

# Public Perceptions of the NHS and Social Care

An Ongoing Tracking Study Conducted for the  
Department of Health, December 2010 Wave

January 2011



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# Executive Summary

# 1. Executive Summary

## **Satisfaction with the NHS remains high, but some signs of erosion**

Satisfaction with the NHS remains high (70%). However, there are early signs that satisfaction levels are dropping, not precipitously, but certainly enough to warrant keeping a close eye on public perceptions over upcoming waves. While satisfaction is still higher than it was between 2000 and 2007, we have seen a statistically significant fall from 74% in March 2009 to 70% in December 2010.

This trend is also apparent if we take into account levels of dissatisfaction. The net score (the difference between those who are satisfied and those who are dissatisfied) fell from +61 in March 2009 to +59 in March 2010, and now stands at +56. Again, it is too early to be sure this represents a long-term trend, but this suggests careful monitoring will be required.

The drop in satisfaction seems to stem from perceptions among those who have not used the NHS within the last year.

## **Higher levels of optimism**

Despite the possible erosion in satisfaction, overall levels of optimism have increased (from 25% expecting the NHS to get better in March 2010 to 34% now). For the first time in five years, more people expect the NHS to get better than expect it to get worse. It is difficult to be certain what may or may not be driving this renewed optimism. It could be that the public are seeing the challenges facing the country comparatively and the message that the NHS will be ring-fenced from cuts has found an audience. In comparison to other public services the NHS is not facing severe cuts, and it may be this that is driving optimism.

## **Reaction to the Reforms**

It will be interesting to see what happens to this optimism in light of the proposed reforms to the NHS. In this wave we tested initial reactions to these reforms. It is important to bear in mind that despite current policy debates about the delivery of health services, these are primarily taking place between stakeholders rather than members of the general public. Indeed, as the data from this survey shows, very few people say they are well informed about the current changes being made to the NHS. Their attitudes towards the impact of these changes are likely to be heavily influenced by media coverage and hearsay. When asked what they think about the changes based on what they currently know, overall, more

people are negative than positive. People who can spontaneously recall policies tend to be more negative. However, when we tested specific policies reactions were more varied. People expect the greater involvement of GPs and the increased provision of care within the community to improve services for patients. It is associations between the reforms and cuts in frontline services and hospital closures that drive the overall negative expectations.

## Key issues to highlight

A trend to monitor is the public's perceptions of the timeliness with which they are likely to receive treatment and care. This wave records less positive expectations for waiting times for non-emergency treatment and care than has been seen in recent waves. With regard to the policy of encouraging greater patient involvement in decisions about treatment and care, there are very different views on the extent to which people want to be involved. The desire to make their own decisions about treatment and not rely on health professionals is not universally held. This is also reflected in the fact that many people still feel that GPs are best placed to understand which services their patients need.

## Care and support

There is a positive story around care and support with increased levels of satisfaction among users and increased levels of agreement that people are treated with dignity and respect when they use social care services. People are also generally favourable towards its co-ordination with NHS services and the delivery of tailored care. Agreement that the government has the right policies for social care has decreased since March 2010, however this is largely explained by an increase in the proportion of people who say they do not know whether the government has the right policies in place.

## Implications

It will be interesting to track public perceptions as the proposed NHS reforms are implemented, gain more media coverage and start to impact on patient care and experience.

From a communications perspective it would be useful to try and understand further what might be affecting any negative changes in perception. It will be important to:

- Explore what is driving perceptions of the NHS among non-users, as this will be key to understanding and addressing the early warning signs of a drop in satisfaction levels;
- Understand more about how communication of the different reforms is affecting attitudes towards them. For instance, messages about reforms giving greater

power to GPs and providing more community care could benefit from being separated out from messages about efficiencies;

- Be realistic about where the public are in wanting greater involvement in decisions about their treatment and care, as people do not necessarily see the merits of playing a greater role;
- Track reactions to the new questions introduced in this wave of the survey over the course of the next few waves.

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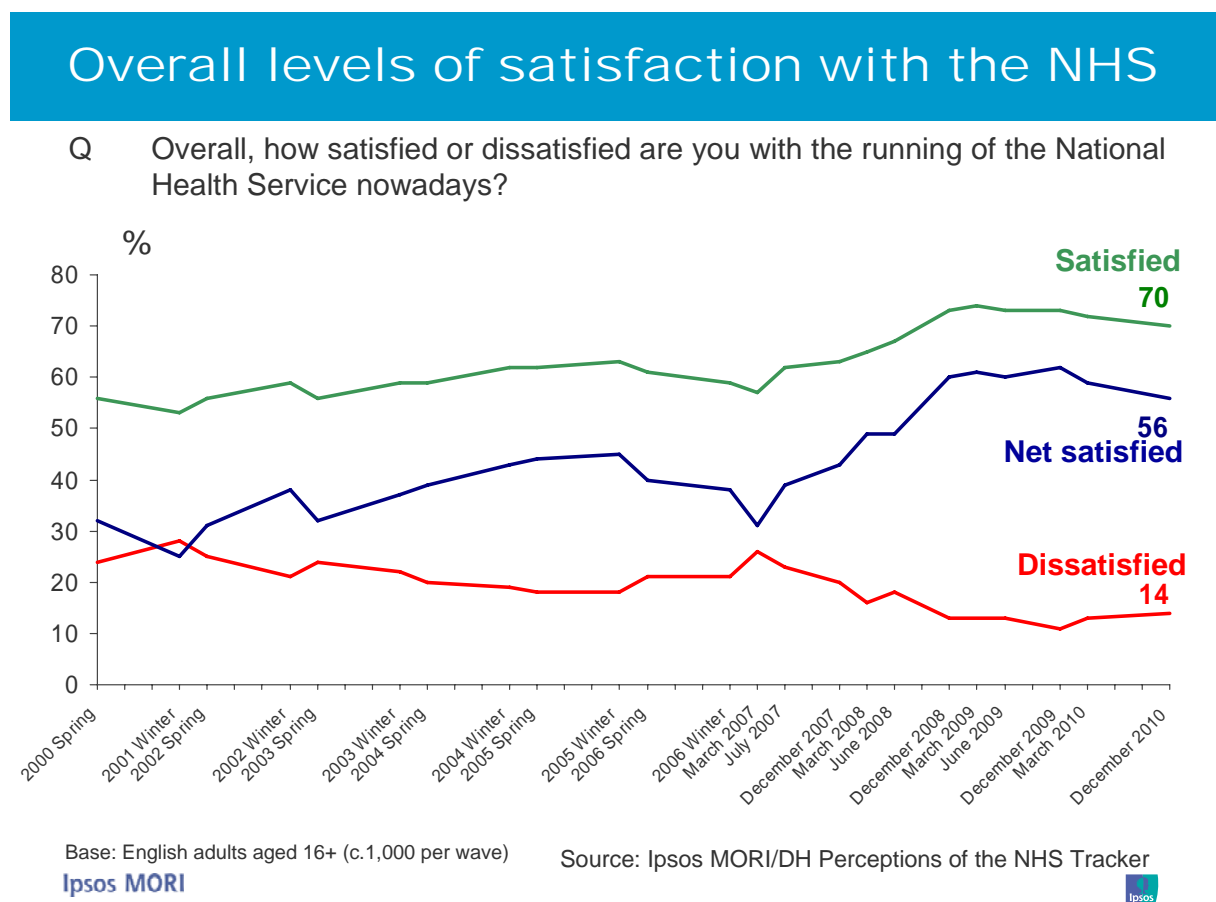
# Overall Satisfaction



## 2. Overall Satisfaction

### 2.1 Overall satisfaction with the running of the NHS

A large majority of the public are satisfied with the running of the NHS (70%). One in five people say they are *very* satisfied (20%) with the running of the NHS and only one in seven say they are dissatisfied (14%). However, satisfaction has dropped slightly since March 2010, returning to a level last seen in June 2008. It is too early to determine if this is the start of a downward trend but it is worth noting that the net satisfaction<sup>1</sup> figure has also dropped (from +62% in December 2009 to +56% now).



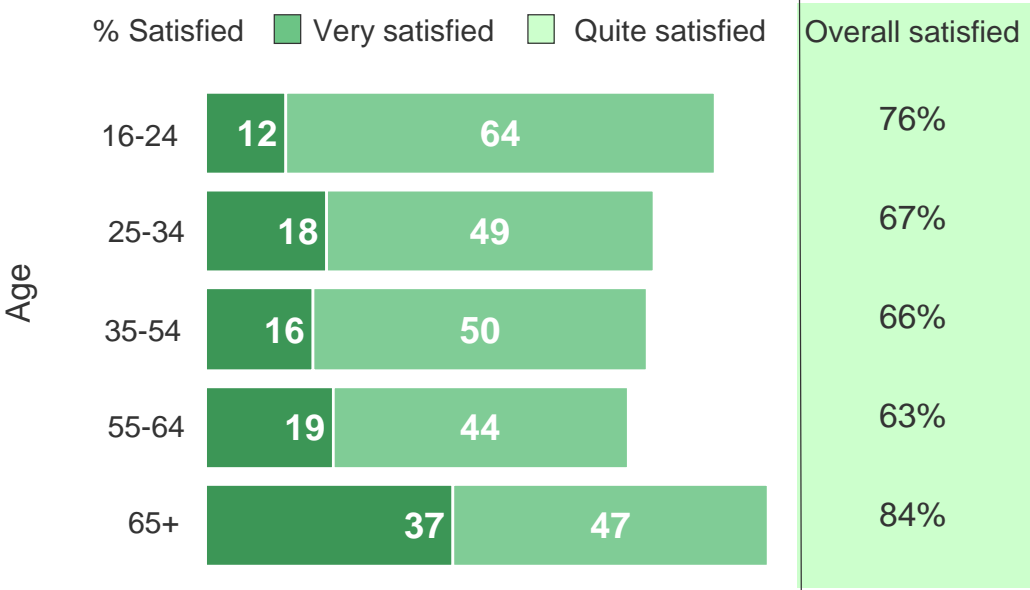
<sup>1</sup> Net satisfaction is calculated by subtracting the proportion of people who are dissatisfied from the proportion of people who are satisfied.

## 2.2 Differences in satisfaction with the running of the NHS

While people in different social grades have similar views of the NHS, there are some significant differences between people of different ages and people living in different regions. This is in keeping with the long term trends recorded by this research. Older people are more likely to be satisfied with the NHS than younger people (84% of people aged 65 and over are satisfied compared with 76% of 16 to 24 year olds). Older people are also much more likely to say they are *very* satisfied (37% of those aged 65 plus compared with 12% of those aged 16 to 24). Satisfaction with the NHS is lowest amongst those of middle age. Just 63% of people aged 55 to 64 are satisfied compared with 70% overall.

### Older people are most likely to be satisfied

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

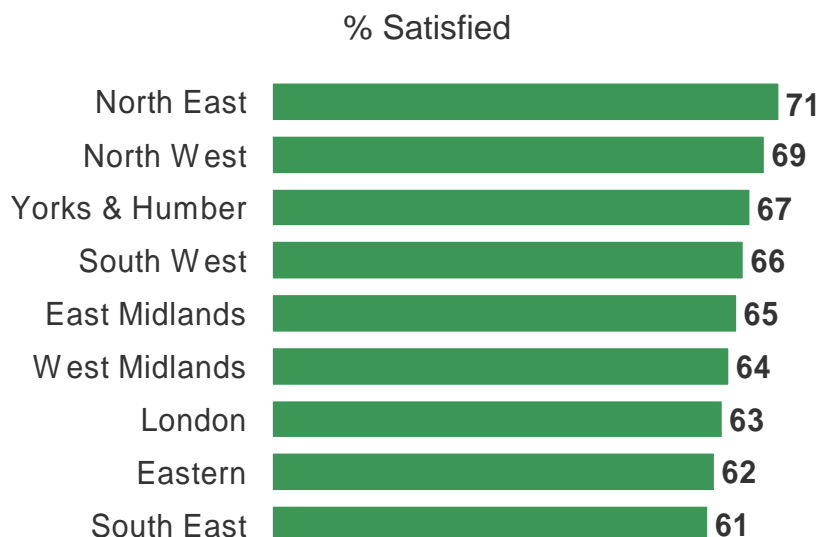


Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker Ipsos MORI

There are also differences in levels of satisfaction with the running of the NHS according to region (as shown in the graph overleaf). People living in the North are more likely to be satisfied than those living in the South. Data aggregated from December 2002 until December 2010 shows seven in ten people living in the North East are satisfied with the NHS compared to three in five in the South East (71% compared with 61%). This mirrors attitudes to local public services more generally.

# Regional satisfaction with running of the NHS

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



Base: Ipsos MORI aggregate analysis (20,406)

English adults aged 16+, Winter 2002 – December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker

Ipsos MORI



Historically, no significant difference in satisfaction with the NHS has been recorded between men and women. However, in this wave, women are more likely to be *dissatisfied* than men. One in six women say they are dissatisfied compared with one in nine men (17% compared with 11%).

## 2.3 Satisfaction with the running of the NHS among service users

Just under nine in ten people have personally used NHS services in the past year (88%). Three quarters have visited an NHS GP (75%) and over half have been an inpatient, outpatient or A&E patient at an NHS hospital (55%). Far fewer people have used NHS walk-in clinics or NHS Direct (both 15%) and even fewer have visited the NHS Choices website (5%). Usage of these services is similar to that seen in previous waves of this research.

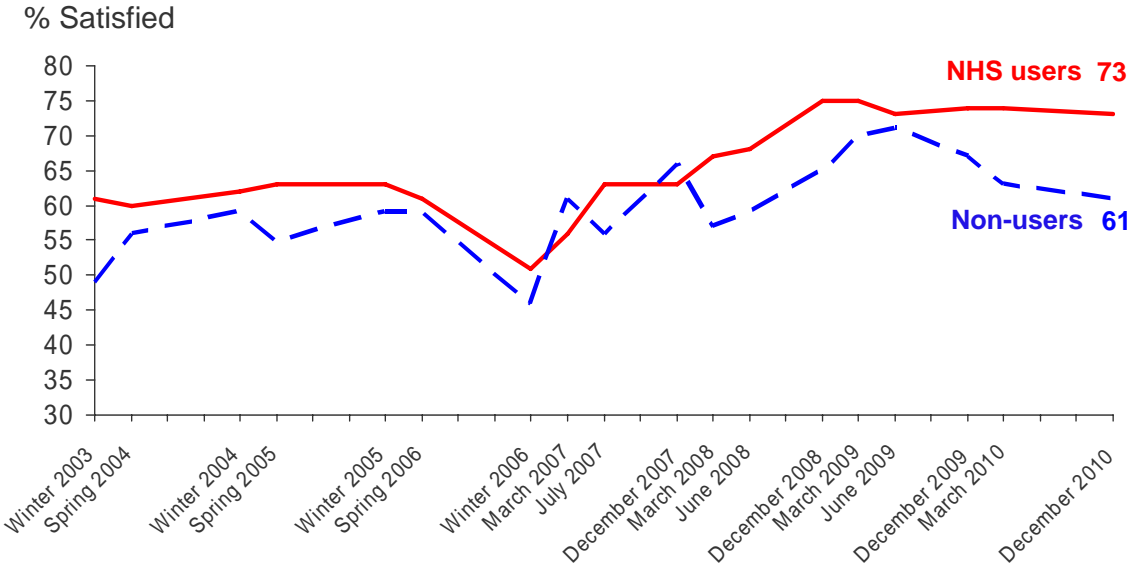
As in March 2010, and every other wave of this research, older people are more likely to be NHS users than younger people (93% of those 65 and over compared with 84% of 16 to 24 year olds). Women are also more likely to be NHS users than men (91% compared with 84%).

Satisfaction with the running of the NHS among service users and non-service users continues to diverge, with nearly three quarters of recent NHS users satisfied compared with

three in five non-users (73% compared with 61%). This is despite signs in mid-2009 that satisfaction levels between the two groups were converging. The favourability gap is widening largely as a result of the falling satisfaction of non-users, as satisfaction among users has remained fairly stable since June 2009. We know from earlier analysis<sup>2</sup> we have carried out on key drivers of perceptions that experience of local services is an important driver of people’s views of them, and that people who have used services tend to be more positive about them than those who have not. It follows, therefore, that those who have who have used NHS services in the last year are more satisfied than those who have not. It is worth monitoring the falling satisfaction of non-users though as this must be being driven by something other than experience of services. The small base size of the group may go some way to explain the decline because fluctuations in data can often be seen when base sizes are small, but not necessarily all.

## Patient satisfaction with the NHS – users v non-users

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



Base: English adults aged 16+. NHS users (891), Non-users (120)  
 NHS users are those who have been personally been an inpatient, outpatient, A&E patient or used a walk-in clinic or visited an NHS GP within the last year  
 Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker



<sup>2</sup> Key Drivers of Satisfaction with the NHS, Ipsos MORI, June 2009. This analysis was based on the data collected during the waves of the Public Perceptions of the NHS and Social Care tracker conducted in 2008.

