

Public satisfaction with the NHS and social care in 2016

Results and trends
from the British Social
Attitudes survey

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Introduction

Since 1983, NatCen Social Research's British Social Attitudes (BSA) survey has asked members of the public – rather than only patients – about their views on, and feelings towards, the NHS and health and care issues generally. The latest survey was carried out between July and October 2016 and asked a nationally representative sample of nearly 3,000 people about their satisfaction with the NHS overall, and of nearly 1,000 people about their satisfaction with individual NHS services.

Below we summarise the headline results. More detail from the survey will be published by NatCen Social Research in summer 2017.

Key findings

- Public satisfaction with the NHS overall was 63 per cent in 2016, higher than in all but three of the past 34 years. The change in satisfaction since 2015 was not statistically significant.
- Satisfaction with GP services was 72 per cent and, as in previous years, was higher than satisfaction with any other NHS service. Again, the change in satisfaction since 2015 was not statistically significant.
- Satisfaction with NHS dentistry services was 61 per cent in 2016, up by 7 percentage points from 2015. With the exception of the year 2000, this is the highest level of public satisfaction with these services since the early 1990s.
- Satisfaction with social care services was 26 per cent, unchanged since 2015 and far lower than satisfaction with NHS services. Social care is the only service to have a negative net satisfaction score.
- Satisfaction with outpatient services was 68 per cent in 2016, its second highest level since the survey began. The change in satisfaction from 2015 was not statistically significant.
- Satisfaction with inpatient services was 60 per cent in 2016, the highest level for more than 20 years. The change in satisfaction since 2015 was not statistically significant.
- Satisfaction with accident and emergency (A&E) services was 54 per cent in 2016. Again, the change in satisfaction from 2015 was not statistically significant.
- Overall satisfaction with the NHS was higher among people aged 75 years or older (74 per cent) than among people under 65 (between 59 and 62 per cent).
- The three main reasons people gave for being satisfied with the NHS overall were: the quality of care, the fact that the NHS is free at the point of use, and the range of services and treatments available.
- The three main reasons that people gave for being dissatisfied with the health service were: long waiting times, staff shortages and lack of funding.

How satisfied is the British public with the NHS overall?

At a time when news headlines are dominated by a mounting sense of crisis across the health and social care system, the British Social Attitudes (BSA) survey provides an opportunity to step back and consider how public attitudes to the NHS compare to those in previous years.

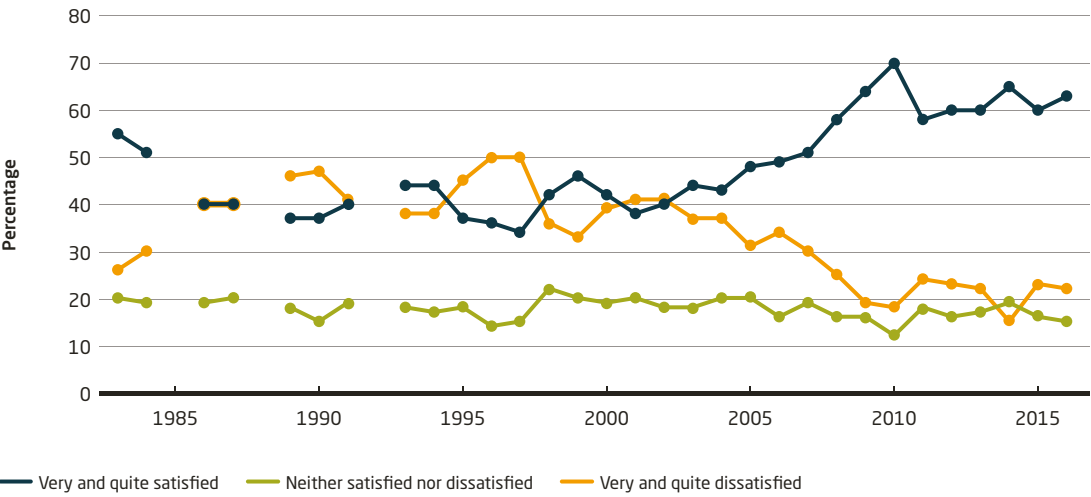
In 2016, public satisfaction with ‘how the NHS runs nowadays’ was 63 per cent. The change in satisfaction from the previous year (when satisfaction was 60 per cent) was not statistically significant.

Dissatisfaction was 22 per cent in 2016, and the change since 2015 (when dissatisfaction was 23 per cent) was not statistically significant.

