

# 9. NHS

## Taking the pulse: attitudes to the health service

We know that the spending increases and improvements in service delivery that took place under Labour were reflected in increased public satisfaction with the NHS. Here we examine the state of public attitudes towards the start of the Coalition government's term in office, a period during which they have proposed a number of radical reforms in relation to the NHS.

**Satisfaction with the NHS overall is at its highest ever level, though the picture in relation to specific services is more mixed.**

Seven out of ten people (70%) are satisfied with the NHS overall, the highest level ever recorded by the survey; the figure is up from 34% in 1997, when it was at its lowest point.

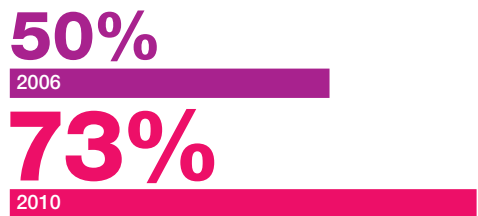


Satisfaction with most NHS services has not changed substantially since 2009. However, satisfaction with emergency services has increased in the last two years. For example, satisfaction with hospital accident and emergency departments now stands at 61%, up from 53% in 2008 and 43% in 2001.

Conservative and Liberal Democrat supporters' satisfaction increased by eight and nine percentage points respectively between 2009 and 2010, while Labour supporters' satisfaction levels remained stable.

**Expectations about waiting times have improved dramatically over the last decade. Positive views on waiting times are linked to satisfaction with the NHS overall, so this presents a challenge to the Coalition: how to maintain these high levels of satisfaction now that certain targets on waiting times have been dropped.**

The proportion who think they would get an outpatient appointment for a bad back within three months stands at 73%, up from 50% just four years earlier in 2006.



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In *The 27th Report*, we found unprecedented levels of satisfaction with the National Health Service (NHS) in the final year of the Labour administration (Appleby and Robertson, 2010). Since that time, the political landscape in relation to healthcare in Britain has changed dramatically. The election of the Conservative–Liberal Democrat coalition government in May 2010 heralded wide-ranging discussions around how the NHS is structured, managed and monitored, within a broader context of proposed substantial reductions to government spending. While the new administration has guaranteed increases in real terms to government spending on health, which currently accounts for around 18 per cent of government spending, it has proposed and implemented a range of initiatives to make the NHS more cost-efficient and effective. These include the abolition and revision of a number of patient waiting time targets introduced by Labour, as well as extensive discussions around giving control of commissioning decisions to clinicians including GPs.

It therefore seems timely, one year on, to revisit public attitudes to the NHS in the period immediately after the Coalition took power. Our 2010 fieldwork took place shortly after the general election, meaning it is too soon to expect to see any clear impact of the new government and its policies on public attitudes. However, throughout the chapter we look for any clues about whether the trends seen under Labour are set to continue or not; in particular, it may be that in a general election year people are more likely to take stock and think about public services, and different parties' policies towards them. Our analysis will also give us baseline measures against which, in future reports, we can monitor attitude change over the course of the current administration.

We start by examining satisfaction with the NHS and its component services. We then focus on expectations and perceptions about waiting times – an issue on which the Labour administration devoted considerable attention and resources and where the coalition government have already adopted and implemented a very different approach. On the basis of developments in both areas, the chapter concludes by considering likely public reactions to planned coalition government reforms. Although policy-making powers in relation to many aspects of healthcare are devolved, our analysis, as in previous years, covers attitudes across Britain as a whole.<sup>1</sup>

**Satisfaction with the NHS**

Since the *British Social Attitudes* survey series began in 1983, we have regularly asked about satisfaction with the NHS:

***All in all, how satisfied or dissatisfied would you say you are with the way in which the National Health Service is run nowadays?***

In 2009, the public expressed unprecedented levels of satisfaction with the NHS, with 65 per cent saying they were “very” or “quite” satisfied, a proportion which had increased from 36 per cent in 1996 (the year before Labour came to power). When our fieldwork took place in the summer of 2010, the newly-elected coalition government

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had not yet implemented any substantial changes to the management or funding of the NHS, meaning we would not expect our trend data to reflect public perceptions of coalition initiatives and their impact at this stage. In fact, as demonstrated in Figure 9.1, satisfaction levels rose even further – with 70 per cent reporting satisfaction, an increase of five percentage points since 2009 and representing the highest reported level of satisfaction since the survey began.