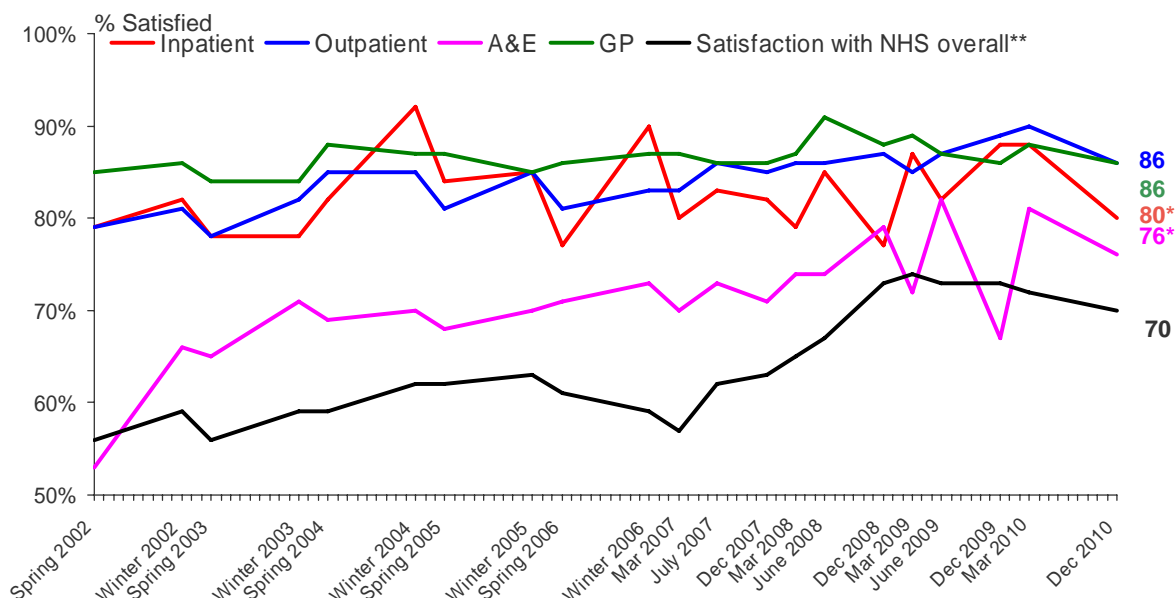
## Recent NHS service users – satisfaction with last visit

Recent hospital users are less satisfied with their last visit to an NHS hospital than they were in March 2010, with 83% now saying they are satisfied compared with 89% before. The decline in satisfaction is occurring across all groups of hospital users. Satisfaction among outpatients has dropped from 90% in March 2010 to 86% now, among inpatients from 88% to 80%, and among A&E users from 81% to 76%. Although, satisfaction levels among the different sub-groups of hospital users have tended to fluctuate throughout the course of this research, making it too early to attribute these declines to long-term downward trends, it will be important to monitor satisfaction levels amongst recent hospital users in the future.

Recent GP users continue to be very satisfied with the service they receive. More than four in five (86%) say they are satisfied and half say they are very satisfied (49%). Throughout the course of this research, satisfaction with GPs has consistently been above 80%. The high opinion of GPs is further illustrated in the public's response to specific questions on NHS reform, which will be discussed in chapter 3.

## Overall satisfaction with the NHS and satisfaction of recent service users

Q Now thinking about the last time you visited an NHS hospital/ your local doctor or GP, overall, how satisfied or dissatisfied were you with this last visit as a patient?



Base: NHS overall – English adults aged 16+ (c.1,000 per wave); GPs – All visiting GP within last year (c.750 per wave)  
 Outpatients – All whose last hospital visit was as outpatient (c. 300 per wave); A&E – All whose last hospital visit was to A&E (c. 100 per wave) Inpatients – All whose last hospital visit was as inpatient (c. 100 per wave)

\*\* Overall, how satisfied are you with the running of the National Health Service nowadays?

Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker



\*N.B small base size means comparison of figures and trends is indicative only

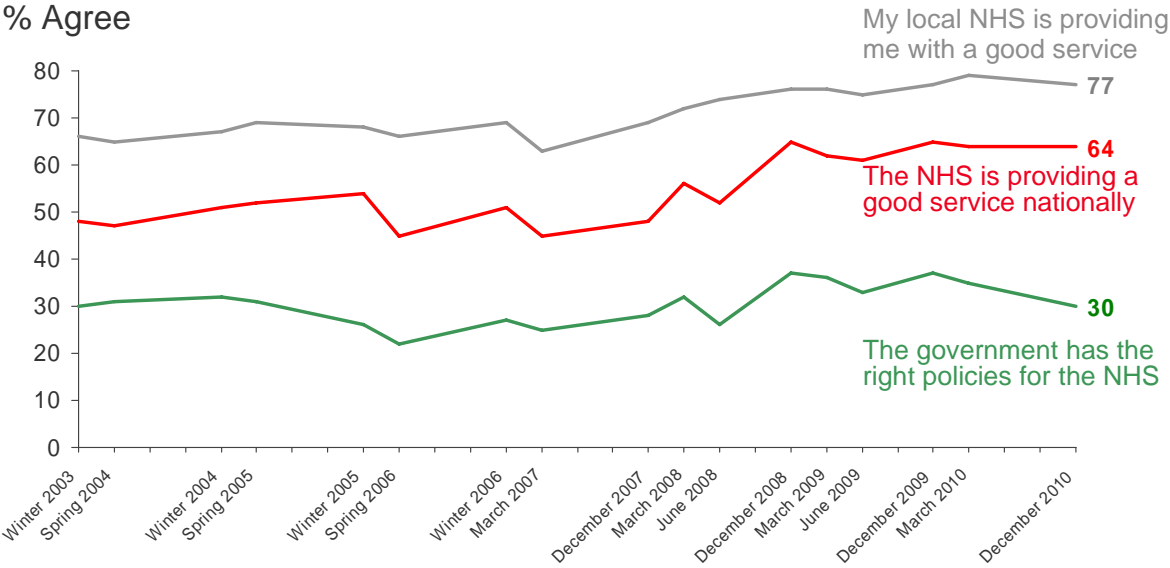
## 2.4 The perception gap – satisfaction at national and local levels

There is still a perception gap between attitudes towards the government’s national healthcare policy and views of local NHS services. While three quarters of the public agree with the statement ‘my local NHS is providing me with a good service’ (77%), two thirds agree that ‘the NHS is providing a good service nationally’ (64%) and only three in ten agree that ‘the government has the right policies for the NHS’ (30%).

Confidence that the government has the right policies for the NHS has fallen since March 2010 (by five percentage points). This may be due to a lack of familiarity with the new government’s policies, as the proportion of people saying that they ‘neither agree nor disagree’ has increased by five percentage points (from 22% to 27%) suggesting some people have yet to make up their minds. When you include the 10% of people saying they ‘don’t know’, almost two in five people feel unable to give an opinion about the current government’s NHS policies (37%).

### NHS perception gap

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



Base: English adults aged 16+ (c.1,000 per wave)  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos

Those who are pessimistic about the future of the NHS are more likely to disagree that the government has the right policies (47% disagree compared with 20% who agree). On the other hand, people who are more optimistic about the future of the NHS are more likely to

agree that the NHS is providing a good service nationally (74% compared with 64% overall), as are those who think that the government’s planned reforms to the NHS will make things better for patients (71% compared with 64% overall).

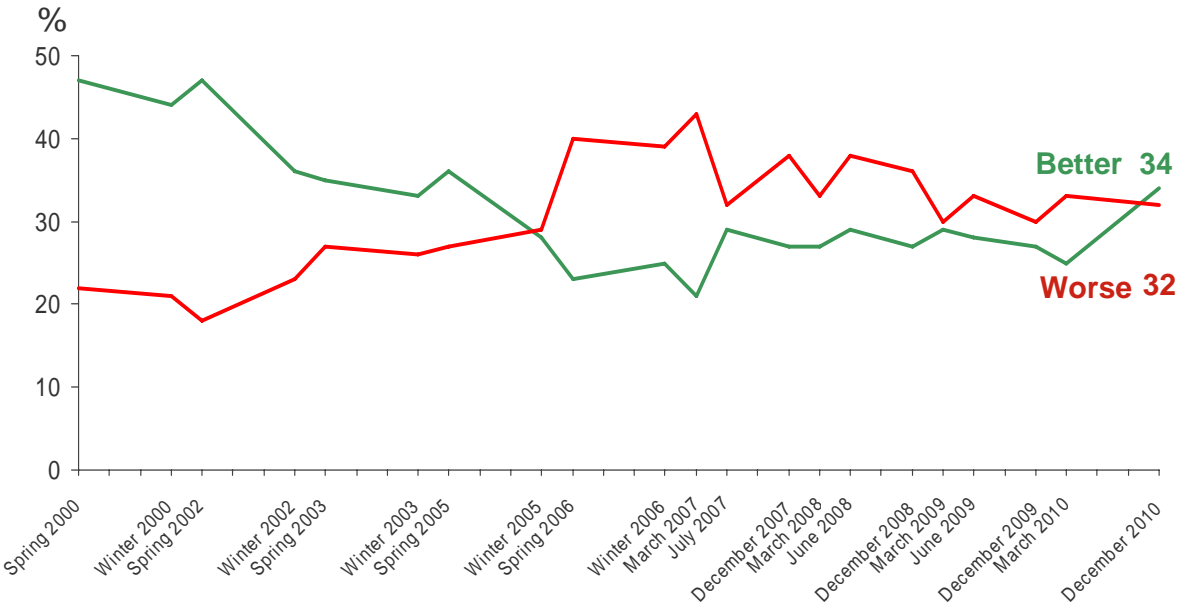
NHS service users are more positive about their local NHS than non-service users, with four in five agreeing that their local NHS is providing them with a good service compared with two thirds of non-service users (79% compared with 67%). This has been seen in previous waves of this research and mirrors the pattern of overall satisfaction levels among service users and non-users.

### 2.5 Optimism for the future of the NHS

The public have mixed views on the future of the NHS. When asked directly about their expectations for the NHS over the next few years, 34% say it will get better, 32% say it will get worse and 29% say it will stay the same. This is a more optimistic view than has been recorded over recent years. Indeed, it is not since Spring 2005 that more people have thought the NHS will get better rather than get worse.

## Optimism for future of NHS

Q Thinking about the NHS over the next few years do you expect it to get better or worse?



Base: English adults aged 16+ (c.1,000 per wave)

Source: Ipsos MORI/DH Perceptions of the NHS Tracker



More optimistic expectations for the NHS may reflect the cut-through of the Conservative Party election slogan to “*cut the deficit, not the NHS*”. The public may be considering the future of the NHS relative to the future of other public services which are facing very large-scale, and high-profile, cutbacks in services and staff. The fulfilment of an election promise to protect NHS budgets may be giving the public hope for its future.

There has been a notable shift in levels of optimism among the AB and C1 populations. In March 2010 21% of people in social grade AB expected the NHS to get better over the next few years. In December 2010 this proportion has risen to 33%. This increase in optimism is even more marked among the C1 population. The proportion expecting the NHS to get better has increased by 15 percentage points from 25% in March to 40% in December.



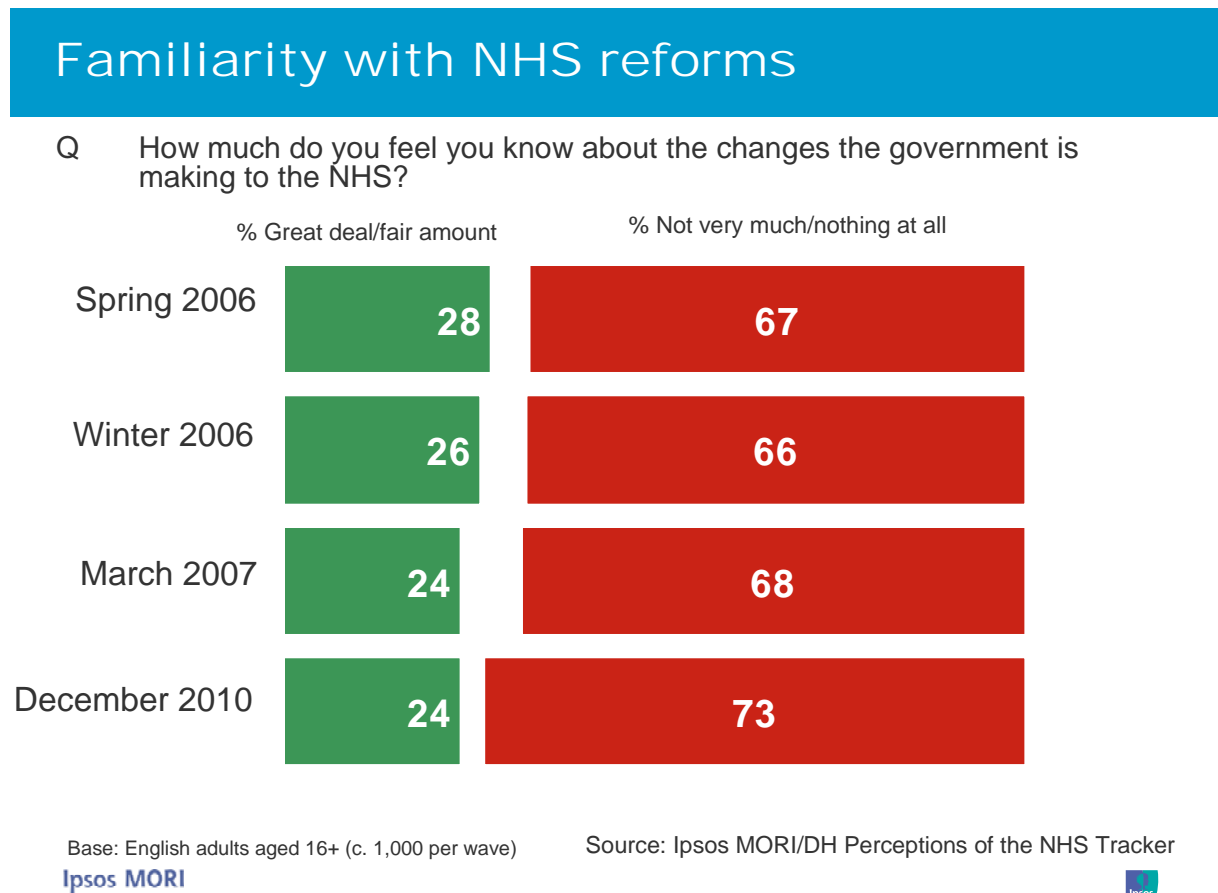
# The future NHS

### 3. The future NHS

The publication of *Equity and Excellence: Liberating the NHS*<sup>3</sup> in July 2010 launched ongoing coverage and debates about the reforms being made to the NHS under the new Government. This wave of the Public Perceptions tracker measured levels of awareness about these reforms and commitments. It also explored the public's expectations for the impact these changes will have on services. It is important to note that fieldwork for this wave was carried out before the publication of the Health and Social Care Bill on 19<sup>th</sup> January 2011.

#### 3.1 Awareness of NHS reforms

The vast majority of the British public (73%) admit they know 'not very much' or 'nothing at all' about the changes the Government is making to the NHS. A quarter of people (24%) consider themselves to know 'a great deal' or 'a fair amount'. This level of knowledge is broadly consistent with the level recorded at other times of NHS reform as the chart below shows.



<sup>3</sup> The NHS White Paper can be accessed here [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_117353](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_117353)

Older people and those in higher social grades are more likely to say they know about the changes being made to the NHS:

- More than a quarter (27%) of people aged 65+ say they know 'a great deal' or a 'fair amount' compared to 15% of people aged 16-24.
- A third (32%) of people in social grades A or B say they know 'a great deal' or a 'fair amount' compared to 18% of those in social grades D or E.

Newspaper readership is also an important factor underlying levels of knowledge. While a third of people (34%) who read broadsheet papers, or consult their online equivalents, say they know a 'great deal' or 'a fair amount' this figure drops to one in five people among readers of tabloid sources (22%).

As shown in the graph overleaf, when asked to name changes being made to the NHS, more than a third (37%) of people say they do not know what the Government's changes to the NHS involve and a further 6% say they have 'not heard of any changes'.

The reform most likely to be spontaneously mentioned by the public is the greater involvement of GPs. One in six (16%) mention **GPs commissioning services/GPs having more of a say in how the NHS is run**. An Ipsos MORI survey in August 2010<sup>4</sup> recorded one in five (20%) mentioning GP commissioning as a key change being made to the NHS showing that public recognition for this reform has been stable over the months following the initial announcement.

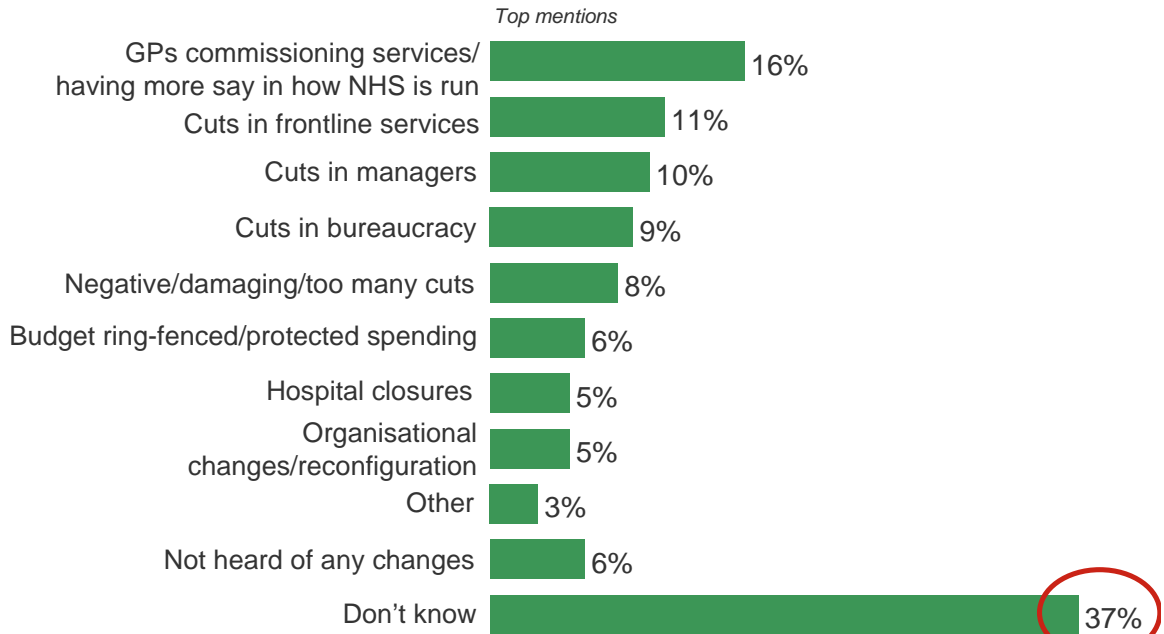
The public also mention a range of cuts when asked to consider changes the Government is making to the NHS. Around one in ten mention **cuts in frontline services** (11%), **cuts in managers** (10%), **cuts in bureaucracy** (9%) or generally mention **negative, damaging, too many cuts** (8%).

