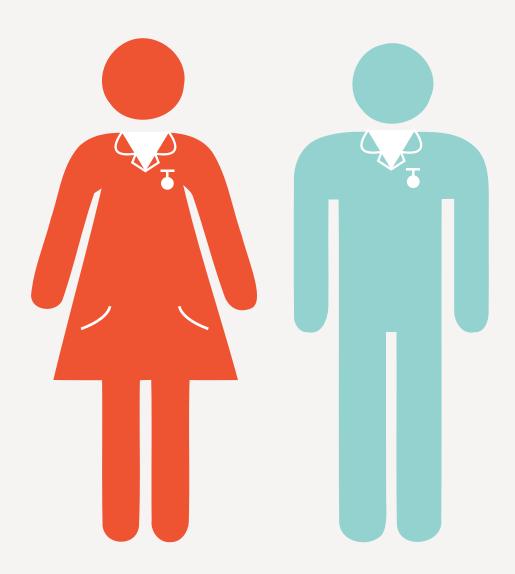
Primary Concerns

a survey of healthcare professionals



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Laura Donnelly Primary Concerns

he NHS reforms are so big they can be seen from space, so says it's top man Sir David Nicholson, in times when he was prone to cheerful analogies.

Yet pity the befuddled alien struggling to detect the shape of the changes upon us, endlessly redrawn, right to the eleventh hour, and surrounded by a thick miasma of jargon obscuring their purpose.

Far clearer than the reforms has been the strength of opposition to them. In recent months, some of the noise may have been dulled as the Francis inquiry and Sir David's popularity ratings took centre stage but the concerns haven't gone away.

As 211 Clinical Commissioning Groups (CCGs) prepared for lift-off, Campden Health and *The Commissioning Review* polled more than 1,000 health professionals working in primary care: practice managers, nurses and GPs, for their views on the challenges ahead.

For anyone still hoping that the changes will deepen clinical engagement in the management of the NHS, today's findings sound a clear warning: less than seven per cent of those surveyed expressed support for the reforms.

Plain opposition came from almost 60 per cent (figure 10) of those polled, while the remainder were ambivalent or unsure about the direction of travel.

For those opposed to the changes, two reasons stand out. Almost two-thirds of those polled see the reforms as a "distraction from caring for patients". Exactly as many believe that the changes are a step towards privatisation of the health service.

In austere times, waste is a theme too. Among opponents of the reforms, 58 per cent (figure 11) believe the reforms mean doctors will spend too much time on management, and 47 per cent (figure 11) believe the changes amount to a waste of money.

As commentators discuss Sir David's future, briefings that he has been "saved" – for now – because he is the only man who can bed in the reforms, are likely to have done little to boost confidence in the changes.

For CCGs, the distance between primary care staff and the agenda ahead is clearly a serious problem, especially when finances are so tight and when many staff are feeling bruised by an onslaught of negative stories about the NHS in the wake of the Francis inquiry.

David Stout, chief executive of Hertfordshire and Essex Commissioning Support Units, says that addressing this fundamental "disconnect" is one of the most urgent priorities facing CCG leaders.

However, he suggests that attempts to secure buy-in to the national agenda are far less important than those to strengthen the connection between frontline staff and CCG members and leaders.

"When you ask the public their views about the NHS, their views are far more negative than when you ask them about their own experiences," he says. "In the same way, after April 1st, what will really matter is the level of confidence and trust staff have in their local CCG."



The distance between primary care staff and the agenda ahead is clearly a serious problem, especially when finances are so tight

This is a view echoed by Nigel Edwards, a senior fellow at the King's Fund. Asked what advice he would give to local leaders hoping to improve engagement in CCGs, he says: "Don't mention the reforms!'"

He continues: "It is not so much because they are seen as toxic, though that is a problem - but because for those delivering services, and those receiving them, what matters is how the structures can be used to make specific changes which will benefit patients."