The BSA survey has been asking members of the public for their views on the NHS and its individual services since 1983. Figure 1 shows that since 2000, changes in public satisfaction can be split into three broad phases: ‘steady growth’ between 2002 and 2010, as satisfaction grew to an all-time peak of 70 per cent; ‘a sudden drop’ in 2011 when satisfaction fell by 12 percentage points, the biggest single-year drop in the survey’s history; and ‘little change’ between 2012 and 2016, over which time (except for 2014) annual changes in satisfaction have not been statistically significant.

This long-term view shows that in 2016, public satisfaction with the NHS was high by historic standards – in fact satisfaction has only been higher in three of the past 34 years.

Figure 1 Public satisfaction with the NHS, 1983 to 2016



Question asked: 'All in all, how satisfied or dissatisfied would you say you are with the way in which the National Health Service runs nowadays?'

This question was not asked in 1985, 1988 and 1992

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

Who is the most satisfied with the NHS?

NHS satisfaction levels vary among different groups within the population. Figure 2 shows satisfaction rates split by recent contact with inpatient services, household income, gender and age. The black bars show the 95 per cent confidence intervals around each value, which are the range of values that, based on the survey data, we can be 95 per cent certain include the true satisfaction level for each group. Where the confidence intervals overlap, we cannot be confident that the true satisfaction levels differ between groups.

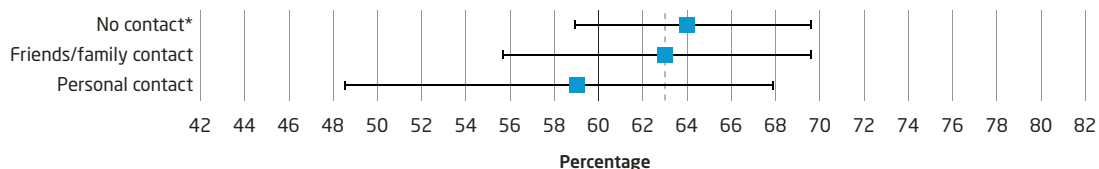
Respondents aged 75 and over reported higher levels of satisfaction (74 per cent) than those under the age of 65 (between 59 to 62 per cent). These differences are statistically significant.

There are only small differences between the rates of satisfaction reported by men and women, across income groups, and for those who have and haven't had recent contact with inpatient services, and these differences are not statistically significant.

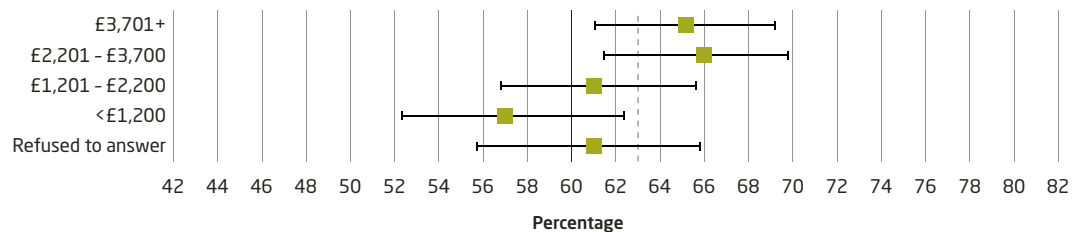
Figure 2 Percentage of respondents in different population groups who are very or quite satisfied with the NHS, 2016

--- Survey as a whole

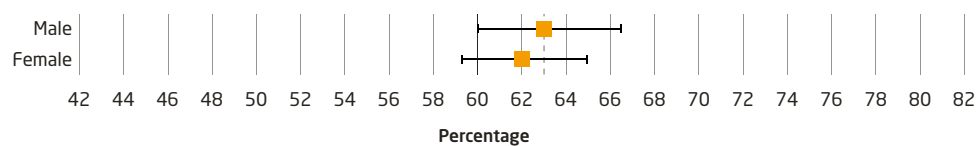
Contact with NHS inpatient services in past year



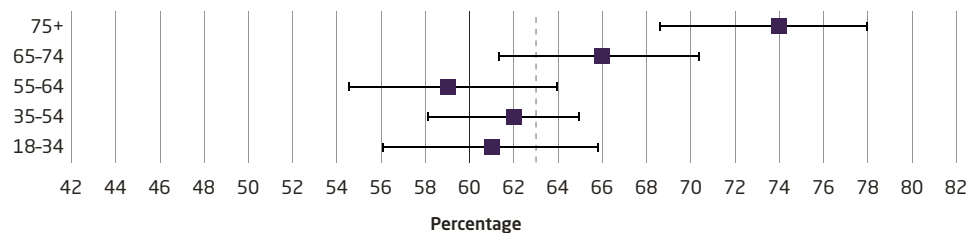
Household income (monthly, before tax)



Gender



Age



*No contact by the respondent or their family and friends

Question asked: 'All in all, how satisfied or dissatisfied would you say you are with the way in which the National Health Service runs nowadays?'