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<sup>4</sup> Equity and Excellence: Liberating the NHS - Public reaction to the changing NHS - 1,715 English adults were interviewed face to face between 30th July and 5th August 2010 on Ipsos MORI 's Capibus.

## Awareness of NHS reforms

Q As far as you know, what do the government's changes to the NHS involve?



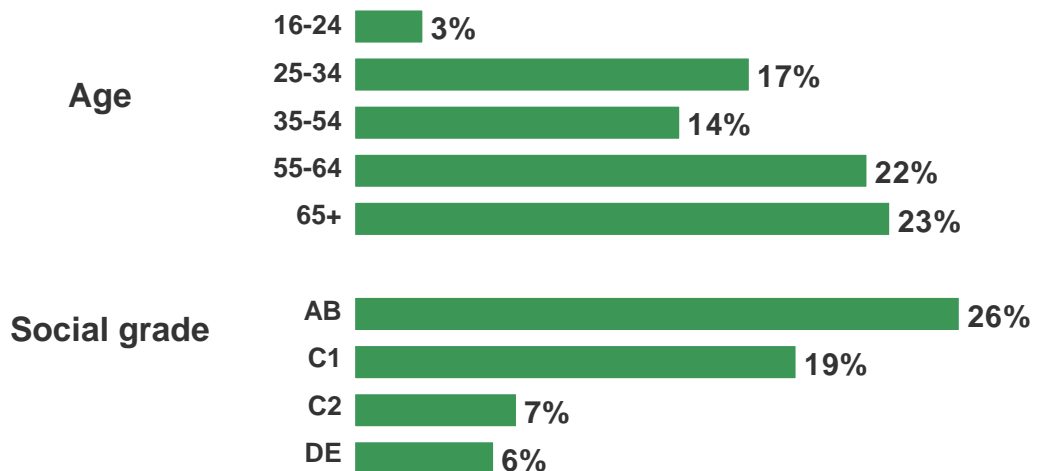
Base: 1,011 English adults aged 16+  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos

## Awareness of GP commissioning

Q As far as you know, what do the government's changes to the NHS involve?

% mentions GPs commissioning services/having more say in how NHS is run



Base: 1,011 English adults aged 16+  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos

Older people and those employed in professional or managerial positions are the most likely to mention the greater involvement of GPs as a reform occurring in the NHS.

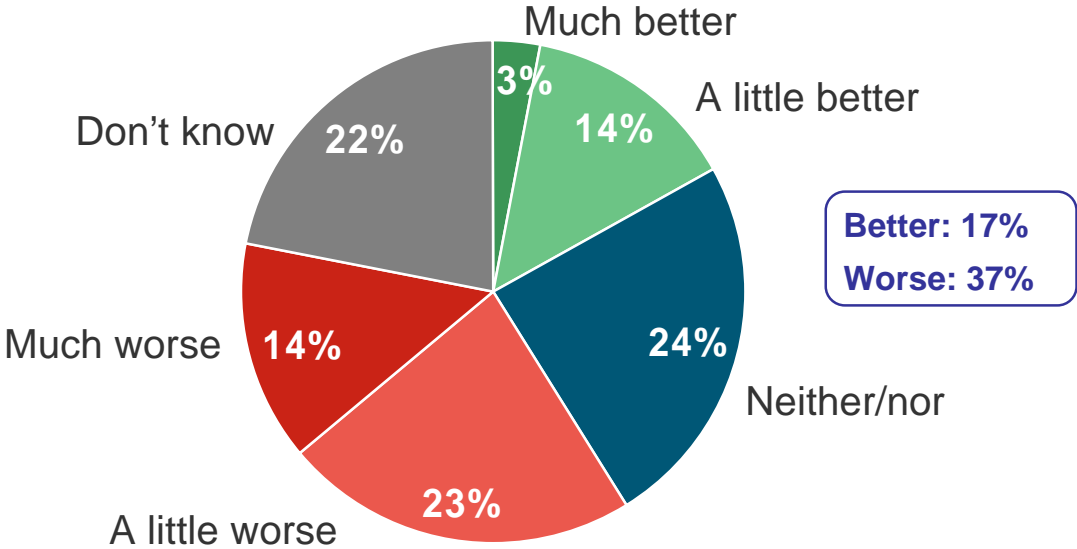
There are some regional differences in awareness of the various reforms proposed for the NHS. A quarter of people (25%) living in the South East mention GP commissioning compared to 16% overall. People in London are more likely to mention cuts in frontline services than people overall (16% compared to 11%).

### 3.2 Expected impact of NHS reforms

The public are not very optimistic about the impact of these changes. When asked to consider the overall impact of the reforms taking place in the NHS, less than one in five (17%) expect services to get better while 37% expect them to get worse.

## Expected impact of NHS reforms

Q And thinking about these changes overall, from what you know, how much better or worse do you think services will be for patients?



Base: 1,011 English adults aged 16+  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker



While it is important to note that these findings include the large proportion of the public who do not know anything about the changes being made to the NHS, attitudes towards the impact of the reforms overall are less positive among those who are able to name changes taking place. Half (52%) of these respondents expect the changes overall to make services worse for patients.

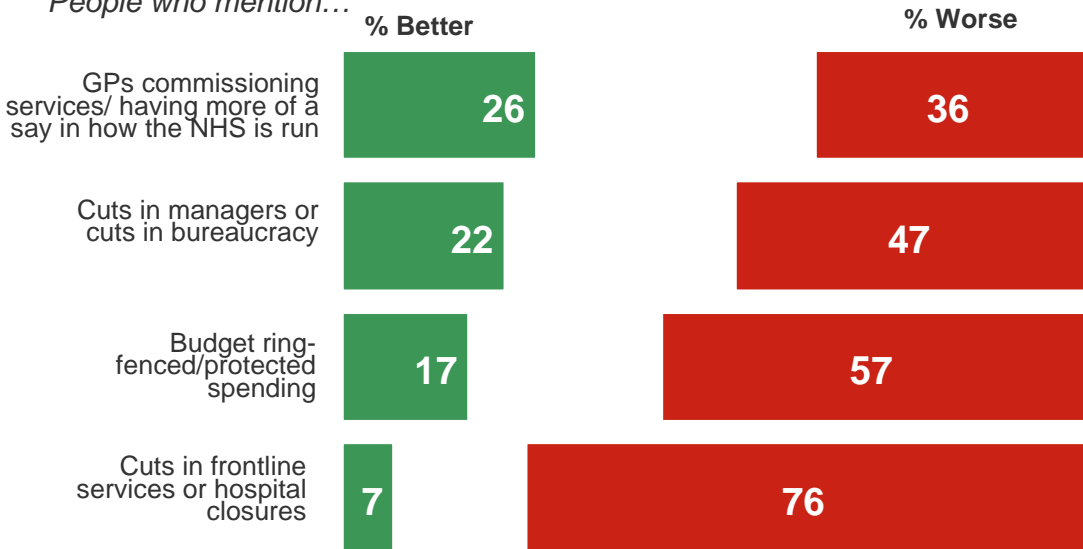
Looking at this data in more detail, there are very different expectations for specific reforms taking place in the NHS. For instance, while less than one in ten (7%) people who mention cuts in frontline services or hospital closures think the changes overall will make services better for patients, over one in four (26%) of those who mention GP commissioning/GPs having more say in how the NHS is run are optimistic about the impact of this. Just over one in five (22%) of those who mention cuts in managers or cuts in bureaucracy think the changes overall will make services better for patients.

It is still the case however, that more people expect each of the mentioned reforms to make services worse for patients rather than better as the chart below shows.

## Expected impact of specific NHS reforms

**Q** And thinking about these changes overall, from what you know, how much better or worse do you think services will be for patients?

*People who mention...*



Base: GPs commissioning services/ having more of a say in how the NHS is run – 169 English adults aged 16+;  
 Cuts in managers or cuts in bureaucracy – 146 English adults aged 16+;  
 Budget ring-fenced/protected spending – 58 English adults aged 16+;  
 Cuts in frontline services or hospital closures - 140 English adults aged 16+;

**Ipsos MORI** Source: Ipsos MORI/DH Perceptions of the NHS Tracker 

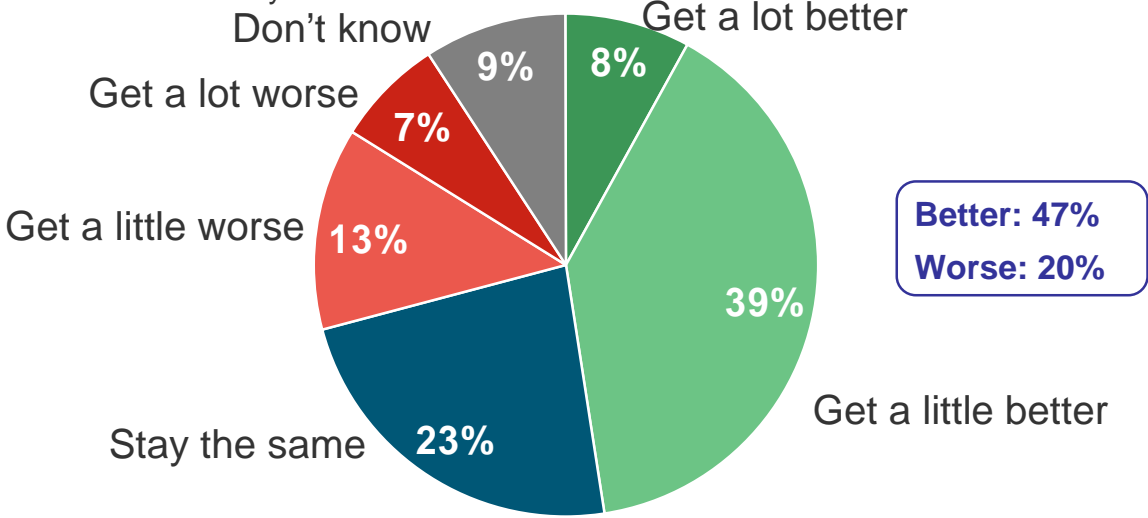
*\*N.B small base size means comparison of figures and trends is indicative only*

### 3.2.1 Expected impact of reform to role of GPs

Further to measuring spontaneous awareness of proposed NHS reforms, respondents were also presented with the specific policies about GP involvement and community-based care. The reactions to these were more positive, especially in relation to the role of GPs. Nearly half (47%) of people believe GPs having more of a say in deciding how the NHS spends its money will make the NHS better over the next few years. These views on GP commissioning also match very closely with those expressed in another survey conducted by Ipsos MORI in August 2010<sup>5</sup>. This suggests that since the initial policy announcement in July 2010 the public have not changed their view on the impact of this reform. It will be interesting to see whether these views change over the longer-term.

## Expected impact of GP commissioning

Q The Government has announced that GPs will have much more say in deciding how the NHS spends its money. To what extent do you think this particular policy will make the NHS better or worse over the next few years, or will it stay the same?



Base: 1,011 English adults aged 16+  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos

Younger people, aged 16 to 24, are the most likely to believe that greater GP involvement in the NHS will lead to improvements. Nearly six in ten (58%) say this will make the NHS better over the next few years compared to less than half overall (47%).

People who live in the South East are the most likely to spontaneously mention GP commissioning as a change taking place in the NHS (25% compared with 16% overall), and,

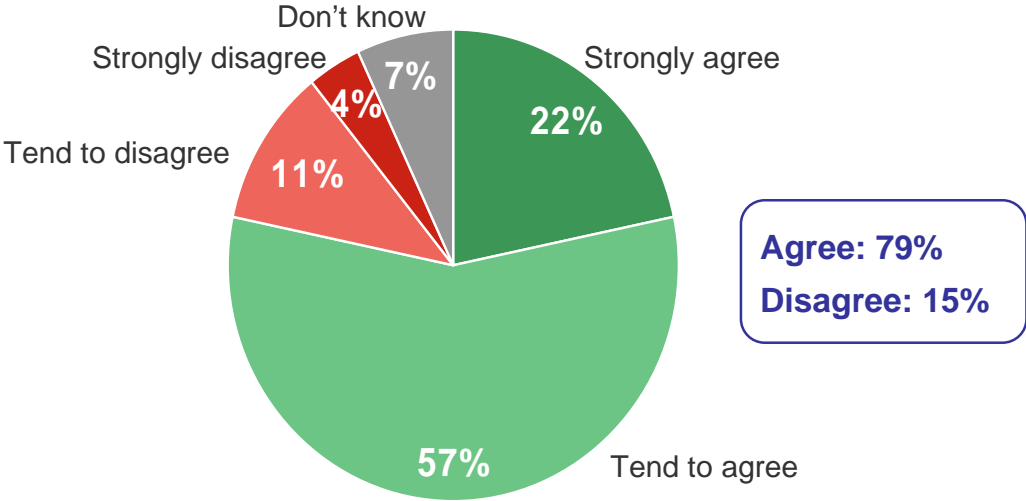
when asked about its impact, are also the most likely to believe it will be positive (56% compared to 47% overall).

The relative popularity of this reform is likely to reflect the high level of esteem in which GPs are held by the public. This wave of the Public Perceptions tracker shows that the vast majority (79%) of the public agree that **GPs are best placed to understand which services their patients need.**

## GPs' understanding of patient needs

Q Please tell me whether on the whole you agree or disagree with the following statement:

**GPs are best placed to understand which services their patients need**



Base: 1,011 English adults aged 16+  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos

The Public Perceptions tracker also consistently records very high levels of satisfaction with recent GP visits (see page 10) and other research by Ipsos MORI<sup>6</sup> records high levels of public trust in GPs.

Older people are most likely to agree that GPs are best placed to understand which services their patients need (87% of those aged 65+ agree compared to 75% of those aged 16-24).

<sup>5</sup> Equity and Excellence: Liberating the NHS - Public reaction to the changing NHS - 1,715 English adults were interviewed face to face between 30th July and 5th August 2010 on Ipsos MORI 's Capibus.

<sup>6</sup> Ipsos MORI conducts a regular *Trust in Professions Survey*. The latest survey was conducted in October 2009. Details of the methodology and results can be found here: <http://www.ipsos-mori.com/researchpublications/researcharchive/poll.aspx?oItemId=2478>

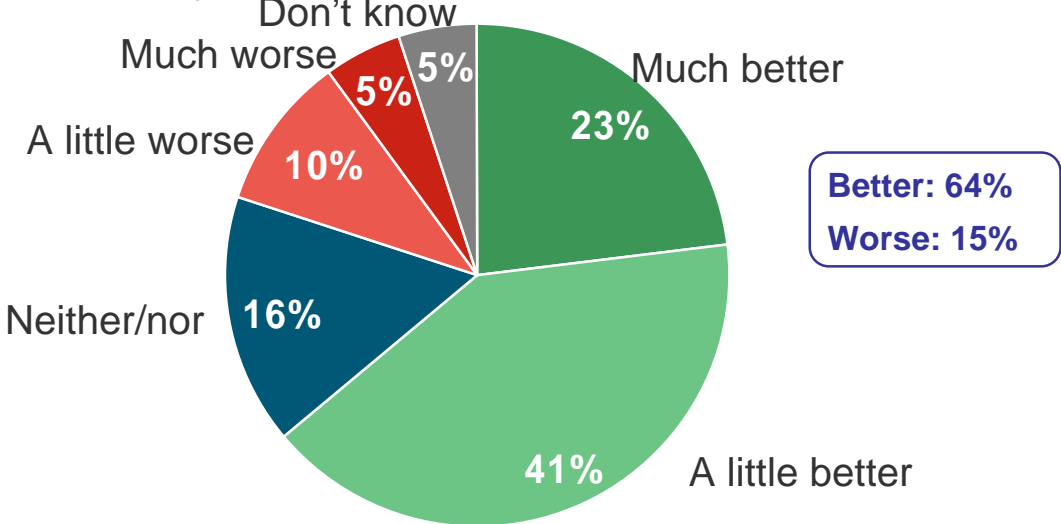


### 3.2.2 Expected impact of reform to provide more care within the community

The public also believe that greater provision of treatment and care within the community will have a positive impact on patients. After prompting with the statement “The NHS may move more services which have traditionally been provided in hospitals out into the community. This will mean more services are provided through GP practices or clinics or by NHS staff delivering them in patients’ homes.” almost two thirds (64%) think this will make services better for patients.

## Expected impact of community care

Q The NHS may move more services which have traditionally been provided in hospitals out into the community. This will mean more services are provided through GP practices or clinics or by NHS staff delivering them in patients’ homes. How much better or worse do you think this will make services for patients?



Base: 1,011 English adults aged 16+  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker



Women are more likely than men to believe delivery of more NHS services in a community-setting will make services better for patients (68% compared to 60%).

### 3.3 Awareness of other NHS commitments

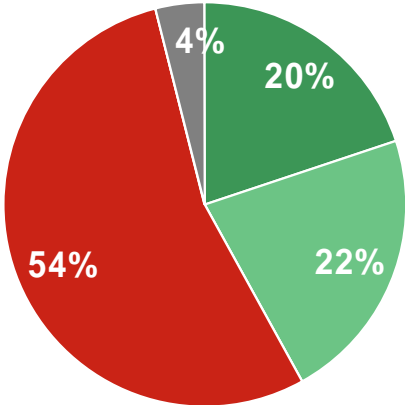
The public claim relatively high levels of awareness of some of the other policies which were outlined in the NHS White Paper. When prompted, more than two in five people say they are aware that the Government has made a commitment to allow people to choose to register with a GP practice anywhere they like (43%) and that people will be allowed more control over their own health records (46%). In both cases around one in five claim they are fully aware of these policies (20% and 23%).

## Awareness of commitments

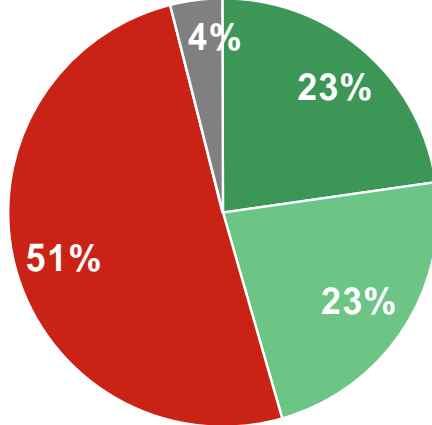
- Q As you may or may not know the Government has made a commitment to allow people...
- A) to choose to register with a GP practice anywhere they like. Previously, people generally had to register with a GP practice near where they lived.
  - B) more control over their own health records. You will be entitled to see your records and pass them on to any person or organisation of your choice.

