

Snapshot survey of health leaders on the Government's NHS reforms

Research summary

March 2011

The Government is proposing major reforms to the way health services are organised and delivered in the NHS in England. At this crucial time in the reform agenda, the Nuffield Trust conducted a 'snapshot' survey of health leaders to test their views and attitudes towards the reforms. This survey was in part designed to help frame debates at the Nuffield Trust's 2011 Health Strategy Summit (2–3 March) for health leaders. While it is not a comprehensive, representative sample of views among policy-makers and expert opinion on the NHS, the findings outlined in this paper provide a useful starting point for debate on the Government's NHS reform programme.

Key points

- two thirds feel that 'fundamental change' in the NHS is necessary
- three quarters agree that services have improved in the past three years
- two thirds of respondents think that the current pace of reforms is too fast
- a large majority do not think the reforms are essential to achieving the efficiency savings in the NHS
- a majority is in favour of more competition but also think that altruism is the most important motivator of professional behaviour.



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Introduction

The scale of the challenge facing the NHS in England is unprecedented. Alongside major changes to the way in which health services are organised and delivered set out in the Health and Social Care Bill 2011, the NHS needs to make efficiency savings of £15 to £20 billion. These savings need to be made against a backdrop of almost no growth in resources, as the 2010 Spending Review settlement gave the NHS 0.4 per cent real-terms growth over the next four years to 2014/15 – 0.1 per cent per year. Managing the transition will therefore require extensive skilled and focused management during the process of implementation, if the NHS is to ensure that service quality and development are maintained and assured.

“ The Nuffield Trust has supplemented this survey by commissioning Ipsos MORI to survey a representative sample of the public (1,000 people) in England, to explore their views on the reforms. The findings from this will be published separately on our website.

The Nuffield Trust hosts an annual Health Strategy Summit for UK and international health leaders to come together to explore the major challenges facing the NHS and health systems more generally. To inform and help frame the debates at the 2011 Summit, we sent out a short online survey to all those invited (with the exception of serving politicians).

The survey asked a range of questions, some to probe attitudes to the current reforms to the English NHS, while others were more wide-ranging, designed to explore attitudes to some of the bigger questions facing the NHS and other similar health systems.

The survey was sent to 172 health leaders and commentators spanning Whitehall, the NHS, local government, academia, private and independent sectors and the media. The online poll was open between 27 January and 11 February 2011. Sixty-four people completed the survey, representing a response rate of 27 per cent. While this is not a representative sample of the health leadership community, the findings outlined in this summary provide a useful insight into the views of a selected number of health leaders on the reform agenda.*

* Not all responses sum to 100 per cent, due to rounding.

Overall attitudes to the NHS

The Nuffield Trust survey explored overall attitudes to the state of the NHS and quality of services. There is clear support among respondents for the underlying need for reform in the English NHS. In response to a question about the need for change within the NHS (see Table 1), based on a question posed by the Commonwealth Fund's International Health Survey, around a third (36 per cent) felt that only minor changes were needed, but two thirds felt that although the NHS had some good points, it nevertheless needed some 'fundamental' changes, while only one person felt it needed a complete rebuild. These responses show a marked difference to the public's response to a very similar question posed by the Commonwealth Fund in 2010: two thirds of the public felt the NHS needed only minor change, and the UK public was by far the most inclined to opt for minor change compared to other countries, where there was more appetite for fundamental change with respect to their own domestic health services. This reflects the high levels of satisfaction with the NHS, which has grown steadily over the past few years.

Table 1: Overall view of the NHS

View on NHS reform	Survey respondents %	UK public (2010) %*
Only minor changes needed	36	62
Fundamental changes needed	63	34
Complete rebuild	1	3

N = 64

*Source: 2010 Commonwealth Fund International Health Policy Survey in Eleven Countries.

A majority (74 per cent) of our respondents believe that NHS services have improved over the past three years, although a significant minority (27 per cent) think they have stayed the same.

73%

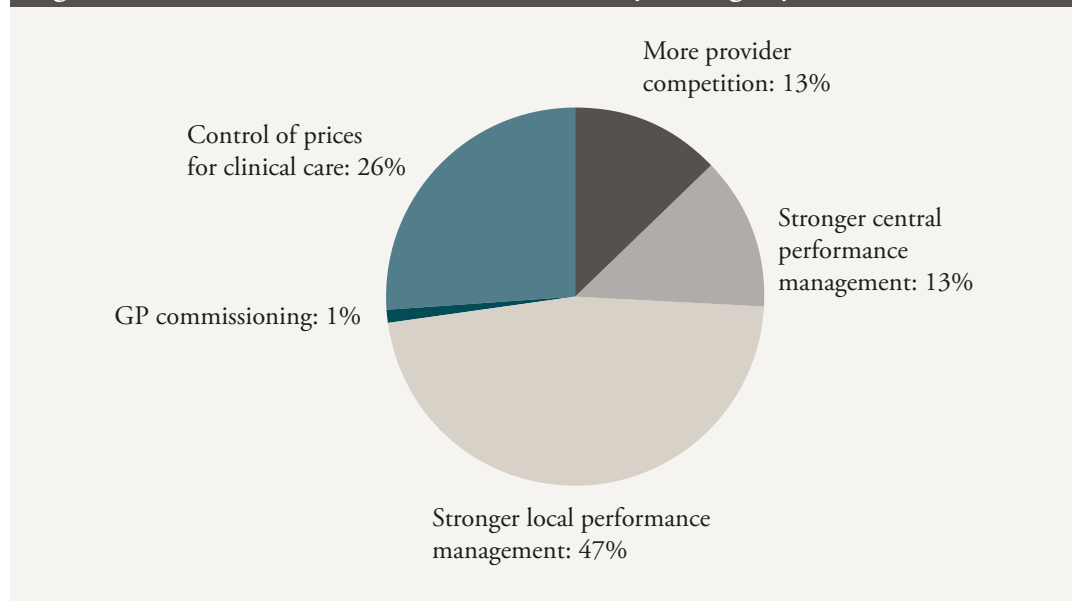
of respondents believe the NHS is unlikely to achieve £20 bn efficiency savings

