If you allow a week to a fortnight you can...otherwise you wait a week to a fortnight.
	Other
Female 55-64	In hospitals...more privacy and better food.
Male 35-44	Run more effectively...money going to the right places.
Female 75-84	In my personal opinion, I'm in my eighties...many people live into their nineties...many men suffer from prostate cancer and unless help is available at home, how can we look after them?
Male 25-34	Free dentistry and free medication if needed.
Male 45-54	The left hand talking to the right a bit better...and a holistic approach. Surgeons talking to Doctors and clashing on best method, i.e. Surgeon wants to cut you open and Doctors want to pump you full of drugs.
Male 55-64	I think I'd like to see more of the sort of tests you have at hospital/outpatients to be conducted closer in the community...more full time GP's as opposed to less...leads to fragmented care. Very concerned about the changes, I think it is a bad idea. Even healthcare professionals do not understand the highly complex bill...people are unaware of how the changes are likely to affect them. My own GP has enough trouble looking after his own patients, let alone managing budgets.
Female 55-64	I would like some doctors to look at a patient and see them as overweight...look into the problem...don't go with the first thing that comes to mind.
Female 65-74	I just had the best treatment I could possibly ask for. On a personal level they saved my life...am eternally grateful. Changes...I suppose staff shortages and a lot of money is wasted...could be more efficient. One of my concerns is the way the elderly are handled and treated in the years to come.

5 IMPORTANCE AND RATING OF THE SERVICE

After the open (introductory) questions we asked how important nine aspects of the NHS service were and how satisfied people were with each of these. The results are summarised in the table below. The following pages give quotes showing individual concerns.

Importance

The table below shows the nine aspects in rank order of importance, diagnosis and correct treatment (for themselves or others) coming top...in 49/50 observations these aspects were regarded as very important. Always being able to see the same Doctor at your GP practice and being able to choose which hospital you go to were rated least important (half saying they were only fairly or not very important).

Satisfaction

Overall, in 50% of cases, people were very satisfied with the aspects of the service which were important to them. In 40% of cases they were fairly satisfied, 10% not very satisfied. Satisfaction for the most important area (being confident you are receiving the correct diagnosis) was marginally lower than average, 11 being fairly satisfied (9 very satisfied, one not answered).

The two areas with high levels of dissatisfaction were 'always being able to see the same Doctor when you go to your GP practice' and 'being able to get to and from hospital' (each having 4 people saying they were not very satisfied).

Individual Comments

As can be seen from the following pages people were most able to express their frustration with the difficulties faced getting an appointment; this may well be a common problem. Whilst other issues may be important (such as getting to and from hospital) the tone of comments suggest these difficulties tend to be less common or more accepted.

Of greater concern are problems regarding diagnosis and treatment. *Clearly this is a small sample, and results are therefore indicative, however, in discussing these findings we have come across anecdotal evidence suggesting many people have specific (perhaps one off) experiences of such problems. If this were a full scale survey this issue would clearly merit further investigation.*

Sample size: 20	Very Important	Satisfaction		
		Very	Fairly	Not very
Being confident you are receiving the correct diagnosis (i.e. being sure they have found out what exactly is wrong with you)	20	8	11	-
Being sure you are able to follow the treatment prescribed to you and that it will work	19	11	8	-
...and when you are caring for [other family members]...being sure they will be able to follow the treatment prescribed (Only asked where relevant...sample size 10.)	10	4	5	-
Getting an appointment to see a Doctor at your local practice at a convenient time or as soon as you need one	17	9	9	2
Being able to get to your local GP practice easily	16	13	6	1
Being able to get to and from hospital	15	8	7	4
Being able to choose the GP practice you are registered with	13	10	3	1
Being able to choose which hospital you receive treatment at	10	6	6	1
Always seeing the same Doctor when you go to your GP practice	9	6	6	4

5.1 INDIVIDUAL COMMENTS: KEY CONCERNS

The tables below show all significant comments on the 9 issues asked about at the previous question. As can be seen, whilst 11 people expressed concern about getting the correct diagnosis, few were able to express or substantiate this concern in detail. By way of contrast, they found it easier to express concerns about the (simple, operational) issue of getting an appointment.

Further research could explore the potential link between continuity of care and diagnosis...all four respondents who were 'not very satisfied' in terms of 'always seeing the same GP' expressed concerns regarding diagnosis or treatment.

Being confident you are receiving the correct diagnosis.	
Female 35-44	My partner has recently been diagnosed with Epilepsy...took a while for diagnosis...suffered other attacks while we were waiting...very worrying.
Female 45-54	I had an incident where they got it wrong...made me angry...but they generally get it right.
Female 55-64	Prescribed double...I recognised symptoms of Angina as a symptom of being over prescribed...saw doctor again and he put me on tablets for Angina. Took myself off double dose...symptoms remained...you have to persevere.
Female 65-74	Got to hope.
Male 25-34	No one ever really knows.
Male 45-54	Get departments to talk to each other, perhaps one person to orchestrate care...check out all the details...stay in touch with all parties and decide the next move.
Being sure you/other family members are able to follow the treatment prescribed to you and that it will work	
Female 45-54	Mixed experiences, generally all good, but a few exceptions.
Female 55-64	You are at the mercy of someone more qualified...you have to take it.
Female 75-84	You don't really know...have to wait a long time for specialist...also my husband states that he is not ill.
Male 45-54	Get the diagnosis right in the first place and the treatment should follow.