Before taking part in this survey today, to what extent, if at all, were you aware of this commitment?

■ Yes, fully aware of it   
 ■ Yes, aware of it but not in detail   
 ■ No, not aware of it   
 ■ Don't know



Base: 1,011 English adults aged 16+  
Ipsos MORI



Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos

In line with patterns described around varying levels of awareness of reform, older people (aged 65+) and those in professional or managerial positions (social grades A or B) are more likely to say they are aware of these commitments:

- A quarter (25%) of older people say they are fully aware that people will have greater choice when registering with a GP, compared to one in ten (12%) people aged 16-24.
- A quarter (26%) of older people also say they are fully aware that people will be granted more control of their health records compared to 14% of younger people.
- A quarter (25%) of people in social grades A and B say they are fully aware about GP registration reforms compared to 12% of people in social grades D and E.

- A third (32%) of professionals/managers say they are fully aware of the change of health record ownership compared to 12% of those who in the lowest social grades.

### 3.4 A patient-focused NHS

“No decision about me, without me” is a key slogan summarising the culture of the new NHS. Patients will increasingly be encouraged to play a greater role in making decisions about their health.

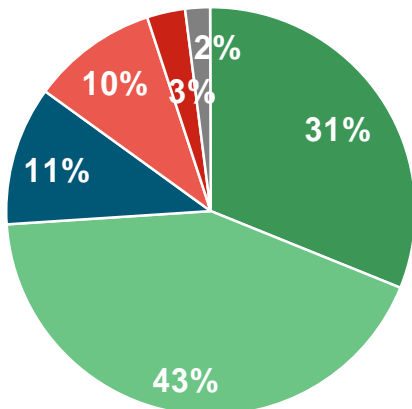
The Public Perceptions data shows that the vast majority (74%) of the public do feel that they have been as **involved as much as they wanted to be in decisions about their care or treatment**. Agreement that they were able to **choose the treatment or service which best suited their needs** is lower however at 56%. One in five (21%) disagree that this choice was available to them. This data provides a useful baseline.

## Patient involvement in decisions about care

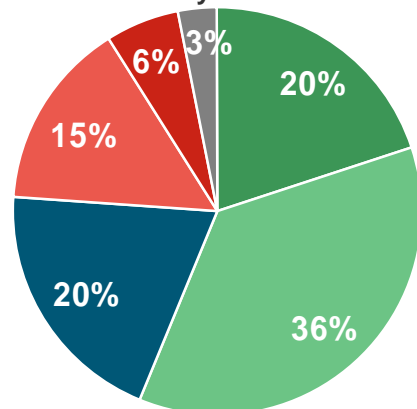
Q Thinking back to the last time you saw a health professional, such as a GP or hospital doctor, to what extent would you agree or disagree with each of the following statements.

- % Strongly agree
- % Tend to agree
- % Neither / nor
- % Strongly disagree
- % Tend to disagree
- Don't know

**A. I was involved as much as I wanted to be in decisions about my care or treatment**



**B. I was able to choose the treatment or service which best suited my needs**



Ipsos MORI  
Base: 1,011 English adults aged 16+

Source: Ipsos MORI/DH Perceptions of the NHS Tracker



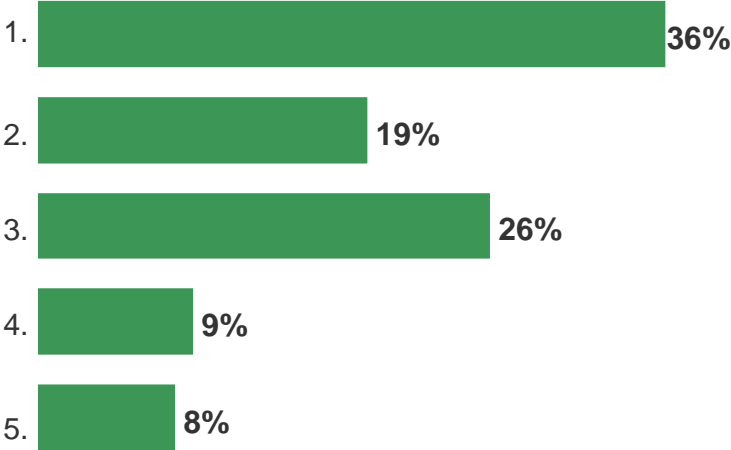
Younger people are the most likely to disagree that they were involved as much as they wanted to be (24% of 16-24 year olds say this compared to 11% of those aged 65+).

A new question was included in this December 2010 survey which was designed to establish the amount of involvement people want in decisions about their treatment. The question allowed people to place themselves on a spectrum from wanting a GP or consultant to make decisions about their treatment to making their own decisions. More than a third of people (36%) say that the statement, ***in general, I want a health professional, such as a GP or a consultant, to make decisions about my treatment*** comes closest to their own opinion. This compares to less than one in ten (8%) who say they most identify with the statement, ***in general I want to make my own decisions about my treatment, not rely on a health professional, such as a GP or consultant.***

## Desired level of involvement

Q Please listen to the following pair of statements and decide, on a scale of 1 to 5, which comes closest to your own opinion. A score of 1 means you agree much more with statement A while a score of 5 means you agree much more with Statement B.

**A – In general, I want a health professional, such as a GP or a consultant, to make decisions about my treatment**



**B – In general, I want to make my own decisions about my treatment, not rely on a health professional, such as a GP or consultant**

Base: 1,011 English adults aged 16+

Source: Ipsos MORI/DH Perceptions of the NHS Tracker



There are some key differences in how involved various groups of people wish to be in decisions about their care and treatment. The following groups are most likely to place themselves at 1 on the scale of 1 to 5 shown in the chart above. A score of 1 is associated with a view that health professionals should make decisions whilst a score of 5 is a view that people themselves should make their own decisions.

- **Men** - two in five (41%) men place themselves at 1 on this scale compared to one in three (32%) women. On the other hand, 10% of women place themselves at 5 on this scale compared to 5% of men.

- **Older people** – more than half (52%) of those aged 65+ place themselves at 1 on the scale compared to 28% of those aged 16-24. People in their middle-ages are the most likely to place themselves at the other extreme (10% of those aged 35-54 place themselves at 5 on scale compared to 5% of those aged 65+).
- People in **lower social grades** – nearly half (47%) in social grades D or E place themselves at 1 on the scale compared to 32% of those in social grades A or B.

These are also the groups of people who are most favourable towards the role of GPs and their understanding of patients needs.

One in five (42%) people with a long-term condition say the statement, "*in general, I want a health professional, such as a GP or a consultant, to make decisions about my treatment*" matches their own opinion closest compared to a third (34%) of those without a long-term condition.

# The NHS in context

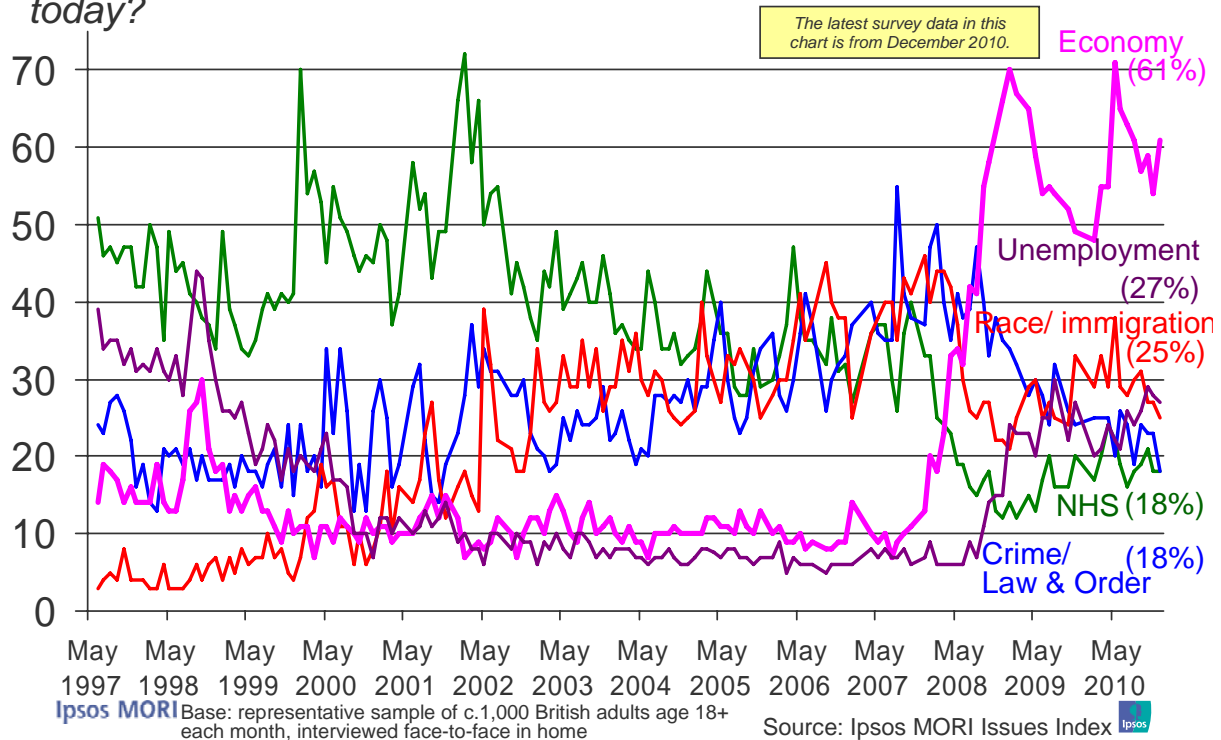
## 4. The NHS in context

### 4.1 Public attitudes to the issues facing the NHS

Ipsos MORI's December 2010 Issues Index<sup>7</sup> shows that the economy remains the most important issue facing the country today, as has been the case since September 2008. Six in ten of the public (61%) place it among the most important issues facing Britain. Concern about the NHS remains stable at 18%.

### Issues Facing Britain: Long Term Trends

*What do you see as the most/other important issues facing Britain today?*

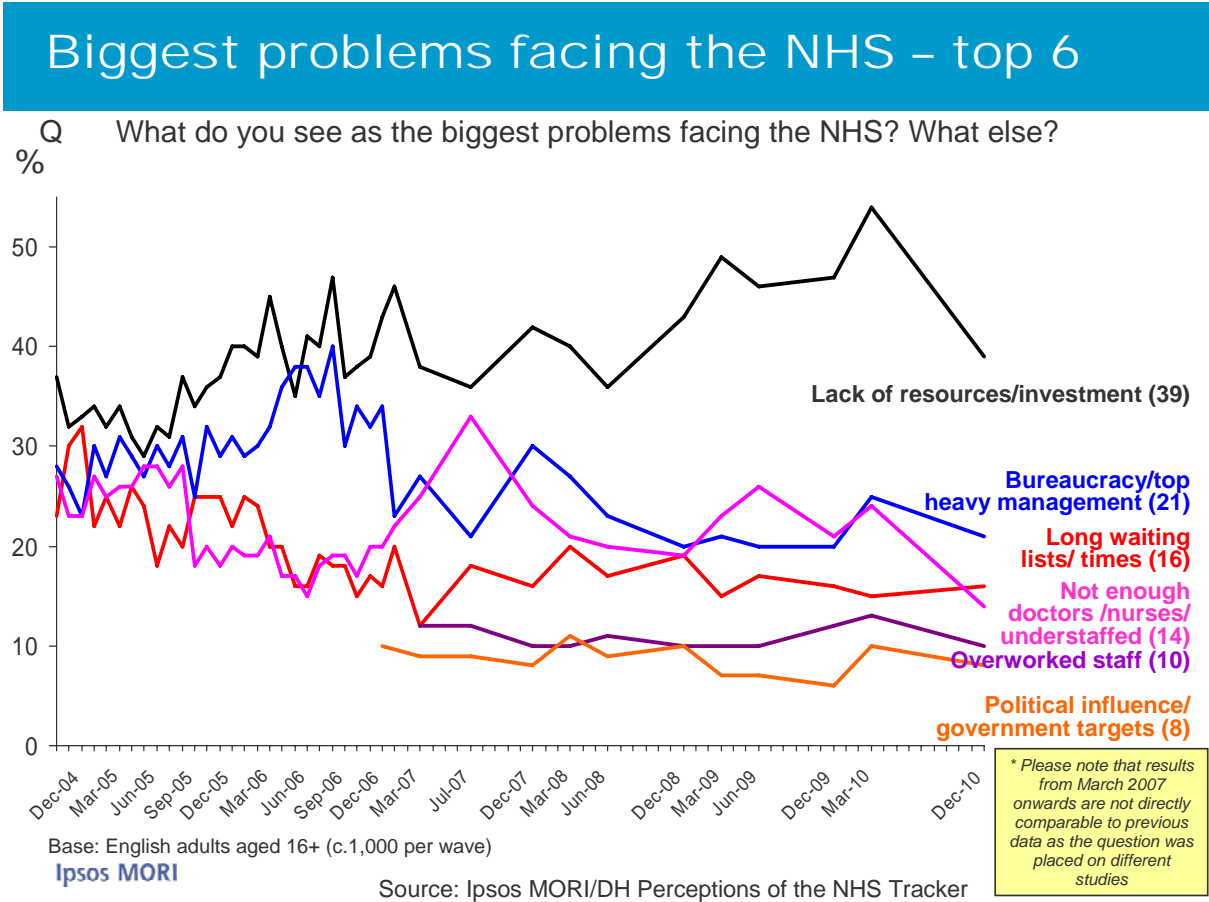


It is important to bear in mind that despite current policy debates about the delivery of health services, these are primarily taking place between stakeholders rather than members of the general public. Indeed, as the data from this survey shows, very few people say they are well informed about the current changes being made to the NHS. Their attitudes towards the impact of these changes are likely to be heavily influenced by media coverage and hearsay. It will be interesting to see how opinions towards the reforms change as they become embedded and start to have an impact, either positive or negative, on the experiences of

<sup>7</sup> Ipsos MORI's Issues Index is a monthly telephone survey with a nationally representative sample of 1,000 British adults.

service users. Similarly, this might suggest that sustained high levels of satisfaction with the NHS are still informed by positive personal experiences of NHS services. It will be important to also watch these trends as the changes being made to the NHS start to have an impact on how services are delivered to patients.

As suggested in chapter 1, optimism about the NHS overall may result from perceptions that it holds a relatively advantageous position compared to other public services (which are facing severe budget cuts). This appears to be the case when the public are asked to consider the biggest problems facing the NHS. While the public are still most likely to say a **lack of resources/investment**, mentions have fallen significantly since March 2010 (from 54% to 39%). The public are also less likely to say that the NHS has **not enough doctors/nurses/understaffed** (24% to 14%). Fewer mentions about resourcing in the NHS might again point to recognition among the public that the NHS budget has been ring-fenced. There has also been a slight drop in mentions of **bureaucracy/top heavy management** perhaps in recognition that these issues are being tackled (fallen from 25% to 21%).



While optimism for the NHS overall, and opinions on its biggest issues, paint a fairly positive picture, the previous chapter highlighted the concerns held by the public about specific reforms taking place. For the first time the Public Perceptions tracker has recorded



spontaneous anxiety about reforms with 4% mentioning **big changes to services/NHS reforms**.

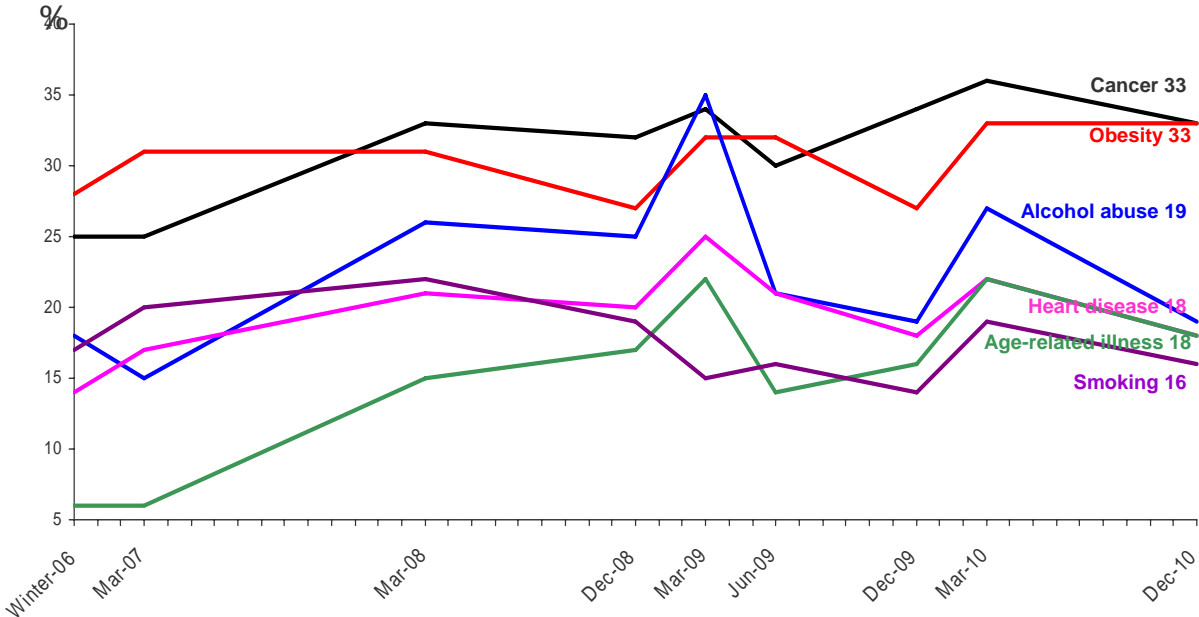
### 4.3 Biggest health problems facing Britain today

**Cancer** and **obesity/overeating** continue to be the biggest health problems facing people today according to the public (both mentioned by 33%). The continued high profile of obesity as a public health issue may reflect media activity and coverage in the run up to Christmas in 2010. **Alcohol abuse/drink-related illnesses/alcoholism/binge drinking** remains a public health concern (mentioned by 19%). While this is a significant drop compared to March 2010 (27%) this level of concern is more in line with findings from previous waves. **Heart disease/attacks** (18%), **age-related illnesses** (18%) and **smoking/smoking-related illnesses** (16%) also continue to be health concerns.