"The narrative needs to be about how changes to services will help Mrs Smith, who has congestive heart disease and Parkinson's, not about the national agenda," says Mr Edwards.

Optimists might even be able to detect a few seeds of hope for the reforms in today's survey— if the frustrations of the primary care community can be used as a lever for change.

While most respondents were happy with the quality of care provided by their own surgery, with 77 per cent (figure 20) saying that they would be happy for a family member to be treated there, the proportion dropped sharply when they were asked about acute care.

Just 54 per cent (figure 21) of those polled said they would be happy for a family member to be treated at their local hospital, suggesting significant unease about the quality of services being commissioned.

"That really stands out," says
Dr Charles Alessi, chairman of the
National Association of Primary Care.
"Yes, there will be some skew in a
statistic like this, because people are
always likely to think better of their
own services than of those provided
by others - but this does suggest
real concerns around the quality of
hospital services. And this is where
the reforms should strengthen the

levers for change."

In the short-term, CCGs may hope for nothing more than maintaining a steady ship, and safely transferring commissioning arrangements in a very turbulent environment.

Despite political rhetoric about setting doctors free, the new bodies will be closely watched, with the national commissioning board measuring progress against 35 measures.

But business as usual won't be good enough.

Dr Alessi, a GP and member of Kingston CCG, says: "The new world won't be about maintaining the health economy but about working within constrained resources and there will need to be disruption - whether that comes in the shape of acute reconfiguration or decisions on efficiencies."

He believes the changes will make it easier for clinical leaders to align such changes to the needs of their community.

Dr Alessi says: "The situation as we have it is untenable – for a start, the payment systems are there to promote activity. I think the reforms make it easier for that to be addressed."

But the complexity of the changes, combined with the strength of opposition to them and media expectations also means that "the reforms" in general, and the individual GPs within CCGs in particular, are likely to take the blame for every service failing and unpopular decision taken after April 1, regardless of whether they even reflect a change of policy.

As pressure on resources bites, GPs could face personal attacks for rationing decisions which are currently taken by rather more faceless bodies.

If they were given the power to make changes, where would those polled start?



For anyone still hoping the changes will deepen clinical engagement in the NHS, today's findings sound a clear warning"

There is a clear desire for a grownup debate about the use of NHS resources with 61 per cent (figure 17) of those polled believing that cutting the use of ineffective treatments should be top of the agenda. If practice managers, GPs and nurses were in charge of their own budgets, the current health secretary's fondness for homeopathy would not protect it from the chop, along with herbal medicine, and acupuncture (figure 18).

While the nation struggles with the burden of self-inflicted ill-health, the poll also detects a lack of sympathy from many of those on the frontline. Bariatric surgery for the obese would be next in line for cuts, as would any surgery for smokers (figure 18).

The primary care community is also keen for shock therapy for the nation's boozers, or at least a reduced subsidy; 63 per cent (figure 19) of those polled said patients should pay for Accident & Emergency visits which were the result of alcohol.

There appears to be a call for greater respect for NHS resources, and their limits. In total, 83 per cent (figure 19) said patients should be forced to pay a fee for not attending appointments.

Dr Steve Field, recently appointed as deputy medical director to the NHS Commissioning Board, as lead for addressing health inequalities, says he is surprised by the polling in these areas, which struck him as "somewhat judgemental".

He says: "I think some of these ideas are pretty abhorrent. Alcohol is a social issue and I don't think we should be looking at charging

people for care, or potentially driving patients away from seeking help. We know bariatric surgery can reduce several co-morbidities, and we know smoking is very closely linked with deprivation – I think we need to understand the underlying causes of these problems, not find ways to punish patients."

Dr Field, who led the Government's "listening exercise" on the reforms, says one of the most urgent priorities for CCGs must be to better understand their populations, if they are to improve their health.