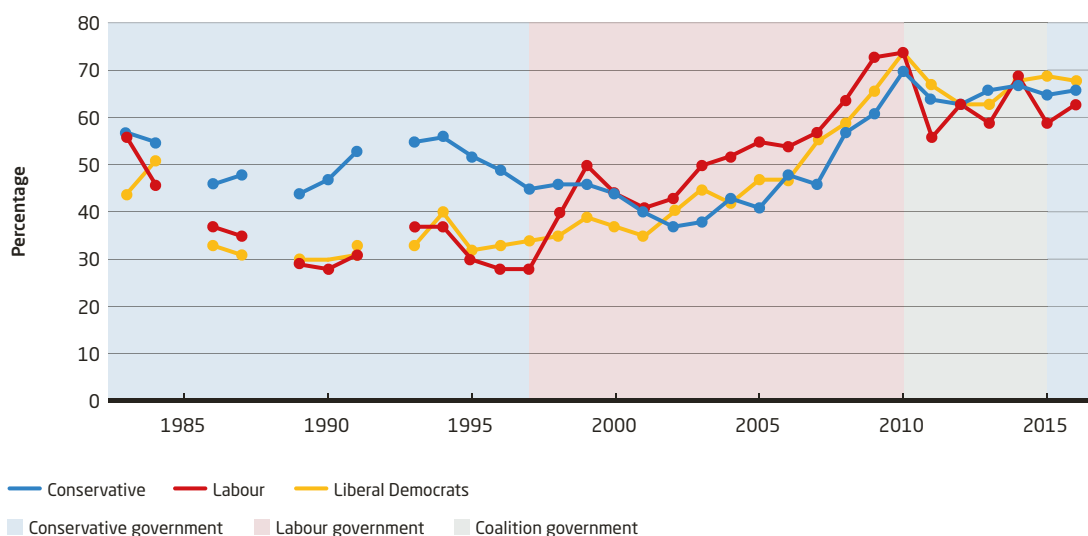
Error bars show the 95% confidence interval for each data point

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

Satisfaction levels can also be influenced by political affiliation. People tend to report higher levels of satisfaction when the political party that they support is in power. This implies that satisfaction levels to some extent reflect people's views on the government's competence in running the service.

However, Figure 3 shows that in 2016 the highest levels of satisfaction were reported by supporters of the Liberal Democratic party (68 per cent). While there was a divergence in satisfaction levels between supporters of different political parties in 2015, levels converged in 2016 with no statistically significant difference in levels of satisfaction of Liberal Democrat, Conservative (66 per cent) and Labour (63 per cent) supporters.

Figure 3 Satisfaction with the NHS by party political identification - very or quite satisfied, 1983 to 2016



Question asked: 'All in all, how satisfied or dissatisfied would you say you are with the way in which the National Health Service runs nowadays?'

Satisfaction question not asked in: 1985, 1988 and 1992

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

How satisfied is the British public with different NHS services?

The survey also includes a set of questions that explore the public views on specific health and social care services. When interpreting this data, it is important to remember that this is a summary of the views of the public, rather than of patients, and many respondents will not have recently used the particular service they have been asked to comment on. Because of this, the survey asks respondents to draw on ‘your own experience, or from what you have heard’, so the experiences of family and friends and information from other sources, such as newspapers, are likely to influence their responses.

Many of the survey respondents will have visited their general practice in the past year, either for themselves or with a family member. The public’s familiarity with this service, and the ongoing and (often) more personal nature of their relationship with their GP (compared with, for example, their relationship with the outpatient department of their local hospital) may be part of the reason why GP services consistently receive higher satisfaction ratings than other NHS services. In 2016, public satisfaction with GP services was 72 per cent. The change from 2015 (when satisfaction was 69 per cent) was not statistically significant.

Figure 4 shows that, for one year at least, this ends the downward trend in GP satisfaction ratings that has been evident in the survey since 2010.