In December 2010, **swine flu** is no longer considered a health concern. Swine flu is mentioned by just 1% compared to 15% a year ago. Although there was an increase in media coverage of swine flu cases in the weeks following fieldwork for this survey, the interviews for this wave of the Public Perceptions tracker preceded the majority of these stories.

## Biggest health problems facing people today – top 6

Q Thinking generally, what are the biggest health problems facing people today? What else? Trends for key issues



Base: English adults aged 16+ (c.1,000 per wave)  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos

# Key Perceptions of the NHS

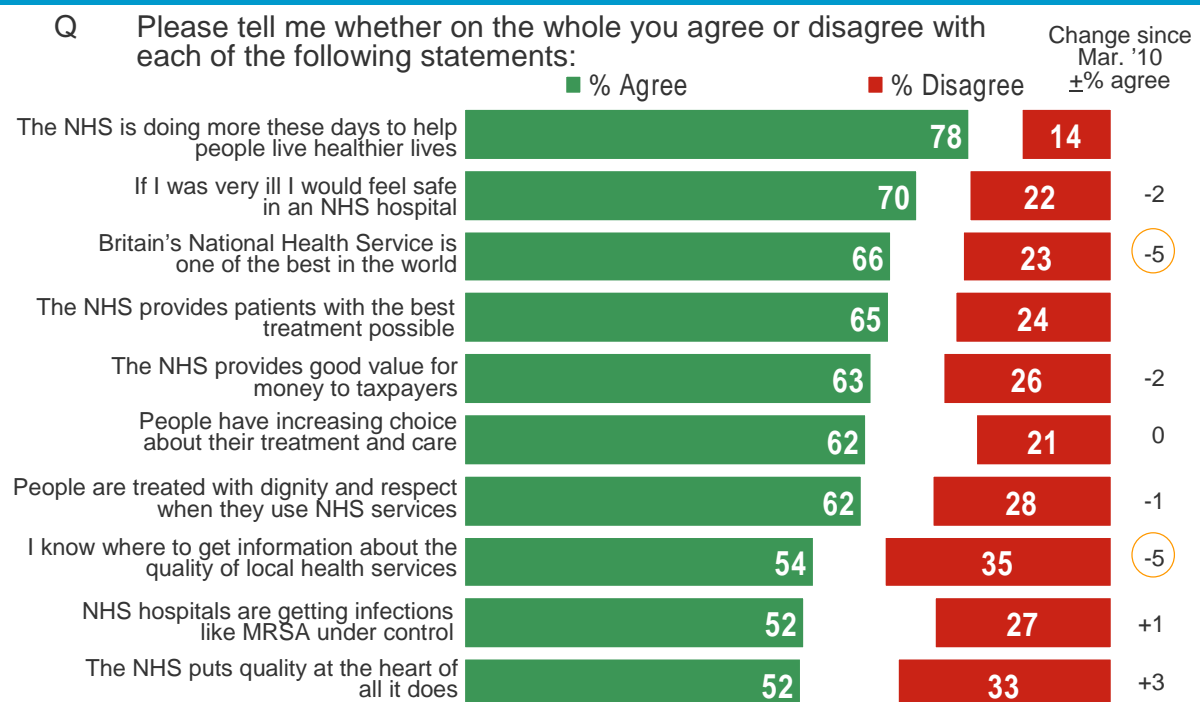
## 5. Key Perceptions of the NHS

How people view the NHS can be better understood by examining perceptions of some key aspects of it in more detail. Reactions to these statements give an indication of what is driving satisfaction levels and what the public's main concerns about the NHS are.

The findings from this wave are broadly in line with previous waves, suggesting that attitudes towards various elements of NHS remain fairly stable. The public are still positive about the quality of NHS services and feel safe in NHS hospitals. A large majority of people think that the NHS is doing more these days to help people live healthier lives. However, their views and knowledge about patient involvement in treatment and care are more mixed.

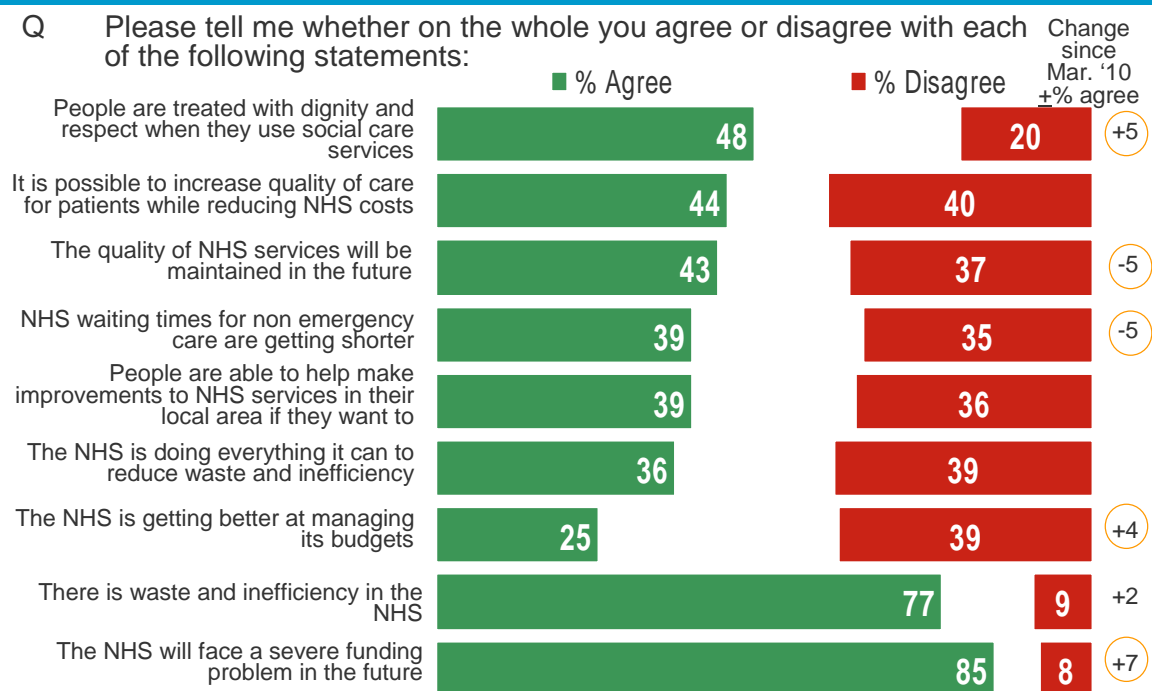
When considering NHS finances, people are far less positive, with budgeting and efficiency stated as big areas of concern. Despite messages around ring-fenced budgets there is a definite public perception that the NHS will still face a severe funding problem in the future.

### Key perceptions of the NHS 1



Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos MORI Those circled indicate significant changes since March 2010 Ipsos

## Key perceptions of the NHS 2



Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
 Ipsos MORI Those circled indicate significant changes since March 2010

For analysis purposes, the statements have been grouped together into the following themes: quality of NHS services, NHS budgeting and resourcing, safety, and patient involvement.

### 5.1 Quality of NHS services

People are positive about the quality of NHS services with respect to providing the best treatment, treating patients with dignity and respect and placing a strong emphasis on quality.

Around two thirds agree that the **NHS provides patients with the best treatment possible** (65%) and a similar proportion agree that **people are treated with dignity and respect when they use NHS services** (62%). More than half think that **the NHS puts quality at the heart of all it does** (52%). There has been an increase in the proportion who agree that **people are treated with dignity and respect when they use social care services** (from 43% in March 2010 to 48% now).

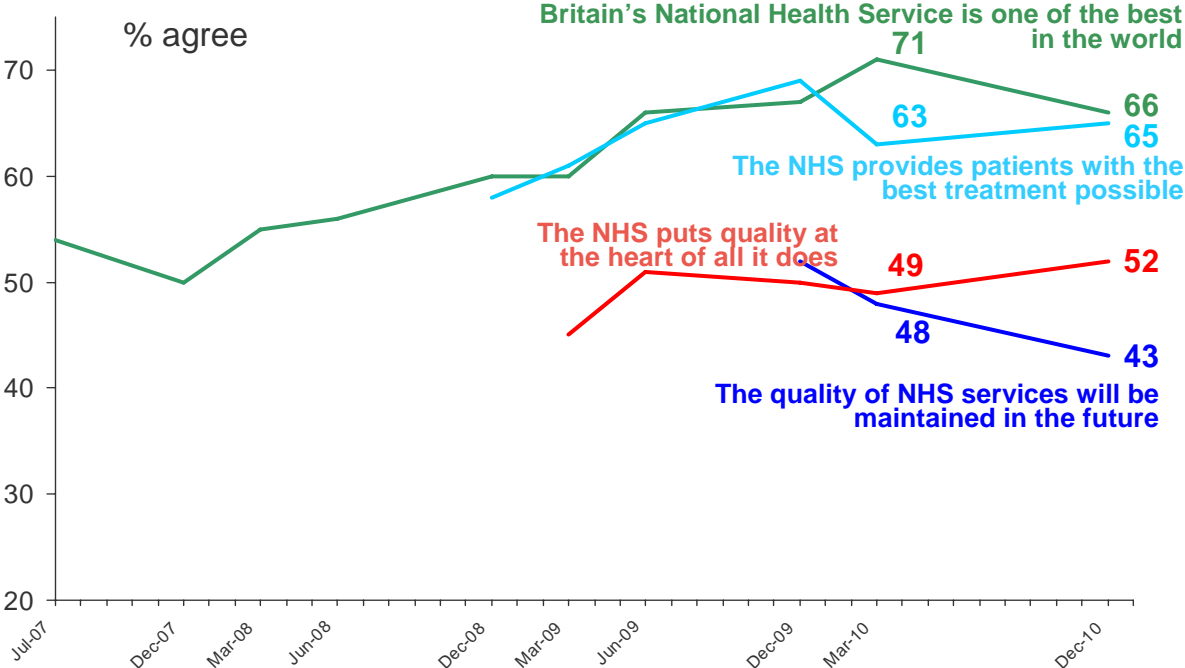
Pride in the NHS has dropped slightly, from 71% agreeing that **Britain's National Health Service is one of the best in the world** in March 2010 to 66% now. However, today's figure is in line with recent waves of this survey.

The public are less certain about whether the NHS will continue to deliver quality, despite higher levels of optimism for the NHS overall. A little more than two in five (43%) agree **the quality of NHS services will be maintained in the future** while 37% disagree. The percentage of people agreeing with this has fallen, from 48% in March 2009.

Another area of quality which the public are less optimistic about is waiting times (as shown the chart overleaf). The public are split on whether **NHS waiting times for non-emergency care are getting shorter**, with 39% agreeing they are and 35% disagreeing. The proportion of people agreeing has fallen five percentage points since March 2009 (when it was 44%).

## A majority think the NHS provides the best treatment possible

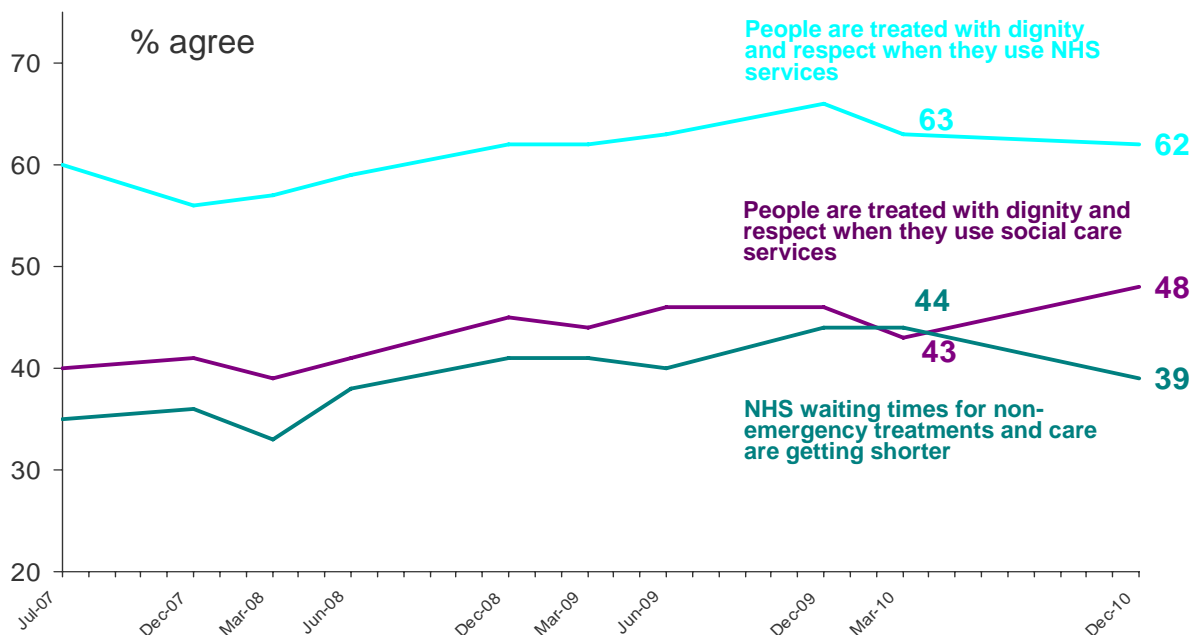
Q Please tell me whether on the whole you agree or disagree with each of the following statements:



Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker

# People think treatment waiting times are increasing

Q Please tell me whether on the whole you agree or disagree with each of the following statements:



Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos MORI

Mirroring overall satisfaction levels with the NHS, the oldest and youngest age groups are most likely to be positive about the quality of NHS services. Three quarters of people aged 65 and over agree that the NHS provides patients with the best treatment possible compared with two thirds overall (76% compared with 65%). 63% of those aged 16 to 24 agree that people are treated with dignity and respect when they use social care services compared with 48% overall. Both groups are also more convinced that the quality of NHS services will be maintained in the future (51% of those aged 65 and over and 54% of those aged 16 to 24 compared with 43% overall).

Again, echoing general satisfaction with NHS services and building on analysis showing the power of personal experiences, users tend to be more convinced of the quality of NHS and social care services than non users. Inpatients and users of social care services are more likely to agree that the NHS provides patients with the best treatment possible (74% and 80% respectively compared with 65% overall). Users of social care services are significantly more likely to agree that people are treated with dignity and respect when using social care services (72% compared with 48%).

Women are more likely to be negative about the quality of NHS services than men. Two in five women disagree that the NHS puts quality at the heart of all it does compared with three

in ten men (39% compared with 28%) and 32% of women disagree that people are treated with dignity and respect when they use NHS services, compared with 23% of men.

People in social grades A/B are also more likely to be sceptical about quality. Two in five of them disagree that the NHS puts quality at the heart of all it does compared with a third overall (41% compared with 33%), and three in ten disagree that the NHS provides patients with the best treatment possible compared with a quarter overall (31% compared with 24%).

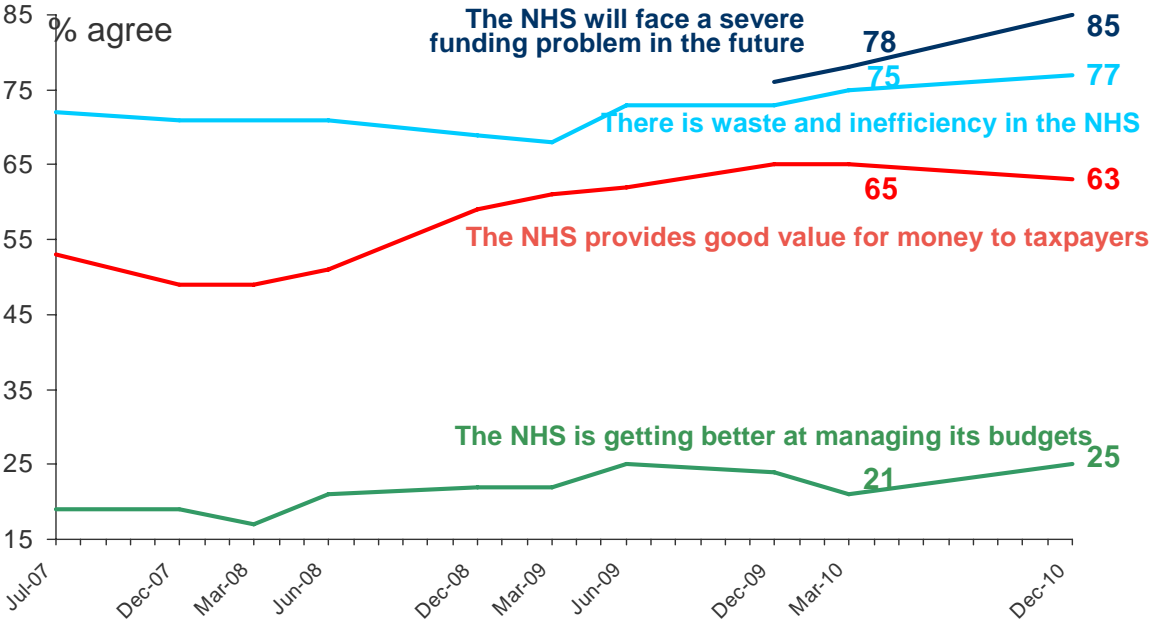
### 5.2 NHS budgeting and resourcing

The public are largely negative about budgeting, resourcing and efficiency in the NHS. Over three quarters of people think that there is waste and inefficiency in the NHS (77%). Many are yet to be convinced that the NHS is addressing these issues. This may reflect the media coverage of the issues facing the NHS during the election period.

More people disagree than agree that **the NHS is getting better at managing its budgets** (39% disagree compared with who agree 25%) and that **it is doing everything it can to reduce waste and inefficiency** (39% disagree compared with 36% who agree). A large majority of people (85%) agree that it **will face a severe funding problem in the future**. This figure has increased by seven percentage points since March 2010.