Reforms and efficiency savings

If the Government were to interpret the responses to the above two questions as support for their policies, the responses to the following questions might temper their view. There is not much confidence that the NHS will meet its efficiency targets. Fewer than 20 per cent of our respondents thought that the NHS was likely to meet the required £20 bn efficiency savings on current plans, against 73 per cent who were not confident that this would happen. When asked to choose between different levers to

achieve these efficiency savings (see Figure 1), there was only lukewarm support for GP commissioning, competition and central performance management, but more enthusiasm for local performance management and control of prices.

Figure 1: Choice of levers to achieve efficiency savings by 2014



There was a lack of endorsement for the Government's argument that the reforms are necessary to achieve the efficiency savings. Only 10 per cent of respondents agreed with the statement "The reforms to NHS structures and rules set out in the Health and Social Care Bill 2011 are essential to achieving the £20 billion efficiency savings by 2014", while nearly 78 per cent disagreed. A further 70 per cent thought the reforms were being implemented too fast, compared to just under a quarter (23 per cent) who felt the pace of reform is about right.

Commissioning

Opinions were mixed on the likelihood of GP commissioning leading to higher-quality, more efficient services by 2014: 29 per cent thought that it would; about the same proportion (27 per cent) were not sure; while 43 per cent disagreed. However, this may be expected, given that GP consortia will only be 'live' in 2013. This ambiguity towards the benefits of GPs undertaking commissioning did not translate into an appetite for a wholesale revision of the purchaser-provider split: just under two thirds (62 per cent) did not want to abandon the purchaser-provider split, against one third in favour. Forty per cent thought that GP commissioning would be more effective than primary care trust (PCT) commissioning in breaking down barriers between primary and secondary care (a third disagreed). Opinion was divided over the likelihood of GP consortia delivering more local accountability over commissioning (often characterised as having a 'democratic deficit' in relation to PCTs). Thirty-seven per cent thought that there would be more local accountability from the new arrangements (GP consortia and Health and Wellbeing Boards), while 48 per cent disagreed.

Competition

The responses tended to favour competition. A majority (59 per cent) agreed with the view that greater competition between providers will increase the quality and efficiency of NHS services (one third disagreed). A similar proportion also agreed that competition between vertically integrated providers (those combining primary and secondary care) would be preferable to competition between hospitals, but nearly a third were either not sure or didn't know, suggesting that more evidence might be needed on this question. Opinion on encouraging competition between GP commissioners was split: 37 per cent were in favour, 45 per cent against. But there was no doubting opinion on the wisdom of price competition: two thirds (67 per cent) rejected the suggestion that providers should be free to compete on price, reflecting a growing wariness among academics and others that quality is at risk when there is price competition for health services.

78%

of respondents say that better outcome information would drive innovation

Driving innovation within the NHS

Asked what the biggest untapped sources of 'disruptive innovation' were within the NHS, clinicians, patients and the private/third sector were overwhelmingly chosen by respondents (by 40, 33 and 29 per cent respectively). Very few chose NHS managers (5 per cent) or Ministers (2 per cent) and none selected regulators or local authority staff. Nearly four fifths of respondents thought that better information on outcomes would drive more innovation in the NHS, with a more even spread of support for other suggestions, such as abolishing the staff contract (25 per cent) or boosting the market for primary care (29 per cent).

In terms of what best motivates staff in the NHS, appealing to altruistic motives to do a good job was by far the most popular first choice, substantially ahead of competition between teams and the desire for personal financial gain (see Table 2). Competition between organisations was the least favoured first-choice option, raising an interesting question about how NHS professionals will respond to the prospect of increasingly competitive relationships between organisations.

Table 2: What motivates professionals in the NHS?

Answer option	First choice	Second choice	Third choice	Fourth choice	Response count
Competitive desire to be better than the next organisation	2	13	24	20	59
Competitive desire to be better than the next clinician/ clinical team	19	25	14	3	61
Altruistic desire for better outcomes for patients	39	14	6	2	61
Desire for increased personal financial reward	3	10	16	24	53

Future of the NHS

To round off the survey, we asked a question designed to explore the future funding and scope of the NHS. We asked whether respondents agreed with the statement that: "It is inevitable, in the next five years, that a 'benefits package' of what is and isn't available on the NHS will have to be defined." A majority (60 per cent) agreed, with 29 per cent against and 10 per cent not sure.


Conclusions

Although this survey did not set out to be a comprehensive exploration of views among policy-makers and expert opinion on the NHS, the findings outlined in this briefing paper provide a useful snapshot of the views of health leaders on the likelihood of the Government's NHS reforms achieving their intended aims.

What is clear is that there is support for fundamental change in the NHS, but mixed views about the likely impact of the specific reforms outlined in the Health and Social Care Bill. Crucially, a large majority do not think the reforms are essential to achieving the unprecedented efficiency savings now required in the NHS.

The Nuffield Trust has supplemented this survey by commissioning Ipsos MORI to survey a representative sample of the public (1,000 people) in England, to explore their views on the reforms. The findings from this will be published separately on our website.

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