When we look at existing policies, the poll may suggest some lessons about the risks when attempting to shoehorn the public health agenda into individual practice. While one quarter of those polled said the GP Quality and Outcomes Framework had placed focus on the right priorities, they were vastly outnumbered by almost two thirds of the group, who saw it as a mere "tick-box exercise".

Amid all this, one might expect to find morale hurtling towards rock bottom.

In fact, there is a mixed picture: just 43 per cent (figure 41) of primary care staff polled said they would choose the career they are in again, but the average self-rating for morale, at 5.9 (figure 38), does not suggest most are on the verge of immediately downing tools.

As Andrew Lansley, the architect of the reforms, watches their introduction from a safe distance, he may try to extract some comfort from being rated the "most effective" health secretary of the last two decades - by a very small margin.

But by a far greater distance, the minister takes top ranking for "least effective" (with second prize to Jeremy Hunt).

What, then, is Sir David's extraterrestrial observer to make of all of this - assuming that he not only speaks English, but is fluent in the language of commissioning groups, senates and support units?

As the American novelist William Burroughs once wrote, "After one look at this planet, any visitor from outer space would say "I want to see the manager".

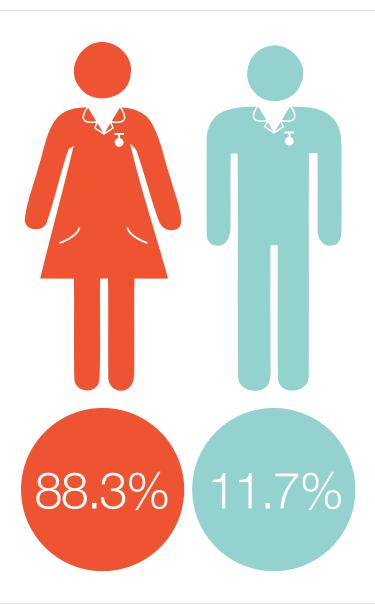
Our curious alien may need to take his place in a rather long queue.

This article, written by prominent healthcare journalist Laura Donnelly, was based on research from Primary Concerns.

The sample

Survey of primary care

Figure 1
What is your gender?



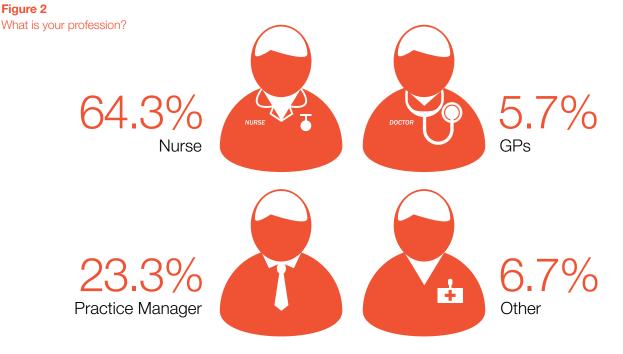
Answered question 1114. Skipped question 18

Source: Campden Health Research, Primary Concerns: A Survey of Healthcare Professionals



What type of nurses were asked?
12% of nurses said they are community nurses, a role which can include working in sexual health clinics, in a patient's own home or in a community centre, among other places"

Figure 2



Answered question 1122. Skipped question 10

Figure 3

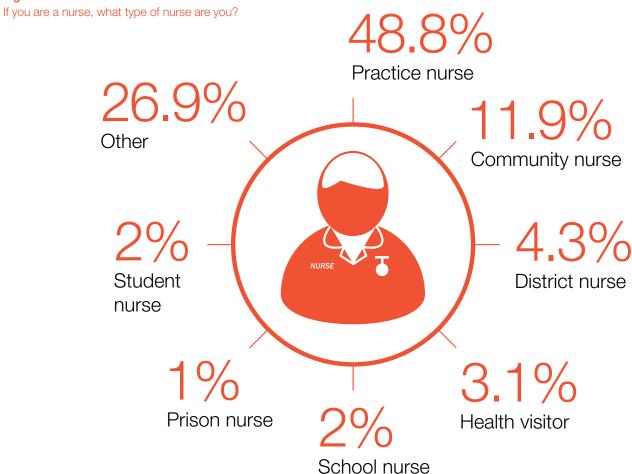




Figure 4
How old are you?