## The public still believe there is waste and inefficiency in the NHS

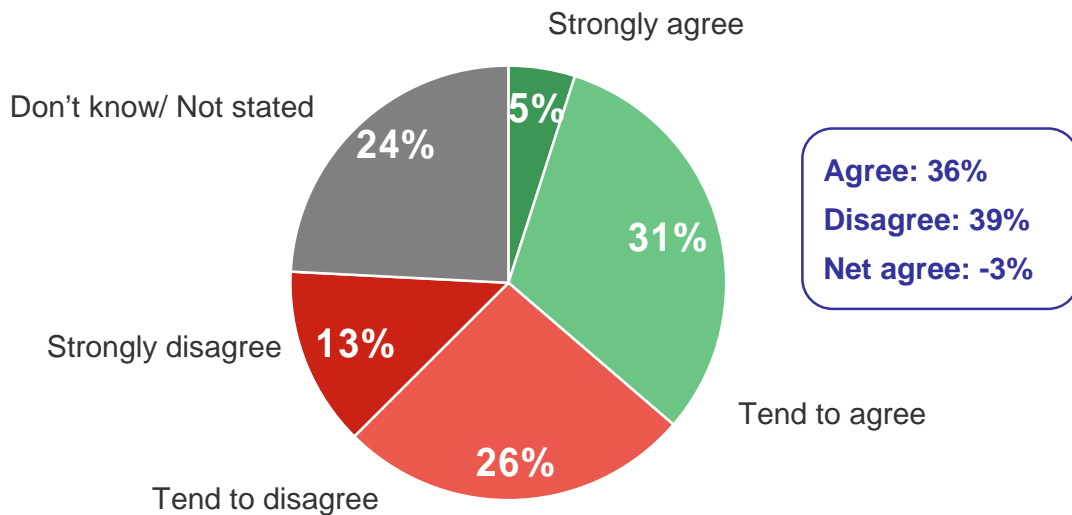
Q Please tell me whether on the whole you agree or disagree with each of the following statements:



Ipsos MORI Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker Ipsos

## The public thinks the NHS is not doing everything it can to reduce waste and inefficiency

Q Please tell me whether on the whole you agree or disagree with each of the following statements: The NHS is doing everything it can to reduce waste and inefficiency?



Base: 1,011 English adults aged 16+, December 2010  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker



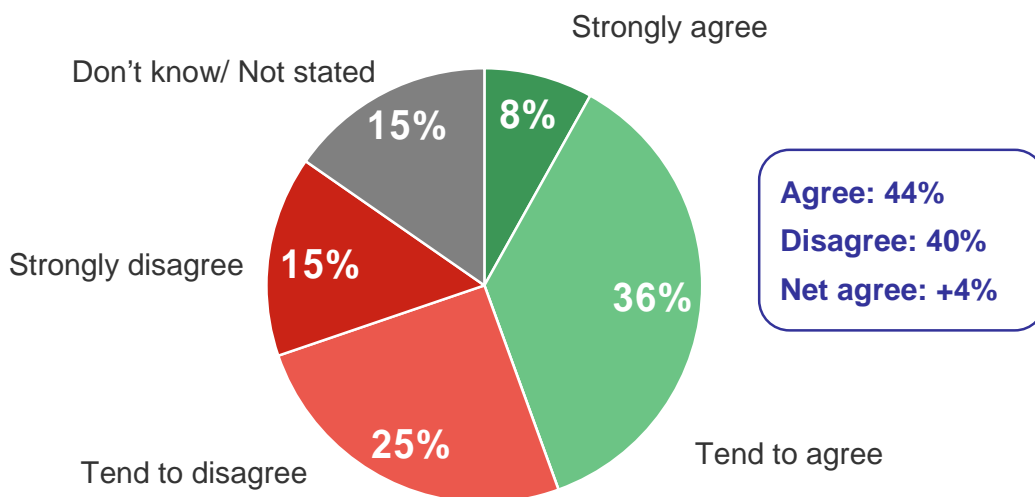
Despite concerns about budgeting and efficiency, however, close to two thirds agree that **the NHS provides good value for money to tax payers** (63%). This may reflect the pride people still have for Britain's National Health Service and perceptions that it does provide high quality care.




People are divided about whether **it is possible to increase quality of care for patients while reducing NHS costs** however (44% agree and 40% disagree).

## People are divided on maintaining quality while cutting costs

Q Please tell me whether on the whole you agree or disagree with each of the following statements: It is possible to increase quality of care for patients whilst reducing NHS costs?



Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
**Ipsos MORI** 

Those who are positive about the government’s policies for the NHS tend to be more positive about budgeting, resourcing and efficiency in the NHS. Seven in ten of those who think that the government’s NHS reforms will be successful think the NHS provides value for money to tax payers, compared with just over six in ten overall (70% compared with 63%). These people are also more likely to agree that the NHS is getting better at managing its budgets (34% compared with 25% overall) and that the NHS is doing everything it can to reduce waste and inefficiency (45% agree compared with 36% overall).

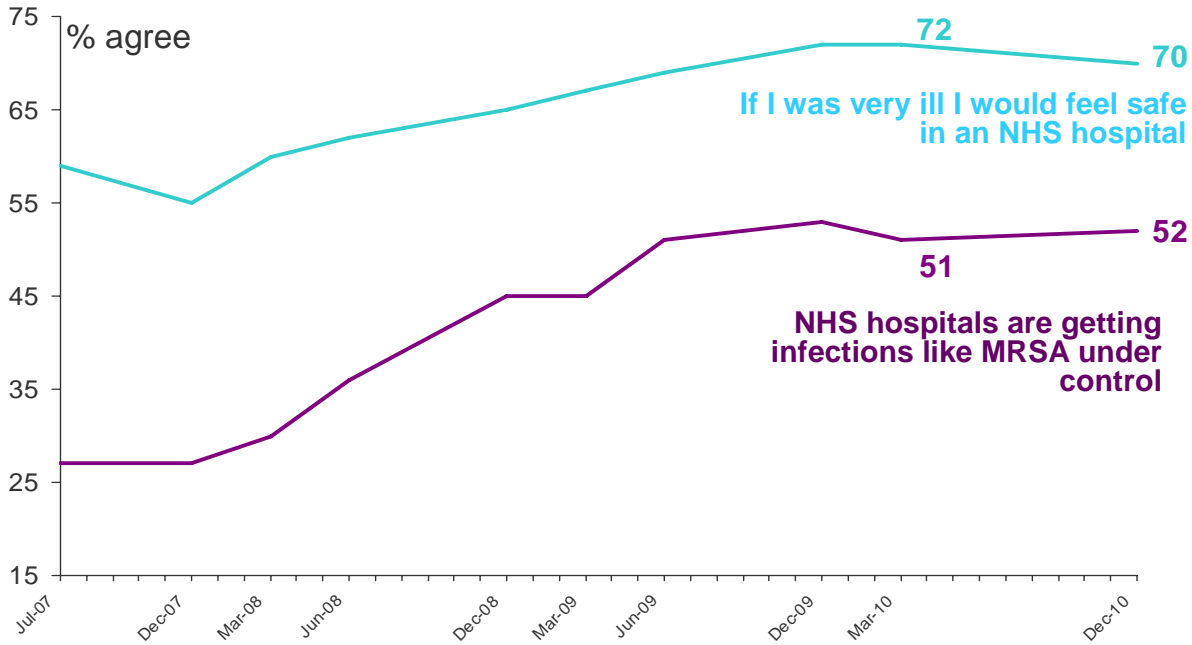
Older people seem to have slightly contradictory views of NHS budgeting and efficiency. They are more likely to think that the NHS provides value for money to tax payers (73% of those aged 65 and over agree compared with 63% overall), but they are also more likely to say there is waste and inefficiency in the NHS (81% of those aged 65 and over agree compared with 77% overall). Younger people are more likely to agree that the NHS is doing everything it can to reduce waste and inefficiency (47% of 16 to 24 year olds agree compared with 36% overall).

### 5.3 Safety

The public continues to feel safe in NHS hospitals. Seven in ten agree that they would **feel safe in an NHS hospital if they were very ill** (70%). More positive views of controlling MRSA and infections in hospitals have been maintained in this wave, with half of respondents agreeing the NHS has these under control (52%). Public perceptions of these issues have improved fairly steadily since December 2007, when just over half of people said they would feel safe in an NHS hospital (55%) and less than three in ten thought that **NHS hospitals were getting infections like MRSA under control** (27%).

## Opinions of safety within NHS hospitals remain high

Q Please tell me whether on the whole you agree or disagree with each of the following statements:



Base: English adults aged 16+ (c.1,000 per wave) Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
 Ipsos MORI Ipsos

It seems that personal experience of NHS hospitals has an impact on the public's opinion of their safety. Inpatients are more likely to agree that they would feel safe in an NHS hospital if they were very ill (80% compared 70% overall).

Older people are also more convinced about the safety of hospitals. They are more likely to say they would feel safe in an NHS hospital if they were very ill (79% of those aged 65 and over compared with 70% overall) and that NHS hospitals are getting infections under control (59% of those aged 65 and over agree compared with 52% overall).

Men and women also have differing views. A higher proportion of men than women would feel safe in an NHS hospital (73% compared with 67%) and think that NHS hospitals are getting infections like MRSA under control (56% compared with 49%).

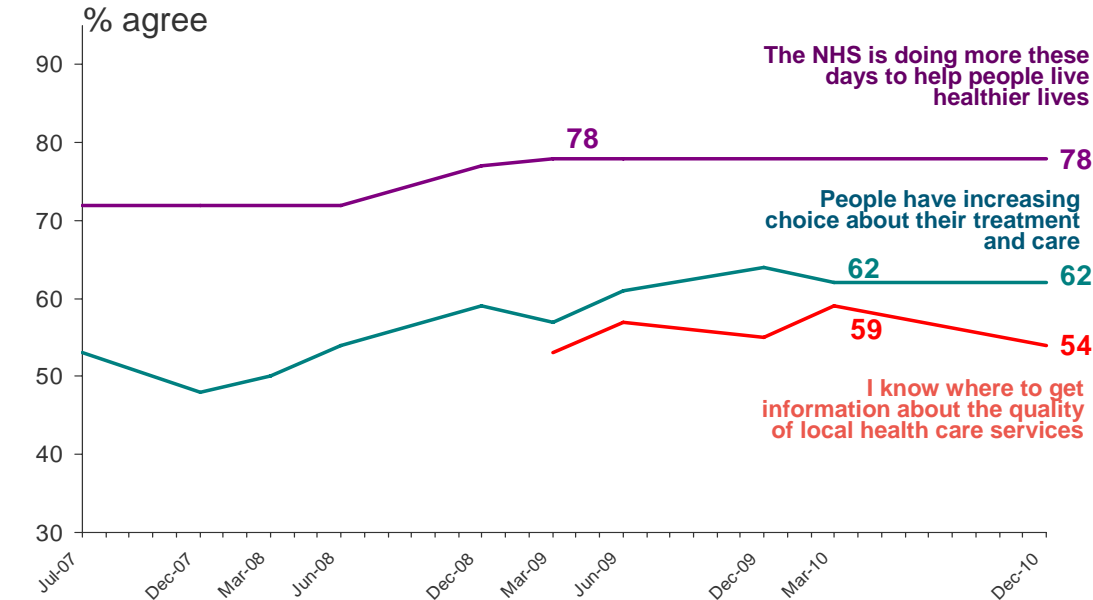
### 5.4 Patient involvement

The public’s views about their involvement in their treatment and care is mixed. The proportion of people who think that they **have increasing choice about their treatment and care** has not changed since March 2010 (62%), but people are now less confident that they **know where to get information about the quality of local services** (54% now agree, compared with 59% in March 2010). People are unsure whether they are **able to make improvements to NHS services in their local area if they want to**, with similar proportions agreeing and disagreeing with this statement (39% agree and 36% disagree).

However, a large majority think that **the NHS is doing more these days to help people live healthier lives** (78% agree). There has been no change since this question was last asked in March 2009.

## Patient involvement

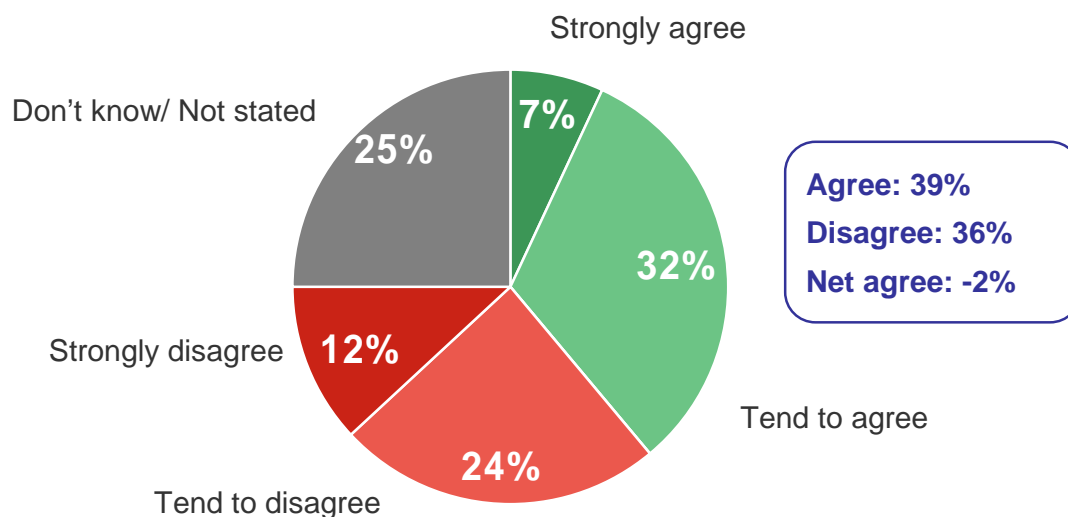
Q Please tell me whether on the whole you agree or disagree with each of the following statements:



Base: 1,011 English adults aged 16+, December 2010  
 \*statement not asked in Dec 08, March 09, June 09  
 Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
 Ipsos MORI

## People are unsure if they can make improvements to local NHS services

Q Please tell me whether on the whole you agree or disagree with each of the following statements: People are able to make improvements to NHS services in their local area if they want to?



Base: 1,011 English adults aged 16+, December 2010

Source: Ipsos MORI/DH Perceptions of the NHS Tracker

Ipsos MORI



Older people are more likely to think that people have increasing choice about their treatment or care (67% of people aged 65 and over agree compared with 62% overall). This could reflect their greater familiarity with services as more frequent users. Younger people are more likely to think that people are able to help make improvements to NHS services in their local area if they want to (52% of those aged 16 to 24 compared with 39% overall). People in social grades A/B are more likely to disagree with this statement (44% compared with 36% overall).

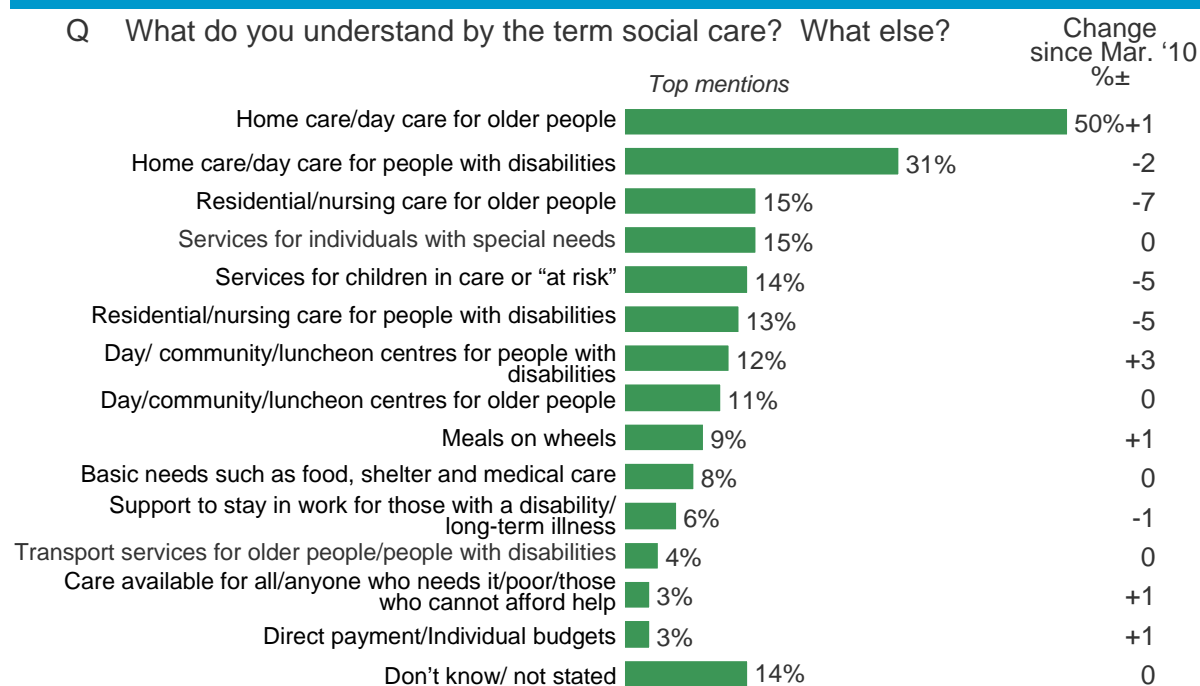
# Care and Support


## 6. Care and Support

### 6.1 Understanding of social care

There has been little change in the public's understanding of the term 'social care' since March 2010. Social care is still most likely to be interpreted by the public as the provision of home or day care. Half of people understand it to mean home care/ day care for older people (50%) and three in ten home care/ day care for people with disabilities (31%). Other common descriptions of social care are residential/ nursing care for older people (15%), services for individuals with special needs (15%), services for children in care or "at risk" (14%) and residential/ nursing care for people with disabilities (13%). The proportion of people who are unable to define social care remains stable at 14%.