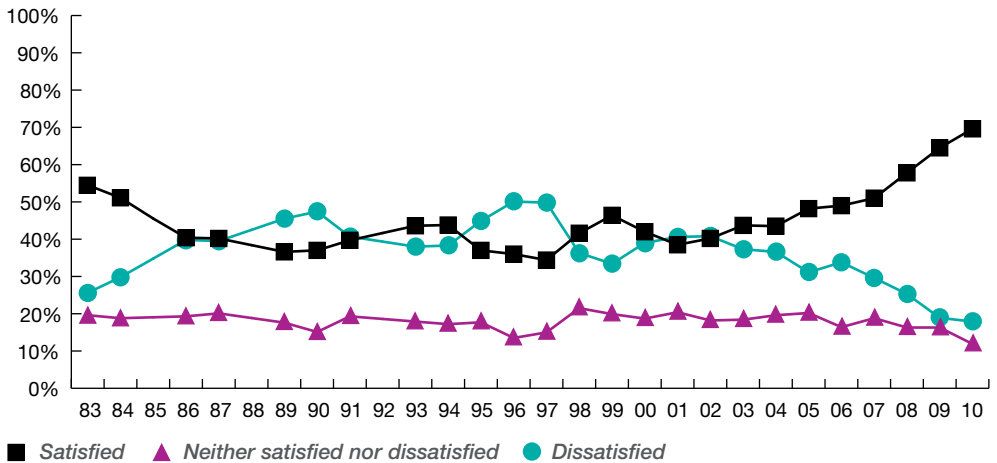
Is this just a continuation of the upwards trend of the last five years? It is not simply the case that the proportion who are dissatisfied with the NHS has declined as the proportion who are satisfied has risen, though that has been the case in the past. Dissatisfaction levels were similar in 2009 and 2010 (19 and 18 per cent respectively). Conversely, it is the proportion saying “neither satisfied nor dissatisfied” that has reduced – from 16 per cent in 2009 to 12 per cent in 2010. With the election of a new government in May 2010 it may be that people have been weighing up the standpoints of the different parties in relation to healthcare, and therefore are more inclined to express an opinion – although there is no evidence of such an effect occurring in relation to previous general elections.

Given the change in government from Labour to a Conservative-Liberal Democrat coalition, a pertinent question is whether the satisfaction levels of supporters of particular parties have changed and, if they have, whether these shifts are driving overall satisfaction. We already know that party supporters are more satisfied with the NHS when ‘their’ party is in power; in the first two years of the Labour administration, elected in 1997, there was a surge in satisfaction among Labour supporters, while the satisfaction levels of Conservative supporters declined slightly (Appleby and Alvarez-Rosette, 2003). We see a similar effect in 2010, with the satisfaction levels of those supporting the incumbent coalition government increasing markedly (by nine percentage points for Conservative identifiers and eight percentage points for their Liberal Democrat counterparts). However, rather than declining (as in 1997), the satisfaction levels of the supporters of the losing party have remained stable. Perhaps Labour identifiers view the improvements in the NHS as a reflection of the ongoing legacy of their party’s term in office. If so, this may be a ‘cusp’ year, in which supporters of all the main parties had a reason to be satisfied. That suggests that the increase in satisfaction between 2009 and 2010 could be a temporary effect, rather than simply a continuation of the upward trend of the last few years.