Answered question 1119. Skipped question 13

Figure 5
What region do you work in?

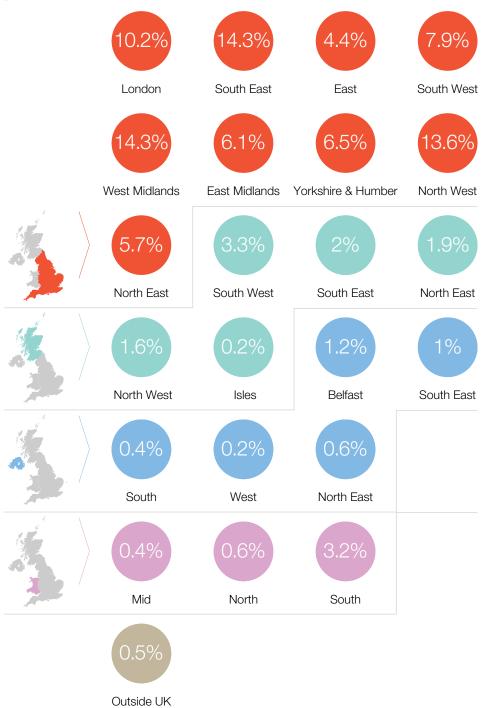




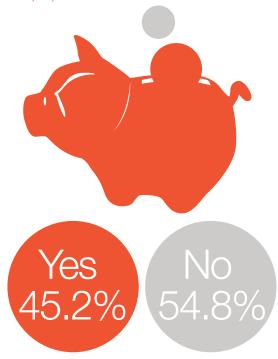
Figure 6 If you work full time, what is your annual salary?



£160,000 and above 0%

Campden Health Research

Figure 7Do you believe your pay is appropriate for your job?



Answered question 1117. Skipped question 15

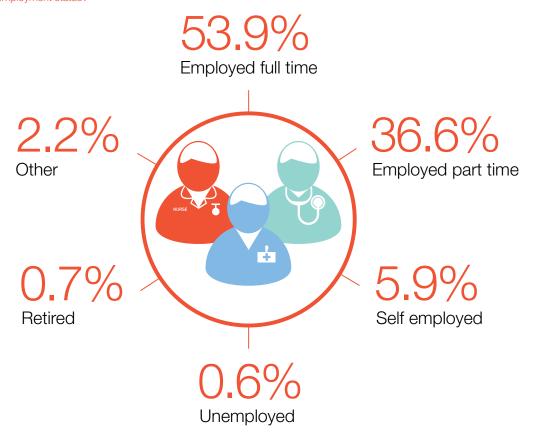
Source: Campden Health Research, Primary Concerns: A Survey of Healthcare Professionals

Figure 8
If not, do you think it should be...



Don't know 5.7%

Figure 9
What is your employment status?



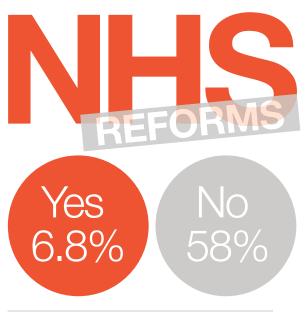
Answered question 1122. Skipped question 10



The system



Figure 10 Do you support the current reforms of the NHS?