### Understanding of social care



Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
 Ipsos MORI 

Young people are still least likely to understand what is meant by the term social care (31% of 16 to 24 year olds say they don't know compared with 14% overall) and this is likely to be linked to lower levels of exposure to social care services. This has increased since March 2010, when around one in five of this age group said they did not know (23%). People in lower social grades (D/E) are also more likely than other social grades to be unable to give a definition for social care, with one in five of them saying they 'don't know' compared with one in ten of those in social grades A/B (21% compared with 10%).

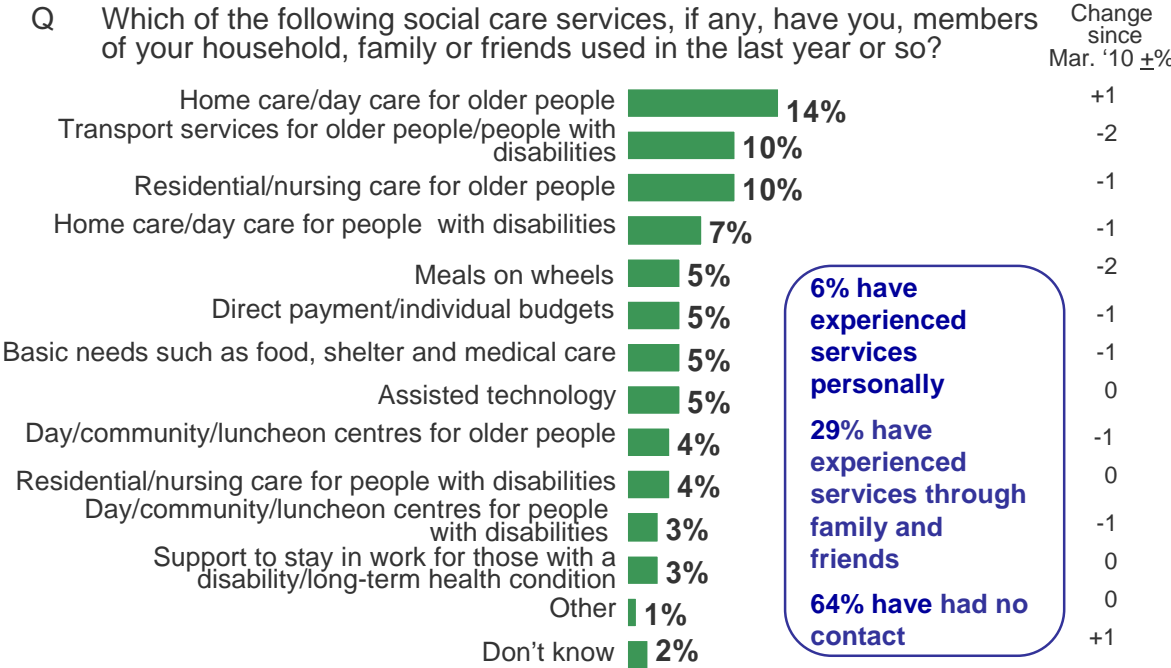
## 6.2 Experience of social care

We consistently find that around two thirds of the general public have not had any contact with social care services in the last year (64% in this wave). A third have come into contact with some form of social care either personally or through a household member, family or friend (33%), though only one in twenty have personally (6%). Just under one in five people are multiple users of social care, meaning they have been exposed to more than one service in the last year (18% of social care users).

The most commonly experienced social care service is home care/ day care for older people (14% have experienced it either personally or through their family or friends). As discussed earlier, this is also the most frequently cited definition of social care. A much higher proportion of people have used transport services for older people/ people with disabilities than include it in their definition of social care (10% compared with 4%).

Of those people who have used social care services personally in the last year, the most common service used is direct payment/ individual budgets (23% of this group have used this service). One in five have used assisted technology (20%) and similar proportions have used transport services for older people/ people with disabilities and home care/ day care for people with disabilities (both at 16%).

### Use of social care services



Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
 Ipsos MORI 

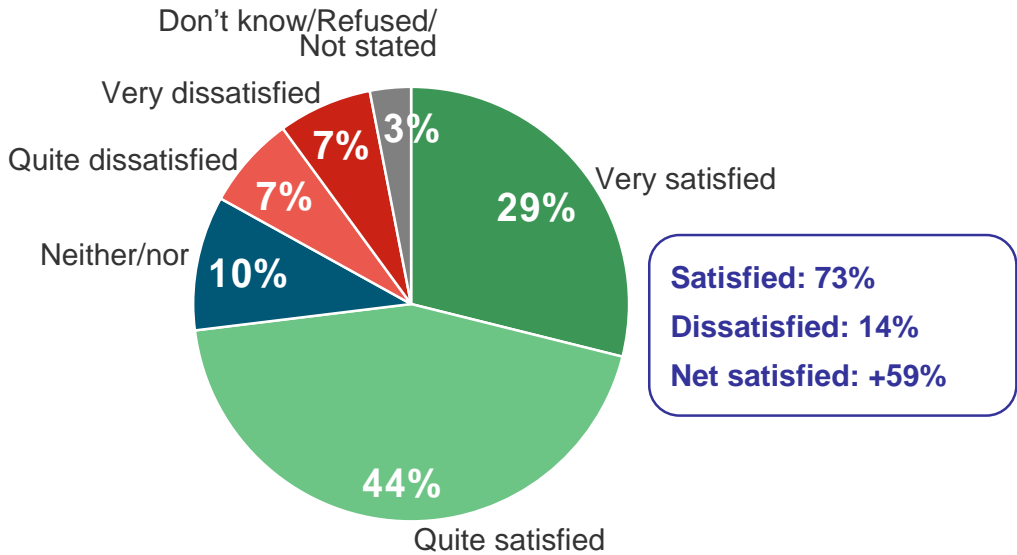
There are some differences in the use of social care among people of different social grades. One in six people in professional/ managerial positions have experienced residential/ nursing care for older people in the last year compared with less than one in ten of those in unskilled work or who have retired (17% of A/Bs compared with 8% of D/Es).

### 6.3 Satisfaction with social care

A large majority of those who have received or experienced social care services are satisfied with the service (73%), with three in ten saying they are very satisfied (29%). This is the highest level of satisfaction recorded by this survey to date. Satisfaction has risen since March 2010, when it dropped to 64%, and is now more in line with previous waves of the survey. Dissatisfaction remains fairly constant at 14%. As discussed earlier, there has been an increase in the proportion of people who agree that people are treated with dignity and respect when they use social care services (from 43% in March 2010 to 48% now).

## Majority of social care users satisfied

Q Overall, how satisfied or dissatisfied are you with the service?



Base: All respondents who have received/experienced social care (344), English adults aged 16+, December 2010  
**Ipsos MORI**

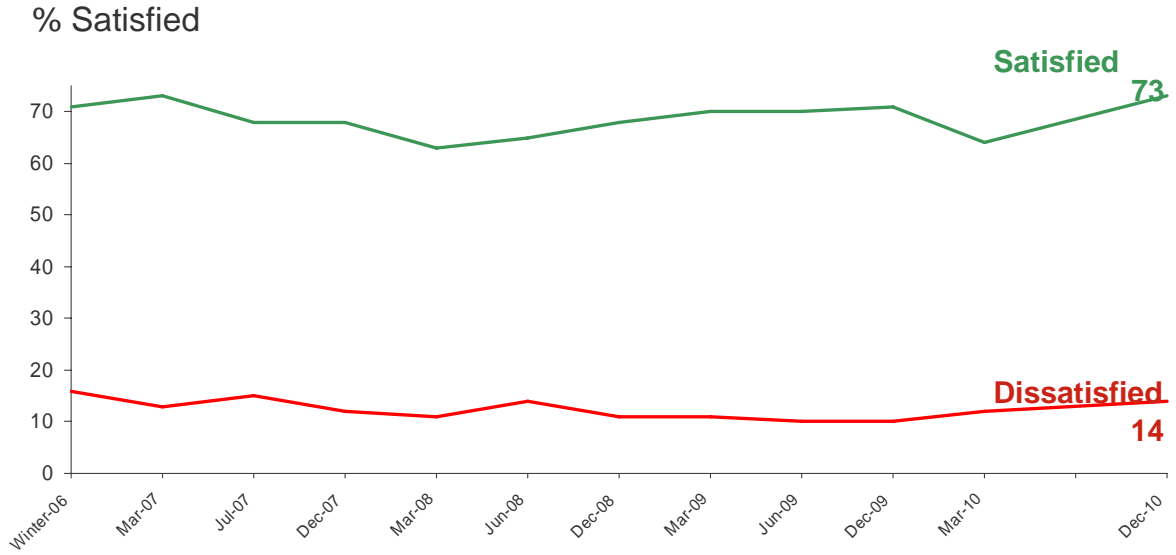
Source: Ipsos MORI/DH Perceptions of the NHS Tracker





# User satisfaction with social care - trends

Q Overall, how satisfied or dissatisfied are you with the service?



Base: All respondents who have received/experienced social care, English adults aged 16+ (c.330 per wave)

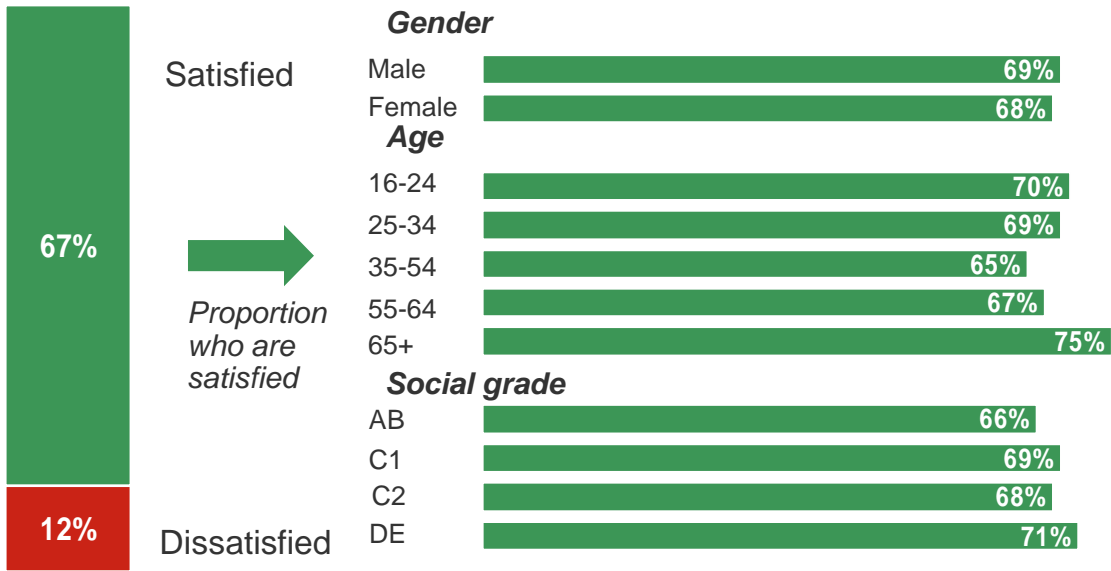
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker 

Older people are the most likely to be satisfied with social care services (75% of those aged 65 and over are satisfied compared with 67% overall) and middle aged people are the least likely to be satisfied (65% of 35 to 54 year olds are satisfied compared with 67% overall). This mirrors patterns of satisfaction with the NHS as a whole, as discussed in chapter 1. Those in the lowest social grades are the most likely to be satisfied (71% of D/Es compared with 67% overall). (This is when looking across the data collected between December 2006 and December 2010 to create large enough sub-group numbers.)

## Aggregated satisfaction with social care

Q Overall, how satisfied or dissatisfied are you with the service?



Base: All respondents who have received/experienced social care (4,013), English adults aged 16+, Winter 2006 – December 2010

Source: Ipsos MORI/DH Perceptions of the NHS Tracker

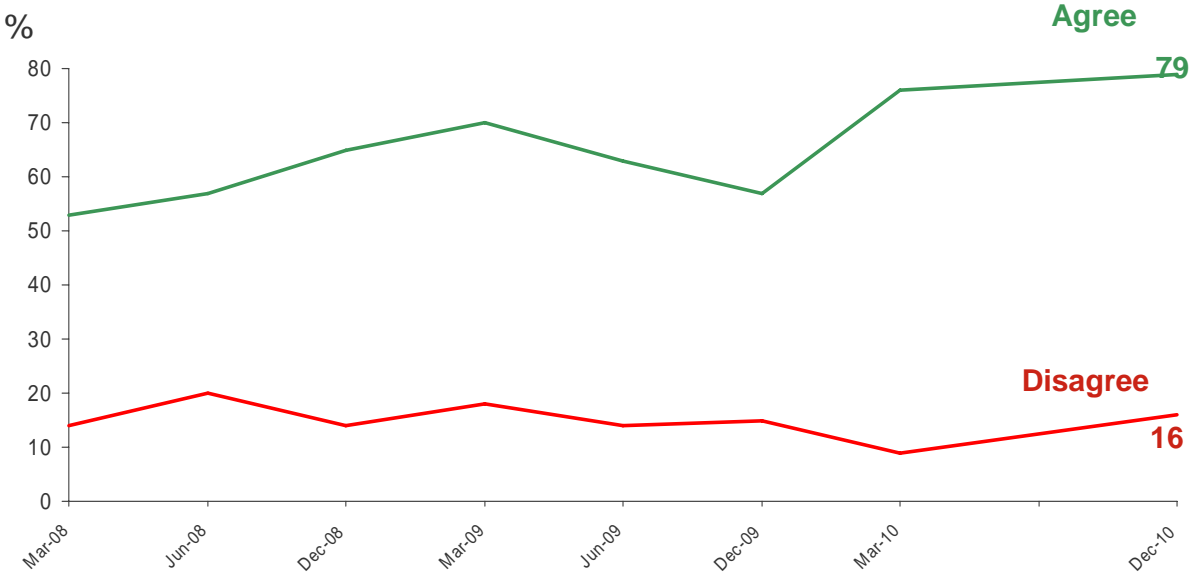
Ipsos MORI



Of the relatively small number who have personally used social care services in the last year, four in five agree with the statement 'social care services I receive take account of my personal needs' (79%). This is the highest level of agreement recorded by this survey. The proportion of users who disagree with the statement has also increased, almost doubling from 9% in March 2010 to 16% now. The small base size of personal users of social care services must be considered when looking at this data though as differences in agreement levels could predominately be due to this.

## Tailoring of social care - trends

Q On the whole do you agree or disagree with the statement "Social care services I receive take account of my personal needs"?



Base: All respondents who have received/experienced social care personally, English adults aged 16+ (c.75 per wave)

\* Please note small base size means these trends are indicative only

Ipsos MORI

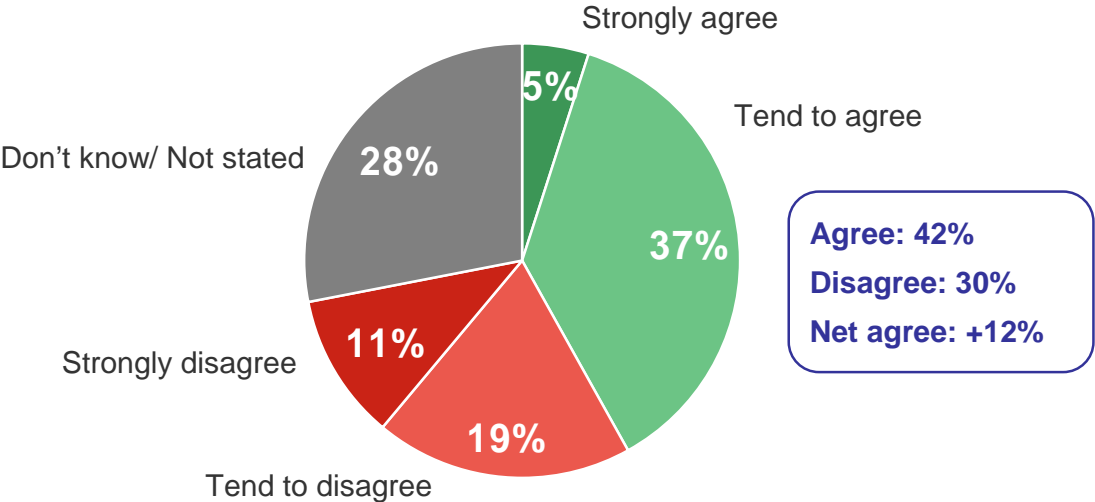
Source: Ipsos MORI/DH Perceptions of the NHS Tracker



People are divided about whether the NHS and social care services work well together to give people coordinated care. Two in five agree that they do, but three in ten disagree and around the same proportion say they don't know (42%, 30% and 28% respectively). These figures have remained fairly stable over the course of this research.

## People unsure if NHS and social care services work well together

Q Please tell me whether on the whole you agree or disagree with each of the following statement: NHS and social care services work well together to give people coordinated care?



Base: 1,011 English adults aged 16+, December 2010  
Ipsos MORI

Source: Ipsos MORI/DH Perceptions of the NHS Tracker

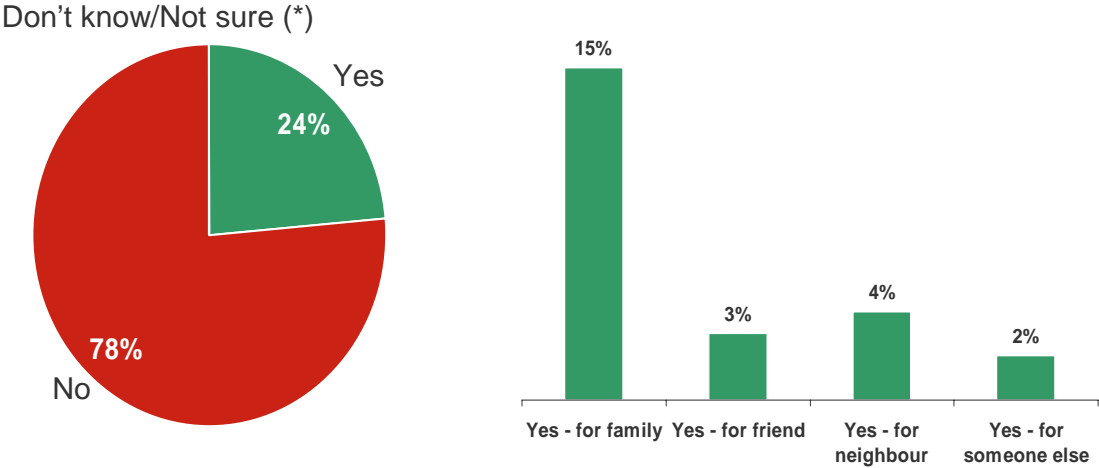


### 6.4 Informal care

Almost a quarter of the public identify themselves as informal social carers, with 24% saying they give help or support to family members, neighbours or others because of long term physical or mental ill health or disability, or problems related to old age. The breakdown of who people provide informal social care for has remained fairly constant with the largest group being family members (15%), followed by neighbours (4%), friends (3%) and then others (2%).