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# 70%

**reported satisfaction with  
the NHS, an increase of  
five percentage points  
since 2009**

**Figure 9.1 Satisfaction with the NHS, 1983–2010**

The data on which Figure 9.1 is based can be found in the appendix to this chapter

Satisfaction with the NHS as a whole is a powerful overarching measure, but in order to get a more nuanced understanding of satisfaction with health services, we also ask about satisfaction with a range of individual services including GPs, dentists, hospital inpatient and outpatient services, ambulance services, hospital accident and emergency departments and diagnostic services (such as X-rays, scans or hearing tests).

The picture over time is mixed. As we saw in *The 27th Report*, satisfaction with GPs initially fell under Labour, only starting to recover in 2005. Satisfaction with dentists was in long-term decline until 2004 where it flattened out, beginning to rise again in 2009. And, while satisfaction with outpatient departments rose in the last years of the Labour regime to their highest level to date, satisfaction with inpatient services were in decline for much of the period, only beginning to recover in 2007 (Appleby and Robertson, 2010).

Between 2009 and 2010 satisfaction with GPs, NHS dentists, inpatient and outpatient services, diagnostic services and NHS Direct has remained reasonably steady, with minor, though not significant, fluctuations occurring in both directions. The satisfaction levels for these services presented in Table 9.1 are very similar to those which we reported on in 2009. In particular, it is notable that satisfaction with GPs has not changed significantly since 2009, despite government plans for their role to expand to include the commissioning and managing of health services. This is something that we will continue to monitor in future reports, as their new role takes form.

For two NHS services – ambulance services and hospital accident and emergency departments – satisfaction levels have increased substantially in recent years. We asked about NHS ambulance services for the first time in 2008, when six in ten (61 per cent) indicated they were “very” or “quite” satisfied. By 2010 this proportion has risen by seven percentage points, to 68 per cent. Satisfaction with hospital accident

and emergency departments has been measured at regular intervals since 1999, when slightly more than half (53 per cent) were satisfied. After reaching a low point of 43 per cent in 2002 it has risen fairly consistently – back to its original level in 2008 (53 per cent) and reaching 61 per cent in 2010, an increase of eight percentage points.

For these services, we do not have data for 2009, meaning we can't pinpoint precisely when the changes took place (it is certainly possible that as with our other measures, the main change had already happened by 2009, with little movement since), but regardless of this, the fast pace of increase is notable. These services were subject to waiting time targets introduced by Labour, and there is separate evidence that this resulted in real improvements (Department of Health, 2010). Although our data do not allow us to examine the link between satisfaction and waiting times for these particular services, we know from previous reports (Appleby and Robertson, 2010) that views on waiting times are closely linked to overall satisfaction levels. The fact that the Coalition has abandoned certain elements of the targets<sup>2</sup> therefore raises a question about whether this trend is set to continue or not.

**Table 9.1 Satisfaction with NHS services, 1996–2010**

	96	99	01	03	05	07	08	09	10
<b>GPs</b>									
% very/quite satisfied	77	76	71	72	74	76	77	80	77
<b>Dentists</b>									
% very/quite satisfied	52	53	53	52	45	42	42	48	51
<b>Inpatients</b>									
% very/quite satisfied	53	58	51	52	50	49	51	59	59
<b>Outpatients</b>									
% very/quite satisfied	52	56	50	54	61	60	61	67	68
<b>Diagnostic services</b>									
% very/quite satisfied	n/a	n/a	n/a	n/a	n/a	n/a	n/a	72	75
<b>NHS Direct</b>									
% very/quite satisfied	n/a	n/a	n/a	27	32	33	38	44	42
<b>Accident and emergency services</b>									
% very/quite satisfied	n/a	53	43	n/a	51	51	53	n/a	61
<b>Ambulance services</b>									
% very/quite satisfied	n/a	n/a	n/a	n/a	n/a	n/a	61	n/a	68
<i>Base</i>	1761	3143	2188	2293	3193	3078	3358	3421	3358

*n/a = not asked*

We have seen that while general satisfaction with the way in which the NHS is run nowadays is at its highest ever level, having increased significantly since 2009, the picture in relation to individual health services is more mixed. One factor which could potentially influence an individual's satisfaction with a particular service is the length of time which they, or those they know, have to wait to receive it. This is an issue to which the Labour administration paid particular attention and where the coalition government had begun to discuss and implement change at the time of data collection in the summer of 2010. It is to this topic that we turn next.