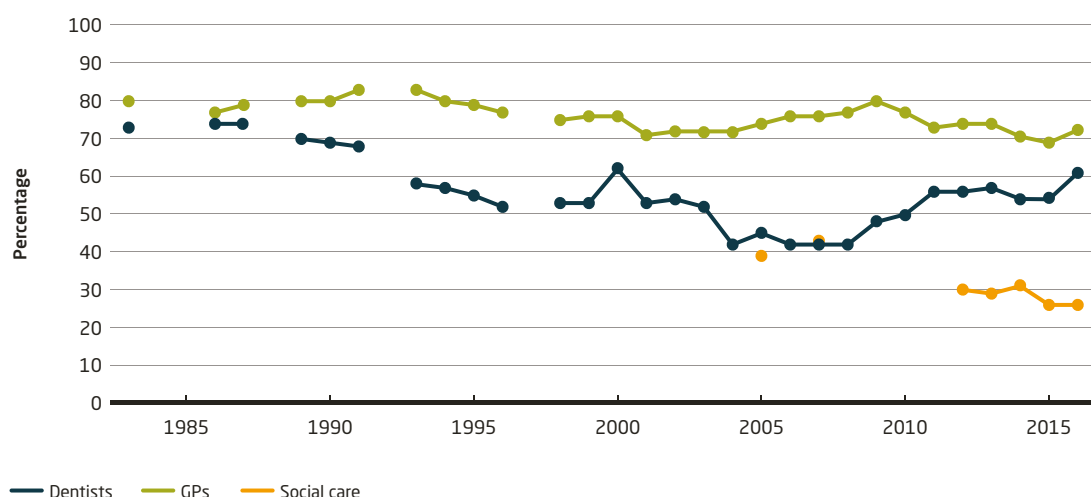
NHS England’s [national GP patient](#) survey includes a similar question that provides a useful comparator for these results (‘Overall, how would you describe your experience of your GP surgery?’). For this measure, the trend over the past two years is similar to the BSA survey: the proportion of (English) respondents who rated their GP experience as ‘fairly’ or ‘very’ good remained steady throughout 2015 and 2016 at around 85 per cent.

NHS dentistry was the only service to see a statistically significant increase in levels of public satisfaction this year; at 61 per cent it was up 7 percentage points from 2015. With the exception of the year 2000, this is the highest level of public satisfaction

with NHS dentistry services since the early 1990s. Figure 4 shows that there was a steep decline in public satisfaction with NHS dentistry services between 2000 (when satisfaction was 62 per cent) and 2004 (when satisfaction fell to 42 per cent). This may in part reflect difficulties people had in accessing services during that time, as [changes to NHS payment rates](#) led dentists to increase the amount of private work they undertook and decrease the amount of NHS work. Over the past decade, developments, including a focus by commissioners on increasing capacity, have led to significant improvements in access, and satisfaction has steadily increased.

The BSA survey defines social care services as personal support services provided by local authorities for people who cannot look after themselves because of illness, disability or age. In 2016, 26 per cent of respondents were satisfied with social care services, unchanged from 2015. For the past five years, public satisfaction with social care services has been considerably lower than it was a decade ago, when the question asked did not mention local authorities.

Compared to questions on NHS services, there is a higher proportion of ‘don’t know’ responses to the social care satisfaction question (12 per cent compared to 4 per cent for GP services). This may be because people are less familiar with social care services and are less likely to have had experience, either personal or through relatives or friends, of using them.

Figure 4 Satisfaction with GP, dentistry and social care services, 1983 to 2016**Questions asked:**

'From your own experience, or from what you have heard, please say how satisfied or dissatisfied you are with the way in which each of these parts of the National Health Service runs nowadays. First, local doctors or GPs? National Health Service dentists?'

GP and dentist questions not asked in 1984, 1985, 1988, 1992 and 1997

'And how satisfied or dissatisfied are you with social care provided by local authorities for people who cannot look after themselves because of illness, disability or old age?' (asked in 2012-2016)

'At some point in their lives people can need regular help looking after themselves because of illness, disability or old age...From your own experience, or from what you have heard, please say how satisfied or dissatisfied you are with the services provided to people who need this kind of regular help with looking after themselves, whose family cannot provide it?' (asked in 2005, 2007)

Social care questions not asked before 2005 or in 2006 and 2008-11

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

The BSA survey also asks respondents for their views on hospital-based services.