Ambivalent 26.5% Don't know 8.7%

Answered question 1017. Skipped question 115

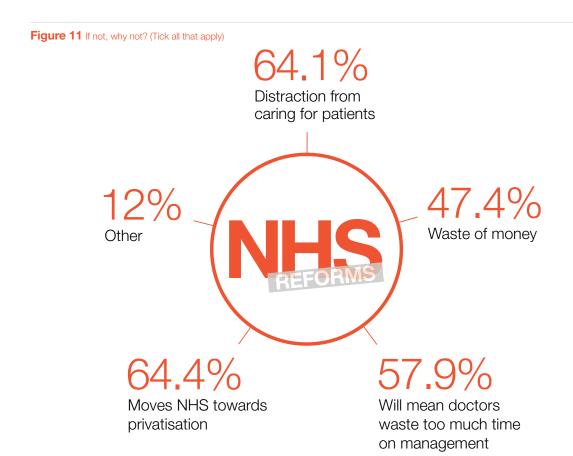
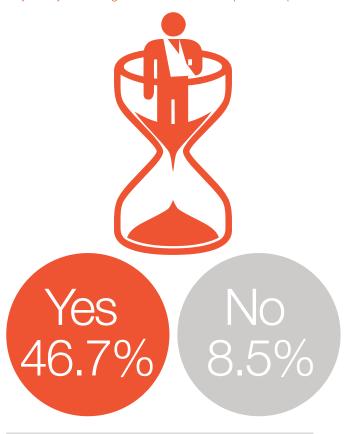


Figure 12 Will the NHS reforms mean you or your colleagues have less time to spend with patients?



Don't know 35.1% Not applicable 9.7%

Answered question 1013. Skipped question 119

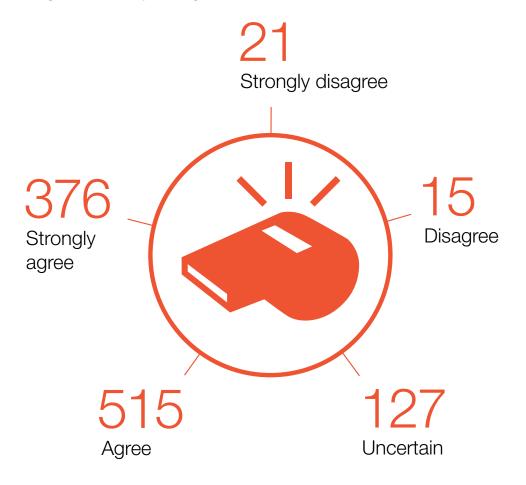
Source: Campden Health Research, Primary Concerns: A Survey of Healthcare Professionals



Almost two-thirds of those polled see the reforms as a 'distraction' Exactly as many also believe the changes are a step towards the privatisation of the health service"



Figure 13 Whistleblowing should be actively encouraged in the NHS



Answered question 1054. Skipped question 78

Figure 14 Which of these areas do you think you are insufficiently trained in? (Tick all that apply)

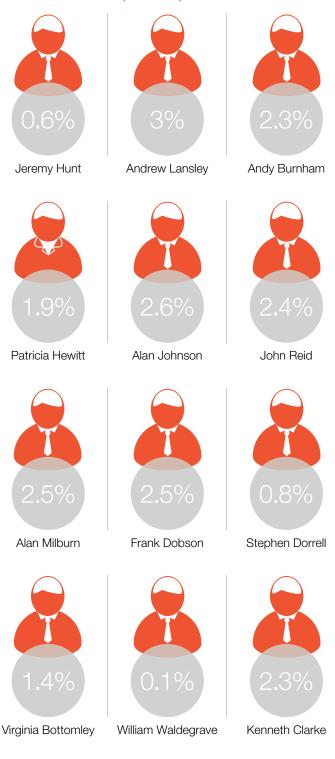
Dementia Cancer Mental health Alcohol problems 26.9% 53% 52.1% 32.3% Training Trainin Trainin Child protection Diabetes Wound management Sexual Health 16% 15% 18.1% 22.1% TRAININ TRAININ COPD Heart Disease Epilepsy Asthma 18.8% 32.9% 11.6% 12.3% TRAINING !#@\$ Trainin Children and young people Nutrition Substance misuse Domestic abuse 21.3% 55.1% 41.5% 21.5%