### **Waiting times – public expectations and perceptions**

The Labour government focused considerable energy and resources on reducing waiting times, with significant tangible outcomes.<sup>3</sup> However, one of the Coalition's first policies in relation to the NHS was to abolish or revise specific targets relating to waiting times, with the intention of removing perceived bureaucracy and interference in the work of health professionals. In June 2010, the Coalition cut two long-standing waiting time targets – for a patient to see a family doctor within 48 hours and for the period from hospital referral to start of treatment to last less than 18 weeks.<sup>4</sup> The intention was also expressed for the maximum waiting time in accident and emergency units of four hours to be removed the following year (this target was in fact revised in June 2010 and replaced with a set of quality indicators in April 2011). By June 2011, there was already some evidence that patient waiting times had increased, although this development cannot necessarily be directly attributed to the removal of the waiting time targets (Department of Health, 2011).

Although it is highly unlikely that the abolition of the targets would have impacted on actual waiting times by the time of data collection for the 2010 survey, it is worth reviewing public expectations about waiting times at this time, as these constitute a baseline against which to measure the long-term impact of these targets being dropped. Moreover, an increase in waiting times could impact on attitudes to the NHS more generally; multivariate analysis of the 2009 data revealed that perceptions about waiting times are strongly linked to levels of satisfaction, with those who think that waiting times have improved being significantly more likely to be satisfied with the NHS (Appleby and Robertson, 2010).

To examine this issue, we start by considering how long people expect to wait when they have an NHS appointment, asking about the following scenarios:

*Suppose you had a back problem and your GP referred you to a hospital out-patients' department. From what you know or have heard, please say whether you think you would get an appointment within three months?*

*And please say whether you think when you arrived, the doctor would see you within half an hour of your appointment time?*

Figure 9.2 shows that expectations about waiting times have become more positive over the past decade, having remained relatively constant for most of the 1990s. In 1993, 45 per cent thought that they would ("definitely" or "probably") get an appointment at a hospital outpatients' department within three months; by 2010 this figure had risen dramatically to 73 per cent. Much of this increase occurred during the past four years, with just 50 per cent expressing this view in 2006. Expectations have also become more favourable about the likelihood of being seen promptly by the doctor. In 1993, just 30 per cent thought they would be seen within half an hour of the appointment time, a proportion which had increased to 54 per cent by 2010.

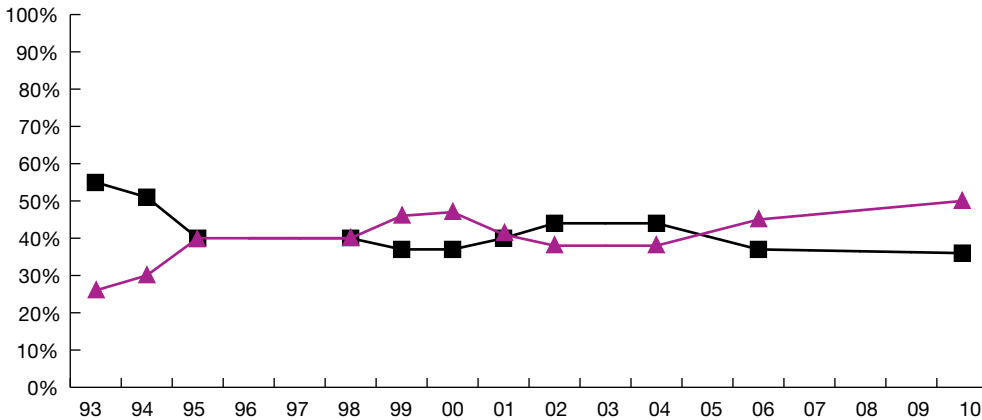


**Expectations about waiting times have become more positive over the past decade, having remained relatively constant for most of the 1990s**