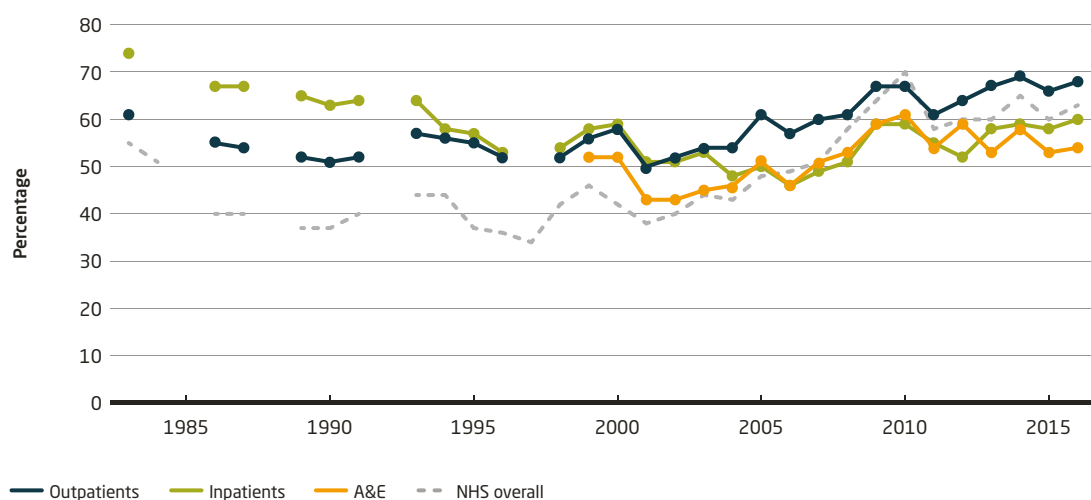
Public satisfaction with outpatient services was 68 per cent in 2016, its second highest level since the survey began. The increase in satisfaction since 2015 (when 66 per cent were satisfied) was not statistically significant.

Satisfaction with inpatient services was 60 per cent in 2016, and there has been no statistically significant change for the past four years. Nevertheless, this is the highest level of public satisfaction with inpatient services for more than 20 years.

As with all other NHS hospital services in 2016, the change in public satisfaction with accident and emergency (A&E) services (54 per cent in 2016 compared to 53 per cent in 2015) was not statistically significant.

These steady trends over the past two years suggest public views of hospital-based services have not been negatively affected by the junior doctors' strikes or media stories about NHS and social care funding and the pressures on services (see box p 17).

Figure 5 Satisfaction with inpatient, outpatient and A&E services, 1983 to 2016



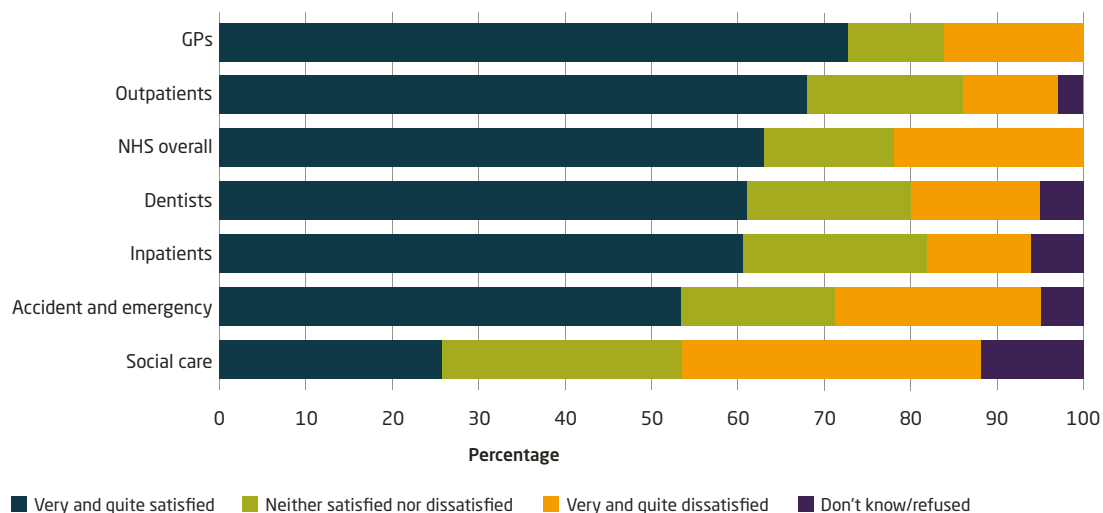
Questions asked: 'From your own experience, or from what you have heard, please say how satisfied or dissatisfied you are with the way in which each of these parts of the National Health Service runs nowadays... being in hospital as an inpatient?... attending hospital as an outpatient?... accident and emergency departments?'

These questions were not asked in 1984, 1985, 1988, 1992 and 1997

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

Figure 6 brings together public satisfaction data for health and social care services and the NHS overall in 2016. As in previous years, satisfaction with the social care services provided by local authorities was far lower than satisfaction with health care services. Social care was also the only service to have a negative net satisfaction score (calculated as satisfaction minus dissatisfaction) (Figure 7).