## Unpaid social care

Q Do you look after, or give any help or support to family members, neighbours or others because of long term physical or mental ill health or disability, or problems related to old age?



Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
**Ipsos MORI** 

### 6.5 National and local social care policy

As with perceptions of the NHS, there is a perception gap between the public’s attitude towards local social care services and national policies for social care. Two in five people agree with the statement ‘my local authority is providing people in this area with good social care services’, but less than three in ten agree that ‘the government has the right policies for social care in England’ (40% compared with 28%). Although this long-standing perception gap is narrowing for social care, it still exists.

Confidence that the government has the right policies for the social care has decreased since March 2010, from 33% to 28%. Lack of familiarity with the new government’s policies is

again evident, as it is for the NHS. The proportion saying they neither agree nor disagree has increased by six percentage points, from 21% to 27%.

## Attitudes to social care – local vs. national



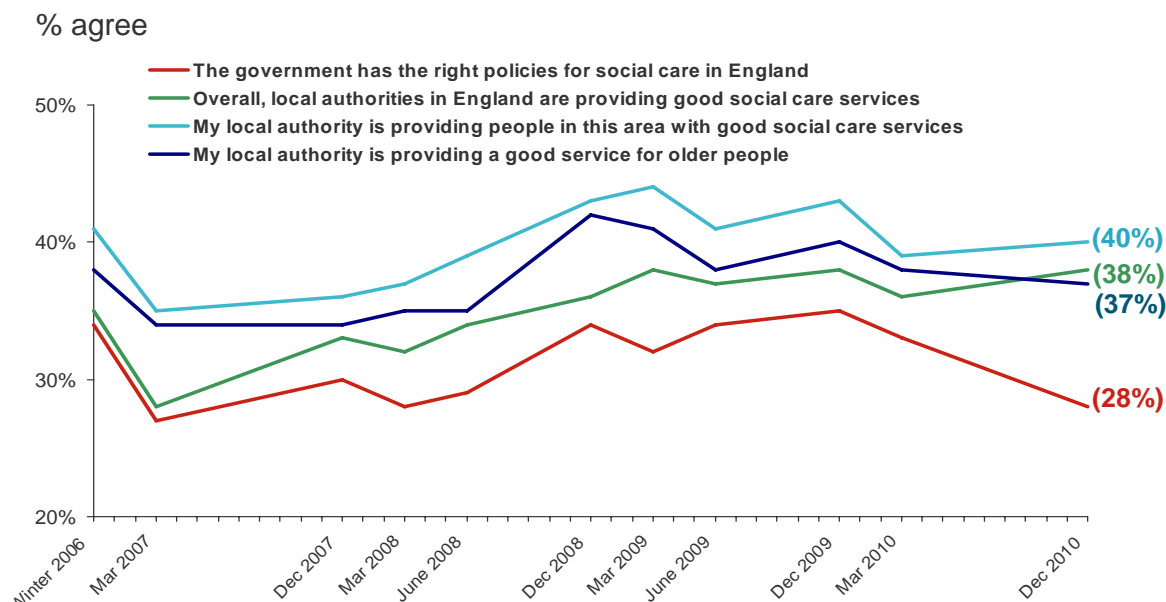
Base: 1,011 English adults aged 16+, December 2010 Source: Ipsos MORI/DH Perceptions of the NHS Tracker

Ipsos MORI



## Attitudes to social care - trends

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



Base: English adults aged 16+ per wave (c. 1,000 per wave) Source: Ipsos MORI/DH Perceptions of the NHS Tracker  
Ipsos MORI

Informal social carers are more negative about social care services, both nationally and locally, than the general public overall. They are more likely to disagree that 'the government has the right policies for social care in England' (36% compared with 29% overall), that 'overall, local authorities in England are providing good social care services' (35% compared with 27% overall), that 'my local authority is providing people in this area with good social care services' (23% compared with 18% overall) and that 'my local authority is providing a good service for older people' (27% compared with 20% overall).

There are also some differences in attitudes to social care services across different age groups. Middle aged people are more likely to disagree that 'the government has the right policies for social care in England' (43% of 55 to 64 year olds disagree compared with 29% overall), whereas younger people are more likely to agree that 'overall, local authorities in England are providing good social care services' (55% of 16 to 24 year olds compared with 38% overall). Older people themselves are more likely to agree that 'my local authority is providing people in this area with good social care services' (52% of people aged 65 and over compared with 40% overall) and that 'my local authority is providing a good service for older people' (50% compared with 37% overall).

People who are optimistic about the future of the NHS are also more positive about the social care system. Those who think the NHS will get better over the next few years are more likely to agree that 'my local authority is providing people in this area with good social care services' than those who think the NHS will get worse (51% compared with 34%) and that 'the government has the right policies for social care in England' (40% compared with 23%).



# Background and technical details

# Background and technical details

## A. Background and objectives

This survey follows on from a series of surveys conducted by the Ipsos MORI Social Research Institute for the Department of Health between Spring 2000 and March 2010. The survey was initially conducted in 2000, with a follow-up in 2001, and it was conducted twice annually (once in the spring and once in the winter) up until 2007 when it was conducted three times a year, with waves in March, June and December. In 2010, it returned to two waves a year.

The aim of the survey is to explore public attitudes towards, and perceptions of, the NHS. In addition, the surveys provide a means of tracking public perceptions of the NHS over time.

The survey consists of 'tracker' questions, which have been asked on past waves of the survey and aim to assess how public opinion varies with time. However, the survey is designed to be flexible, and does allow additions of new topics and subject areas as they arise. For example, questions on the NHS Constitution were added in 2008, and questions around the future of care and support services were added in to the most recent waves – this flexibility means that the project reflects the most current issues of the NHS.

It should be noted that these surveys are based on a representative national sample (in England) of approximately 1,000 interviews, and so are subject to sampling tolerances as discussed in the appendix (c.  $\pm 3\%$  to 4% overall). The data provide a useful check on public sentiment and patient experience, and complement the individual Trust patient surveys undertaken by the Healthcare Commission.

The specific issues covered in this survey include:

- Overall perception of, and satisfaction with, the NHS - including satisfaction with the NHS nationally and locally, support for the government's policies for the NHS, optimism about the future of the NHS and perceptions of the biggest problems facing the NHS;
- Reported use of specific areas of NHS care - including General Practice, inpatient, outpatient, A&E, walk-in and NHS Direct services;
- Satisfaction with the most recent visit to hospital and GPs;
- Usage and satisfaction with social care;
- Attitudes towards proposed reforms to the NHS;

- Attitudes towards key statements concerning the NHS - such as NHS budgeting and efficiency, quality of care and hospital cleanliness.

## B. Methodology

Ipsos MORI carried out 1,011 interviews among a representative sample of adults aged 16+ living in 104 output areas (OAs) across the 9 Government Office Regions (GORs) of England. All OAs within each GOR were sorted by ward and by demographic type, with individual sampling points then selected at random.

Within each OA, quotas were set using ONS mid-year estimates for 2004 to reflect the profile of the areas in terms of age, sex, and work status. At the analysis stage, data were weighted to the population profile in terms of age, sex, working status and GOR according to the ONS mid-year estimates for 2004.

All interviews were conducted face-to face and in-home, between 22<sup>nd</sup> November and 23<sup>rd</sup> December 2010.

The December 2010 wave was conducted using CAPI (computer-assisted personal interviewing). Previous waves of this research have been conducted using pen-and-paper interviewing.

## C. Volume layout

This summary report for the December 2010 survey contains the following chapters:

- **Chapter 1: Executive summary** – an overview of key survey findings and their implications; and
- **Chapter 2-6: Main Results** – a summary in five parts (overall satisfaction, the future of the NHS, the NHS in context, key perceptions about the NHS, and care and support), including an analysis of results by NHS patient and demographic subgroups.
- **Background and technical details** (this section) – including a discussion of objectives, methodology, volume layout, interpretation of data and a note on publication of data;

These appendices also contain a guide to statistical reliability (overall results are accurate to within  $\pm 3$  percentage points), an explanation of social class definitions, and a sample profile.

## Referenced Reports

Where relevant, the March NHS Tracker report draws on research and data from other publications, produced both by Ipsos MORI and other organisations. Where other data is used this is clearly referenced in a footnote. Below is a summary of these references and their associated methodologies:

- **Ipsos MORI Issues Index** is conducted monthly among approx. 1,000 GB adults age 18+. Interviews are conducted face-to-face in home. The Issues Index asks the public for the biggest issues facing Britain. Access results at: <http://www.ipsos-mori.com/researchpublications/researcharchive/poll.aspx?oltemId=2420&view=wide>
- **Ipsos MORI Key Drivers Analysis** As part of our ongoing work for the Department of Health, Ipsos MORI conducted a piece of in-depth analysis aimed at understanding and exploring the drivers of satisfaction with the National Health Service. This consisted of a series of Key Drivers Analyses on a range of different data sources, including the Perceptions of the NHS Tracking study, Ipsos MORI's monthly Political Monitor, Ipsos MORI's monthly Issues Index, the Delivery Index and the NHS Staff Survey.
- **CSR Reaction Poll** Ipsos MORI conducted a telephone survey for KPMG in October 2010 following the Comprehensive Spending Review. The results are based on 1,000 interviews with a nationally representative sample of British adults. Access results at: <http://www.ipsos-mori.com/researchpublications/researcharchive/poll.aspx?oltemId=2685>
- **Equity and Excellence: Liberating the NHS - Public reaction to the changing NHS** This research was conducted following the release of the NHS White Paper to measure public awareness of the announcements and reactions to the proposed reforms. 1,715 English adults were interviewed face-to-face between 30th July and 5th August 2010 on Ipsos MORI's Capibus.

## D. Presentation and interpretation of data

It should be remembered at all times that a sample and not the entire population of adults living in the 9 GORs of England has been interviewed. In consequence, all results are subject to sampling tolerances, which means that not all differences are statistically significant (please refer to the statistical reliability section in the Appendices).

This survey used a quota sampling approach. Strictly speaking the tolerances applied here apply only to random samples; in practice good quality quota sampling has been found to be as accurate.

Where appropriate, this report compares results from the present survey with those obtained in recent Ipsos MORI research for the Department of Health (please refer to the Appendices for an explanation of the sampling tolerances required when comparing results of the present survey with those conducted in previous years):

- **Spring 2000:** results based on 1,046 face-to-face, and in-home, interviews among a representative sample of adults aged 16+ living in 104 EDs between 14 April – 7 May 2000;
- **Winter 2001:** results based on 1,021 interviews across 104 EDs between 21 November – 10 December 2001;
- **Spring 2002:** results based on 1,041 interviews across 108 EDs between 4 May – 5 June 2002;
- **Winter 2002:** results based on 1,002 interviews across 108 EDs between 21 November – 24 December 2002;
- **Spring 2003:** results are based on 1,000 interviews across 108 EDs between 12 May – 8 June 2003;
- **Winter 2003:** results are based on 1,039 interviews across 104 EDs between 18 November 2003 – 18 January 2004;
- **Spring 2004:** results are based on 1,031 interviews across 104 EDs between 4 June – 6 July 2004;
- **Winter 2004:** results are based on 994 interviews across 102 OAs (Output Areas) between 13 November – 12 December 2004, and;
- **Spring 2005:** results are based on 1,002 interviews across 101 OAs between 1 June – 7 July 2005.
- **Winter 2005:** results are based on 1,041 interviews across 104 OAs between 12 November - 13 December 2005.
- **Spring 2006:** results are based on 1,009 interviews across 129 OAs between 13 June – 9 July 2006.
- **Winter 2006:** results are based on 1,011 interviews across 86 OAs between 10 November – 3 December 2006.
- **March 2007:** results are based on 1,013 interviews across 87 OAs between 3 March – 2 April 2007.

- **July 2007:** results are based on 1,026 interviews across 113 OAs between 22 June – 20 July 2007.
- **December 2007:** results are based on 1,011 interviews across 88 OAs between 12 November – 15 December 2007.
- **March 2008:** results are based on 1,036 interviews across 88 output areas between 10 March – 6 April 2008.
- **June 2008:** results are based on 1,003 interviews across 88 output areas between 27<sup>h</sup> May and 23<sup>rd</sup> June 2008.
- **December 2008:** results are based on 1,003 interviews across 104 output areas between 17 November – 15 December 2008.
- **March 2009:** results are based on 1,015 interviews in 104 output areas between 9 March and 5 April 2009.
- **June 2009:** results are based on 1,039 interviews in 104 output areas between 25<sup>th</sup> May and 26<sup>th</sup> June 2009.
- **December 2009:** results are based on 1,008 interviews in 104 output areas between 12 November and 10 December 2009.
- **March 2010:** results are based on 1,006 interviews in 104 output areas between 22<sup>nd</sup> February and 22<sup>nd</sup> March 2010.

It is worth bearing in mind that the survey deals with *public perceptions at the time of the survey rather than facts*; in particular, these perceptions may or may not accurately reflect levels and quality of service actually being delivered by the NHS.

Where the study refers to figures for those “satisfied”, this is an aggregate sum of “very satisfied” and “fairly satisfied”. In turn, “dissatisfied” is the total of “very dissatisfied” and “fairly dissatisfied” responses. Reference may also be made to “net” figures in this volume. This represents the balance of opinion on attitudinal questions, and provides a particularly useful means of comparing the results for a number of variables. In the case of a “net satisfaction” figure, this signifies the percentage satisfied on a particular issue less the percentage dissatisfied. For example, if an issue records 40% satisfied and 25% dissatisfied, the “net satisfaction” score is +15 points.

Where percentages do not sum to 100, this may be due to computer rounding, the exclusion of “*don’t know*” categories, or multiple answers. Throughout the volume an asterisk (\*) denotes any value of less than half of one percent but greater than zero.

# Guide to statistical reliability

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The sample tolerances that apply to the percentage results in this report are given in the table below. This table shows the possible variation that might be anticipated because a sample, rather than the entire population, was interviewed. As indicated, sampling tolerances vary with the size of the sample and the size of the percentage results.

Strictly speaking the tolerances shown here apply only to random samples; in practice good quality quota sampling has been found to be as accurate.

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## Approximate sampling tolerances applicable to percentages at or near these levels

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	10% or 90%	30% or 70%	50%
	±	±	±
<b>Size of sample on which Survey result is based</b>			
100 interviews	6	9	10
200 interviews	4	6	7
300 interviews	3	5	6
400 interviews	3	5	5
500 interviews	3	4	4
600 interviews	2	4	4
700 interviews	2	3	4
800 interviews	2	3	4
900 interviews	2	3	3
c. 1,000 interviews	2	3	3

*Source: Ipsos MORI*

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For example, on a question where 50% of the people in a sample of 1,011 respond with a particular answer, the chances are 95 in 100 that this result would not vary by more than 3 percentage points, plus or minus, from a complete coverage of the entire population using the same procedures.

Tolerances are also involved in the comparison of results from different parts of the sample. A difference, in other words, must be of at least a certain size to be considered statistically significant. The following table is a guide to the sampling tolerances applicable to comparisons.

Differences required for significance at or near these percentages			
	10% or 90%	30% or 70%	50%
	±	±	±
<b>Size of sample on which survey result is based</b>			
100 and 100	8	13	14
100 and 200	7	11	12
100 and 300	7	10	11
100 and 400	7	10	11
100 and 500	7	10	11
200 and 200	7	10	11
200 and 300	5	8	9
200 and 400	5	8	9
200 and 500	5	8	8
300 and 300	5	7	8
300 and 400	5	7	8
300 and 500	4	7	7
400 and 400	4	6	7
400 and 500	4	6	7
500 and 500	4	6	6
1,006 and 1,011 (March 2010 and December 2010 surveys)	3	4	4

*Source: Ipsos MORI*



# Guide to social classification

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The table below contains a brief list of social class definitions as used by the Institute of Practitioners in Advertising. These groups are standard on all surveys carried out by Ipsos MORI.

<b>Social Grades</b>		
	<b>Social Class</b>	<b>Occupation of Chief Income Earner</b>
A	Upper Middle Class	Higher managerial, administrative or professional
B	Middle Class	Intermediate managerial, administrative or professional
C1	Lower Middle Class	Supervisor or clerical and junior managerial, administrative or professional
C2	Skilled Working Class	Skilled manual workers
D	Working Class	Semi and unskilled manual workers
E	Those at the lowest levels of subsistence	State pensioners, etc, with no other earnings

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*Source: Ipsos MORI*

# Sample profile

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	<i>Unweighted</i>		<i>Weighted</i>	
	<i>N</i>	<i>%</i>	<i>n</i>	<i>%</i>
<b>Total</b>	<b>1011</b>	<b>100</b>	<b>1011</b>	<b>100</b>
<b>Gender</b>				
Male	495	49	490	49
Female	516	51	521	51
<b>Age</b>				
16-24	115	11	145	14
25-34	124	12	169	17
35-54	347	34	353	35
55-64	183	18	145	14
65+	242	24	200	20
<b>Social Class</b>				
AB	254	25	248	25
C1	343	34	355	35
C2	208	21	213	21
DE	206	20	196	19
<b>Work Status</b>				
Full-time	364	36	450	45
Not full-time	647	64	561	55
<b>Ethnicity</b>				
White	780	77	772	76
Black	151	15	152	15
Asian	66	7	71	7
Mixed	10	1	11	1

*Source: Ipsos MORI*