The first scenario described above specifically relates to the target introduced by Labour for the elapsed time between being referred to hospital and an appointment to take no longer than 18 weeks. Considering the high public confidence we have found (almost three in four believe that the target would be met), the coalition government will need to watch carefully how their reforms affect public expectations.

**Figure 9.2 Expectations about waiting times for NHS appointments, 1993–2010**



■ Would get hospital outpatient appointment in 3 months

▲ Doctor would see you within half an hour of appointment time

The data on which Figure 9.2 is based can be found in the appendix to this chapter

Public expectations on waiting times are currently far more positive than in the past. But that doesn't tell us whether people perceive NHS performance on waiting times to have improved or not. To examine this, we asked respondents how much better or worse they think waiting times for a range of services have been getting over the last five years. Table 9.2 demonstrates that on each measure, the proportion who feel that waiting times have improved over the past five years has increased over the past decade. The most marked changes have occurred in relation to hospital appointments. In 1995, 17 per cent thought the time most people have to wait to get operations in NHS hospitals had got better over the past five years; by 2010, this proportion had more than doubled (39 per cent). The picture is similar in relation to views about waiting times for outpatients' appointments. When it comes to GP appointments, the increase is less marked. In 1995 28 per cent thought that waiting times in a GP's surgery had got better compared to 36 per cent now. Notably, while perceptions for each measure have improved over time, our measures for 2009 and 2010 are very similar – possibly suggesting this long-term rise in perceptions of NHS performance is at an end.

**36%**

think that waiting times in a GP's surgery have got better compared to 28 per cent in 1995

**Table 9.2 Views on improvements in NHS waiting times in past five years, 1995–2010**

% agree that has been getting “much better” or “better” over last five years	95	01	08	09	10
The time most people wait to get operations in NHS hospitals	17	11	31	n/a	39
The time most people wait to get out-patients’ appointments in NHS hospitals	17	12	28	37	36
The time most people wait at a GP’s surgery before their doctor sees them	28	23	34	39	36
The time most people would have to wait between being referred by their GP for hospital treatment and that treatment starting	n/a	n/a	n/a	36	37
<i>Base</i>	2399	2188	3358	3421	3297

We have seen that public expectations about waiting times and NHS performance in this area over time have greatly improved over the last few years. It seems likely that these changes are in response to the real improvements in waiting times that were a feature of the Labour administration. Clearly, we would anticipate a time-lag between the implementation of change and its impact on public attitudes and expectations. Nevertheless, it will be important to monitor these trends in the coming years, to assess the impact of the coalition government’s removal and revision of key waiting time targets on public attitudes to this issue. And as we know from *The 27th Report* (Appleby and Robertson, 2010), positive views about waiting times are strongly correlated with satisfaction about the NHS overall, meaning that any downturn in the former might well impact on public levels of satisfaction with the NHS.

### Conclusions

Public satisfaction with the NHS is at an all-time high, continuing an upwards trend that started a decade ago. Alongside that, people’s expectations and perceptions about waiting times for various NHS services are far more positive than they were at the turn of the century. We have also seen rapid increases in satisfaction with accident and emergency services in the last two years.

However there are some signs that the positive trends in attitudes towards the NHS seen in the last decade may be stalling. Satisfaction levels for specific NHS services, such as GPs, inpatient and outpatient services have seen little change since 2009, having increased substantially in recent years. And while there has been a fast rate of increase in perceptions of improvement about waiting times in recent years, the

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levels have stagnated since 2009. Perhaps this is in part related to the fact that this was a general election year with a change of government – with public debates about the different parties’ policies on public services being relatively high profile. Or it may be that after such considerable improvements over time, levels are reaching a ceiling beyond which it’s unlikely they will improve much further.