Figure 6 Satisfaction with NHS and social care services, 2016



Questions asked:

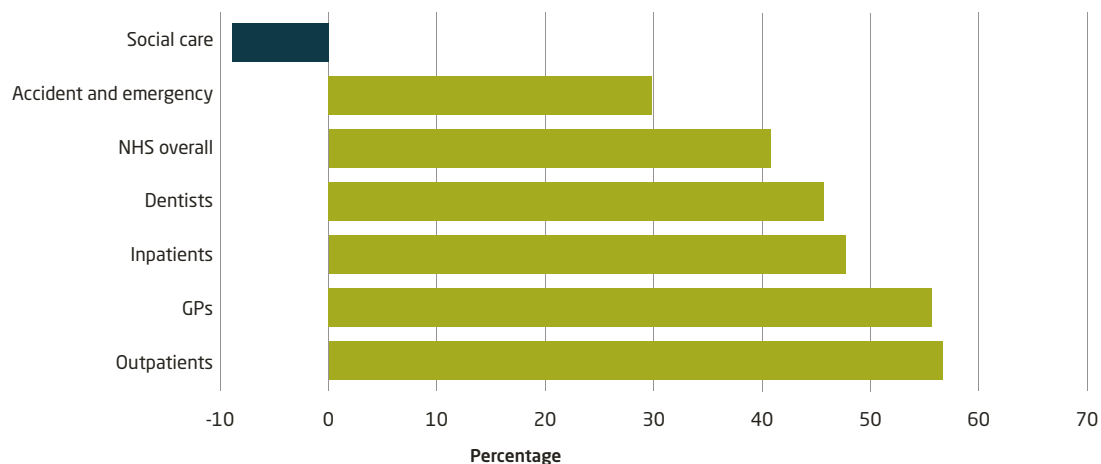
'All in all, how satisfied or dissatisfied would you say you are with the way in which the National Health Service runs these days?'

'From your own experience, or from what you have heard, please say how satisfied or dissatisfied you are with the way in which each of these parts of the National Health Service runs nowadays. First, local doctors or GPs?... National Health Service dentists?...being in hospital as an inpatient?... attending hospital as an outpatient?... accident and emergency departments?'

'And how satisfied or dissatisfied are you with social care provided by local authorities for people who cannot look after themselves because of illness, disability or old age?'

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

Figure 7 Net public satisfaction with the NHS and social care services in 2016
(percentage satisfied minus percentage dissatisfied)



Questions asked:

'All in all, how satisfied or dissatisfied would you say you are with the way in which the National Health Service runs these days?'

'From your own experience, or from what you have heard, please say how satisfied or dissatisfied you are with the way in which each of these parts of the National Health Service runs nowadays. First, local doctors or GPs?... National Health Service dentists?...being in hospital as an inpatient?... attending hospital as an outpatient?... accident and emergency departments?'

'And how satisfied or dissatisfied are you with social care provided by local authorities for people who cannot look after themselves because of illness, disability or old age?'

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

What drives public satisfaction?

It is likely that the BSA survey's measure of overall NHS satisfaction captures public views on a range of issues. To explore what lies behind this satisfaction rating, in 2015 and 2016 we included a follow-up question that asked respondents why they were either satisfied or dissatisfied with the NHS. The question presented people with nine possible reasons to explain their response and asked them to select up to three. These lists were developed with a small group of respondents who were asked an open-ended question about why they were either satisfied or dissatisfied.

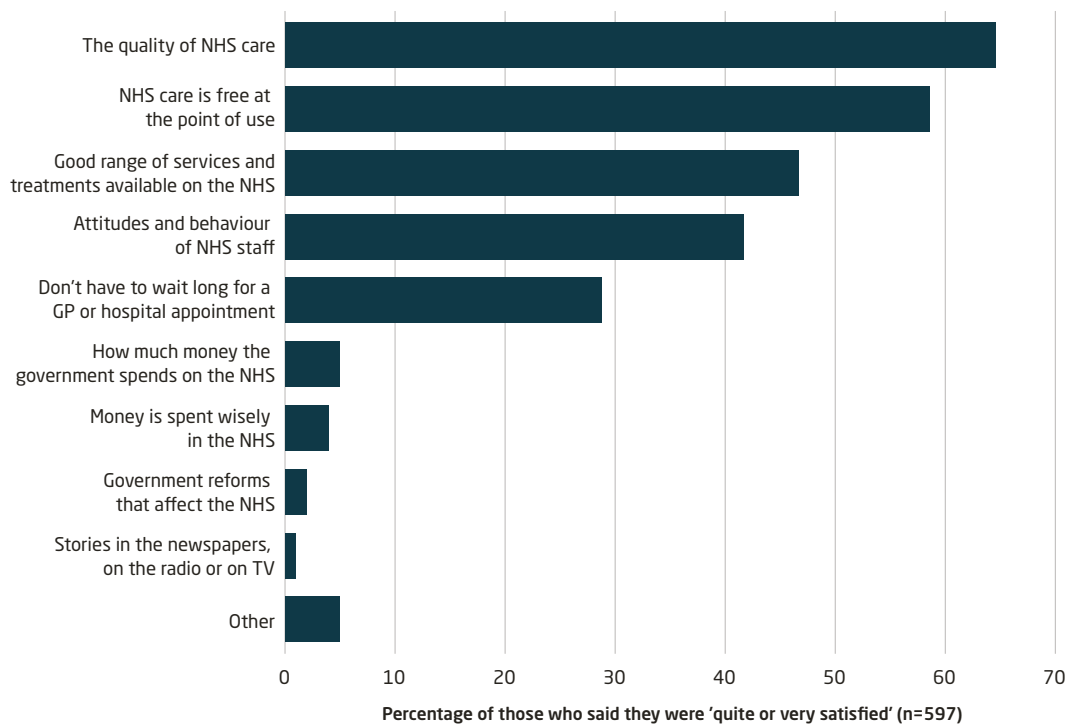
Figure 8 shows that among the 63 per cent of respondents who were satisfied with the NHS in 2016, the most frequently cited reasons for this were: the quality of care (65 per cent), care being free at the point of use (59 per cent), and the range of services available (47 per cent).