Other 10%

Answered question 773. Skipped question 359



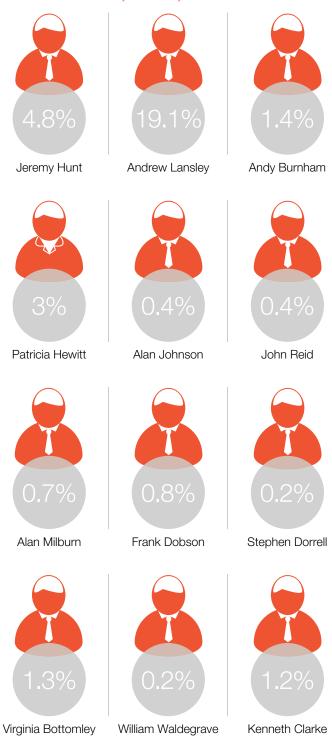
Figure 15 Who has been the most effective health secretary in recent years?



Don't know 77 6%

Campden Health Research

Figure 16 Who has been the least effective health secretary in recent years?



Don't know 66.4%



Figure 17 In which of these areas do you think efficiencies or cuts should be made?



Answered question 994. Skipped question 138

Figure 18 Which (if any) of these treatments would you stop funding for if the decision was yours? (Tick all that apply)

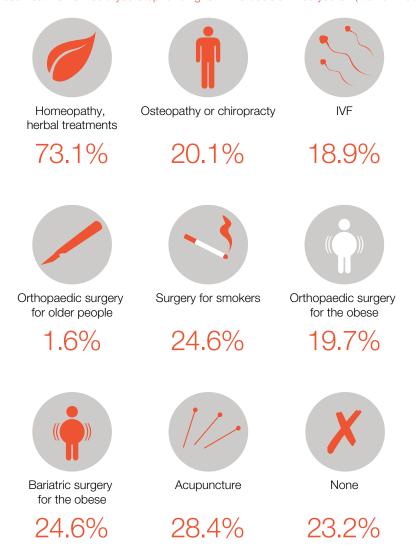
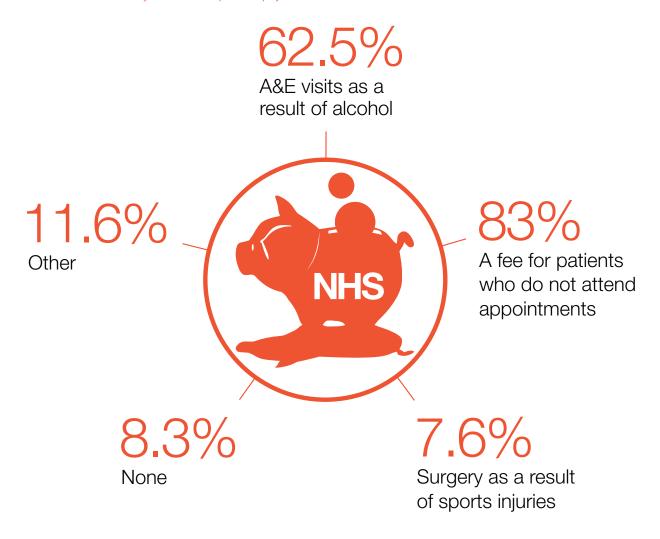




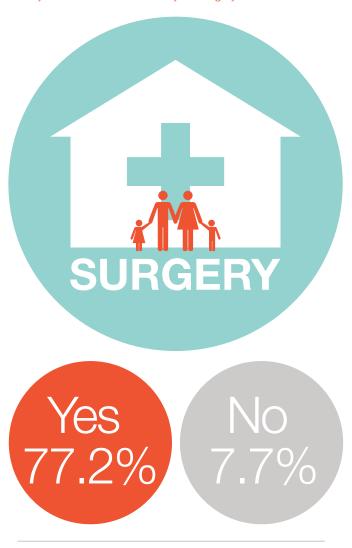
Figure 19 In which cases would you like to see patients pay towards treatment?