The impact of the coalition government’s policies on the public’s experiences of the NHS is something we can monitor in future years. Nevertheless, as we have seen with perceptions about waiting times, it seems clear that the public do notice real changes in service delivery, meaning that any perceived decline in the quality of services or speed with which they can be accessed has considerable potential to shift satisfaction downwards – given the very substantial degree to which it rose under Labour.

What is clear is that we have a public who are very happy with the NHS and have high expectations about service delivery, and that will be challenging for the government to maintain as NHS reforms begin to take effect.

### Notes

1. In their analysis of 2009 data, Appleby and Robertson (2010) found that levels of satisfaction with the NHS were similar in England, Scotland and Wales, with the exception of improvements over the last five years, despite the different policies and spending in the three countries. This chapter presents results for Britain; data for England only does not change the trends reported in any meaningful way.
2. Specifically, the four hour waiting target for accident and emergency departments has been replaced by a set of clinical quality indicators, one of which relates to total time in the department. For the ambulance service, the waiting time target for the most seriously ill patients has been retained.
3. For example, the median wait for an inpatient admission in England fell from 13.4 weeks in 1997 to around 4.2 weeks in 2009 (Department of Health, 2010).
4. The NHS constitutional right for the period from hospital referral to start of treatment to last less than 18 weeks remains in place. Separately, the revised NHS Operating Framework for 2010/11, published in June 2010, removed central performance management of this target by the Department of Health.

### References

Appleby, J. and Robertson, R. (2010), ‘A healthy improvement? Satisfaction with the NHS under Labour’, in Park, A., Curtice, J., Clery, E. and Bryson, C. (eds.) (2010), *British Social Attitudes: the 27th Report – Exploring Labour’s Legacy*, London: Sage

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## Acknowledgements

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## Appendix

The data for Figure 9.1 are shown below.

<b>Table A.1 Satisfaction with the NHS, 1983–2010</b>										
	83	84	86	87	89	90	91	93		
<b>Overall satisfaction</b>										
Very/quite satisfied	55	51	40	40	37	37	40	44		
Very/quite dissatisfied	26	30	40	40	46	47	41	38		
<i>Base</i>	1761	1675	3100	2847	3029	2797	2918	2945		
	<b>94</b>	<b>95</b>	<b>96</b>	<b>97</b>	<b>98</b>	<b>99</b>	<b>00</b>	<b>01</b>	<b>02</b>	
<b>Overall satisfaction</b>										
Very/quite satisfied	44	37	36	34	42	46	42	39	40	
Very/quite dissatisfied	38	45	50	50	36	33	39	41	41	
<i>Base</i>	3469	3633	3620	1355	3146	3143	3426	2188	2287	
	<b>03</b>	<b>04</b>	<b>05</b>	<b>06</b>	<b>07</b>	<b>08</b>	<b>09</b>	<b>09</b>	<b>10</b>	
<b>Overall satisfaction</b>										
Very/quite satisfied	44	43	48	49	51	58	64	64	70	
Very/quite dissatisfied	37	37	31	34	30	25	19	19	18	
<i>Base</i>	2293	3199	3193	2143	3078	3358	3421	3421	3358	

The data for Figure 9.2 are shown below.

<b>Table A.2 Expectations about waiting times for NHS appointments, 1993–2010</b>											
	93	94	95	98	99	00	01	02	04	06	10
<b>What would happen if you had a back problem and doctor referred you to hospital outpatients department</b>											
Would get hospital outpatient appointment in 3 months	55	51	40	40	37	37	40	44	44	37	36
Doctor would see you within half an hour of appointment time	26	30	40	40	46	47	41	38	38	45	50
<i>Base</i>	2945	3469	3633	3146	3143	3426	2188	2287	3199	2143	3358