Figure 9 shows that among the 22 per cent of respondents who were dissatisfied with the NHS in 2016, the most frequently cited reasons were: waiting times (54 per cent), a lack of staff (48 per cent), and a lack of funding (45 per cent). While the government not spending enough on the NHS was a factor for 45 per cent of those who were dissatisfied, there was also a sizeable group (32 per cent) who felt money is wasted in the NHS.

The five most frequently cited reasons for both satisfaction and dissatisfaction were unchanged from the previous year.

Very few respondents said their satisfaction rating was influenced by stories in the newspapers, on the radio or on TV. However, media sources may have had an indirect impact on satisfaction by influencing underlying attitudes. Self-reports of the impact of media stories on an individual's attitudes are unlikely to pick up the full extent of media influence.

Figure 8 Reasons for satisfaction with the NHS overall, 2016

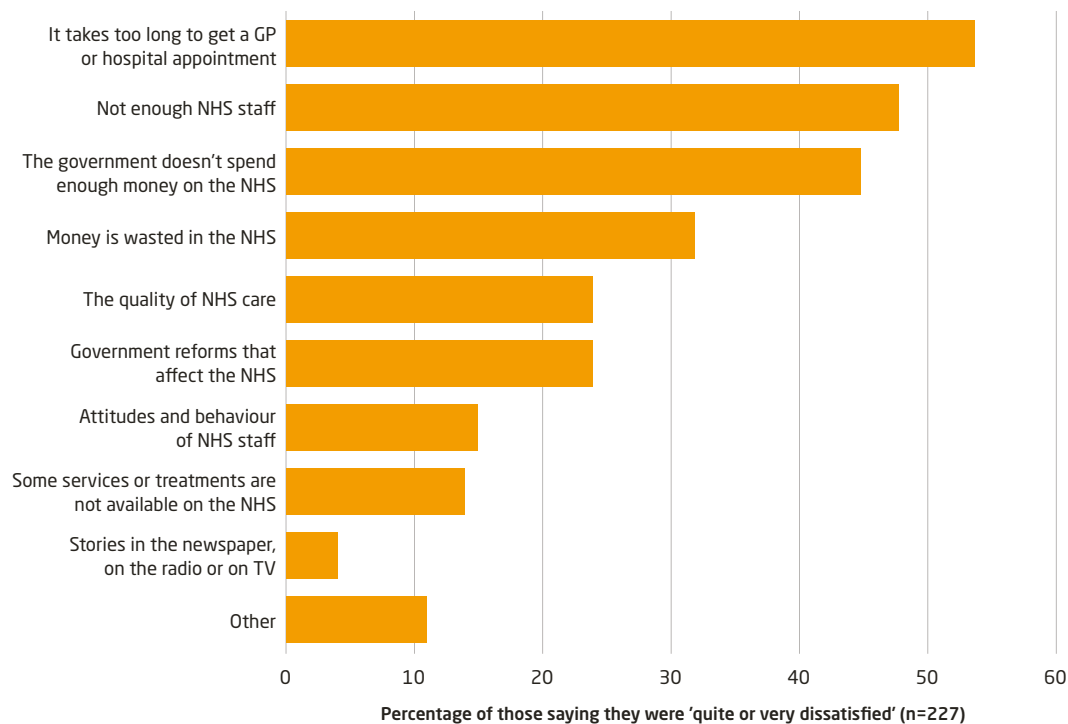


Question asked: 'You said you are satisfied with the way in which the National Health Service runs nowadays. Why do you say that? You can choose up to three answers.' (Options presented on a card).