Always seeing the same Doctor when you go to your GP practice	
Female 55-64	Some doctors are not as well trained as others...you can ask to see the best one for your treatment.
Female 75-84	Varies every time.
Female 75-84	Can't always, I just see whoever is available.
Male 25-34	Been ten times in the last four years...saw a different Doctor every time.
Male 35-44	Never the same one.
Male 55-64	Have to give them time to arrange it.
Male 55-64	We have a lot of part time GP's...makes it even more difficult to see the same one.
Getting an appointment to see a Doctor at your local practice at a convenient time or as soon as you need one	
Female 55-64	Just if you work and take time off sick and ring the Doctors..."can you come next week"...by then I am back at work. You can try for a cancellation but it is not usually successful.
Female 55-64	Not easy with our system...have to call after a certain time...usually engaged for half an hour...eventually get through to find out there are no appointments left. It is hard to see anyone instantly...an appointment for two weeks time is only useful for longstanding conditions.
Female 55-64	If it is very urgent they will fit you in very quickly.
Female 65-74	Sometimes have to wait...in the main it is quite good.
Female 65-74	Because there is an 8-10 am window for appointments...when you eventually get through you find they are all full.
Female 75-84	I start calling at eight in the morning and when I eventually get through, the Doctor I want is fully booked already...they are so busy.
Male 25-34	If you want to see a Doctor, you have to call between nine and half nine...if you don't, you won't get an appointment.
Male 35-44	Not perfect but fairly easy.
Male 45-54	I have to call between 08.30 and 08.32 or something ridiculous.
Male 55-64	Our surgery operates a triage service...describe the problem to the Receptionist...she'll get the Doctor to call you back...rather difficult if you are the walking wounded...having to describe your malady in front of fellow office workers.

5.2 OTHER CONCERNS

The issues below had fewer comments of substance; all are shown below.

Given that flexibility to refer patients to the best hospital or clinic is an important part of the proposed changes to the NHS clinical commissioning groups may face some resistance from patients who prefer a local service and will need to consider how they make suitable transport arrangements.

Being able to get to your local GP practice easily
Quarter of a mile walk...if I feel unwell my son drives.
I don't drive...particularly important to be close.
I have to organise a community car, which isn't great.
Being able to choose the GP practice you are registered with
Only thing is I had a scenario where my doctor is retired and I was put on a list and ended up non registered mid treatment. I wrote a letter to complain...it was only for a short period.
Rather difficult to get an independent viewpoint on the quality of other practices.
Being able to get to and from hospital
Nearest hospital to us is ten miles away...our local is now a walk-in with no A and E.
You need to know someone who drives if you can't.
Being able to choose which hospital you receive treatment at
Got MRSA coming out of Wexham Park and the food was awful.
I would be guided by my GP.
If I cannot go to my local I will catch the bus to Brighton...there is no way I would drive and attempt to park there.
Leave it in the hands of the Doctor...where you should go for treatment...they know where the specialists are...I think it is funny that the public think that they know better.
There is a nearer hospital, but as it is not in our borough, I have to travel.

6 ADDITIONAL COMMENTS

When asked two further questions about changes/improvements and positive experiences there was an even balance between the two. All comments are shown in the table below.

And taking into account everything we have discussed, if you could change or improve anything about the NHS what would it be?

And can you give me any examples where you have found the NHS service particularly good...what has been positive in your experience? What should not be changed about the NHS?