This question was asked of a random third of those who said they were 'quite' or 'very' satisfied with the way the NHS runs nowadays, n=597

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

Figure 9 Reasons for dissatisfaction with the NHS overall, 2016



Question asked: 'You said you are dissatisfied with the way in which the National Health Service runs nowadays. Why do you say that? You can choose up to three answers.' (Options presented on a card).

This question was asked of a random third of those who said they were 'quite' or 'very' dissatisfied with the way the NHS runs nowadays, n=227

Source: King's Fund analysis of NatCen Social Research's British Social Attitudes survey data

Media coverage of the NHS: July-October 2016

The BSA survey was conducted during a politically turbulent period, with the NHS never far from the headlines.

In the aftermath of the EU referendum result there was media coverage of the implications of Brexit for the health service, with health leaders warning that it would worsen NHS staff shortages.

NHS staffing challenges could also be seen in the ongoing junior doctors' dispute with the government. Strikes took place early in 2016, and more were set to take place in September but were called off at the last minute.

In a time of rapid political change, Jeremy Hunt represented some rare continuity by being re-appointed Health Secretary. At the Conservative Party Conference in October, he revealed plans to increase the number of doctors' training places and to make the NHS 'self-sufficient' - in terms of training enough doctors to meet its needs - within 10 years.

The state of health and social care funding received regular media coverage. The government was criticised by members of the Health Select Committee for 'incorrect' claims on NHS spending. Concerns also grew over the crisis in social care funding and the pressures this caused for the health service.

Conclusion

In 2016 the NHS remained popular with the public, far more so than it was 10 or 20 years ago. In particular, the public values a system that provides high-quality, comprehensive services that are free at the point of use.

Despite increasing pressure on hospitals and growing waiting lists, both outpatient and inpatient services received some of their highest satisfaction ratings in decades. While the BSA survey measures public perceptions rather than user experience, the results show that these critical NHS services have managed to maintain public support in 2016. However, as the survey was conducted during the summer and autumn months, it does not pick up any change in public views that may have resulted from the intense pressure on the service this winter.

The most striking finding of the survey is the yawning gap between satisfaction with NHS and social care services. Public satisfaction with even the least popular NHS service (A&E) is more than double the level of satisfaction with social care. This result is unsurprising and is repeated every year that these questions have been asked. While this may in part reflect a lack of public understanding about what social care services are, the size of the gap suggests it may also reflect public views on disparities in both the funding of and entitlements to NHS and social care services.

The rich dataset provided by the BSA survey gives a different perspective on the current problems faced by the health and social care system. This long-term view reminds us that the NHS is popular with the public and has retained its reputation during turbulent times, but it also shows that the gulf between satisfaction with the services provided by the health system and by the social care system is wide and persistent. With social care services under huge pressure, this should focus the minds of politicians and policy-makers.

Methodology

NatCen Social Research's British Social Attitudes survey has been conducted almost every year since 1983. A selection of health and social care-related questions – including those on satisfaction reported here – has been funded by The King's Fund since 2011. Other funders sponsor other questions on a variety of topics.

Sample and approach

The 2016 survey consisted of 2,942 interviews with a representative sample of adults in England, Scotland and Wales. Addresses are selected at random and visited by one of NatCen Social Research's interviewers. After selecting (again at random) one adult (aged 18 and over) at the address, the interviewer carries out an hour-long interview. The participant answers most questions by selecting an answer from a set of cards.

The sample size for the overall NHS satisfaction question reported here was 2,942 in 2016; for questions about satisfaction with other NHS services the sample size was 974. The data is weighted to correct for the unequal probabilities of selection, and for biases caused by differential non-response. The weighted sample is calibrated to match the population in terms of age, sex and region. The margin of error in 2016 for the health care questions was around +/- 1.5 to 3.8 percentage points.

The majority of fieldwork for the 2016 survey was conducted between July and October, with a small number of interviews taking place in November.

Topics

The topics covered by the survey change from year to year, depending on the identities and interests of its funders. Some questions are asked every year, some every couple of years and some less frequently.

Funding

The survey is funded by a range of charitable and government sources, which change from year to year. The survey is led by NatCen Social Research. NatCen carries out research in the fields of social and public policy, uncovering the truth about people's lives and what they think about the issues that affect them. As an independent, not-for-profit organisation, NatCen focuses its time and energy on meeting clients' needs and delivering social research that works for society.

Acknowledgements

Many thanks to Eleanor Taylor from NatCen for her assistance with data analysis and to Jack Graves from The King's Fund for completing the analysis of media coverage. Most importantly, we would like to thank members of the British public for the time they took to complete this survey and for providing us with this fascinating dataset.

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