	2 Changes or improvements.	3 Positive experiences.
Female 35-44	Waiting times at the hospital...very satisfied with GP.	In terms of emergency services with initial seizure...very good...very quick...ambulance and A and E were very brilliant. Changes...Probably the location and amount of hospitals and A and E services...if I had to go further that would be worrying.
Female 45-54	I guess still shorter waiting times. Treatment and diagnosis still not quite right, but I used to live in the USA and it is the same over there.	I had a polyp on my cervix, it was dealt with quickly and efficiently. Shouldn't privatise the NHS.
Female 55-64	I would like to see a full hospital nearer...only have outpatients in our own area...we have to travel for operations. Major bone of contention...every hospital near us is hard to park in and you have to pay...especially bad if visiting sick people...stops people staying longer with patients that probably need the company and support.	I had surgery and the surgeons were excellent. Changes...as long as we don't have to pay.
Female 55-64	Shorter waiting times at the hospital.	Very quick for diagnosis and treatment of my lung cancer. Changes...Shouldn't charge if they are thinking of it.
Female 55-64	Just cut down waiting times.	If I go to the Doctor with a problem, he'll refer me to hospital straight away. I cannot think of any changes.
Female 55-64	I think some of the elder doctors could go on a refresher course...perhaps some of the others too...kept more up to date...more emphasis on re-education.	If I actually had angina, it would have been discovered within a week, as an appointment was made very quickly. Keep local surgeries.
Female 65-74	Home visits by the Doctor when infirmed and an appointment system where you call on the dot of eight and end up on redial...redial...redial! Do away with managers and bring back Matron. I cannot stress too highly about hygiene. It is a positive thing but more and more needs to be done...I have seen nurses swabbing down equipment and things...stop MRSA and other bugs. I do think some contract cleaners have no consideration for patient's privacy and peace.	My investigations have always been okay.
Female 65-74	More efficiency...enough medical teams...deadlines (I know they are trying)...waiting lists for hips and other serious conditions to be sped up.	When I was rushed in (never been to hospital before) they saved my life...got on it...absolutely marvellous...I wrote to thank them. Changes...we all like to be seen and have treatment as is...we can do that...everyone treasures the NHS.
Female 65-74	The elderly should be treated better than they are now. It's not the nurses...the cutbacks affect us.	Nice to have it but it has gone downhill...not as good as it used to be. Changes...I don't know.
Female 75-84	No changes...satisfied.	Going to hospital and being well taken care of. No changes.

6 ADDITIONAL COMMENTS...continued

	2 Changes or improvements.	3 Positive experiences.
Female 75-84	I don't know...I suppose as they say on the telly; the staff could be more caring. I used to find the night staff a bit of a nightmare...can't get to sleep...ring the bell...no one comes...only two nurses for two wards.	I had knee surgery...went rapidly wrong...was no-ones fault. The back up was marvellous. I contracted MRSA and had no knee...was stuck in a chair. A pharmaceutical company from Hemel Hempstead came round with a fridge and medicines...they were brilliant...I did not know such a service existed (NHS paid)...a five year struggle to get better and I am there now.
Female 75-84	I just wish there was more help for people with Alzheimer's or Dementia. If they get aggressive at home you just have to put up with it...you cannot force someone into a hospital or home.	Four years ago, I had my knee replaced at a private hospital and it was good. Not long ago, I had a hip replaced at the local general and the treatment was equally as good. Changes...no comment.
Female 75-84	From my experience, it has been pretty satisfactory and I think it is silly (if I understand right) to lump GP's with extra admin...it will wear them out and take them away from their fundamental job.	There is a new localised hospital...it works nicely. Also if I have trouble with my hearing aid there is a centre I can drop into between ten and twelve, Monday to Friday...if you have a small query and are prepared to wait you will be seen. It is moving to a new location and I won't travel to it but I have been told that they can send me replacement batteries if I send my book in...that or go to Boots but they are free on the NHS.
Female 75-84	I suppose not having to wait so long...hip operation took so long. I would like it quicker but I am sure they try.	When I went to hospital I was quite satisfied with treatment. They did a good job on my hip. Can't think of any changes.
Male 25-34	Remove red tape for health workers...don't have a political agenda...literally just get on with the job, i.e. this person has 'X' and I need to do 'Y'. Get rid of middle management.	Most stuff has been positive. Access to the NHS should not be changed, in terms of we have easy access to it. We have overseas friends who visited the UK from Australia with a disabled child and commented...didn't put their hands in their pocket once in the UK for physio: back home they would have had to pay for everything.
Male 25-34	People who live in remote areas should be on a special postcode dependent line to figure out if they can be picked up or dropped off.	How quick they are to fit people in. A lot of people to deal with and they do it well. Dependant on how major your situation is, they will put you in front of someone less urgent.
Male 35-44	Have adequate staff to cope with people's needs.	When my mum was at Guildford Hospital they were very good...high blood pressure...transferred from St Peters. Changes...Should not be put into private hands.
Male 45-54	Better communication between departments.	It's free and generally good and we wouldn't be better off without it. They were really lovely around my dad's departure...got three kids...local walk in centre...been treated many times...free family planning.
Male 55-64	The ability for nurses to carry out routine tasks...bring Matrons back.	Nothing rolls off the tongue.
Male 55-64	More money into the NHS...particularly for NHS continuing care.	The ease of getting an x-ray...amazing...quick and very simple...go to GP, get a form and go to outpatients...all done in the same day (within minutes for me)...fantastic!

When asked a final question 'and is there anything else you feel is important which we have not discussed' a small number of additional comments were made, four relating to funding (keep it free 3 mentions, no private interest 1 mention), with two other comments (shown below).

I had 28 years living in the Channel Islands and you had to pay in for six months before receiving any treatment. If people are in hospital having medical treatment and normally have to pay for food at home...if they can afford it, perhaps they could pay a little towards hospital food...the elderly are living longer...perhaps if people put in a little money and they knew it was going towards a new scanner etc. perhaps they would not mind.	I recently heard on the news that foreigners can come across and get their treatment for diseases free of charge. It's going to encourage more people to come across and the pensioners including old soldiers and veterans will be pushed aside. It's not right, especially when they have paid into this country for so long.
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