Answered question 987. Skipped question 119

Quality of care

Figure 20 Would you be happy for a family member to be treated at your surgery?



Don't know 6.1% Other 8.9%

Answered question 1046. Skipped question 86

Figure 21 Would you be happy for a family member to be treated at your local hospital(s)?



Don't know 17.6%

Answered question 1048. Skipped question 84



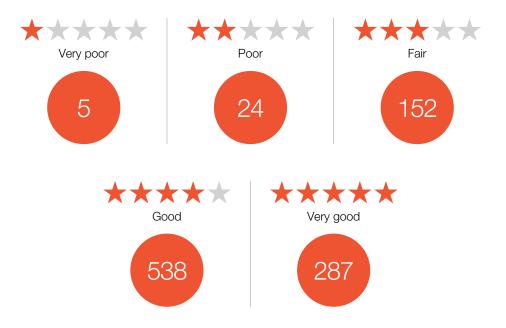
Figure 22 In your opinion has hospital healthcare improved in the last five years?



Don't know 17.9%

Answered question 1046. Skipped question 86

Figure 23 What do you think about the quality of service you provide?



Answered question 1051. Skipped question 81

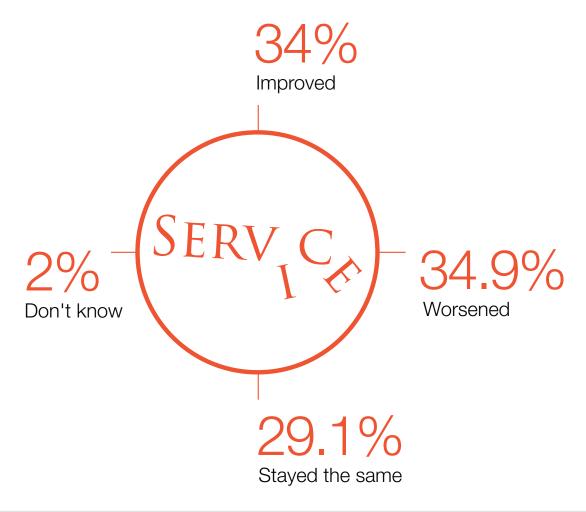


Figure 24 How do you think your receptionists treat patients?



Answered question 1056. Skipped question 76

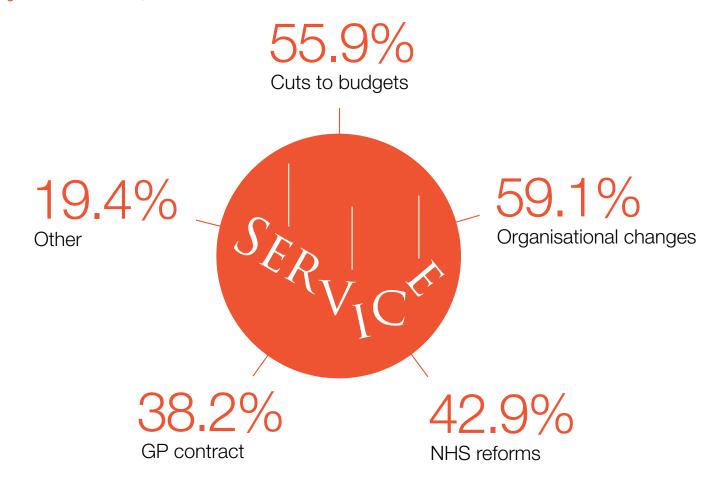
Figure 25 In your practice, how do you think the level of service you give patients has changed in the last two years?



Answered question 1053. Skipped question 79

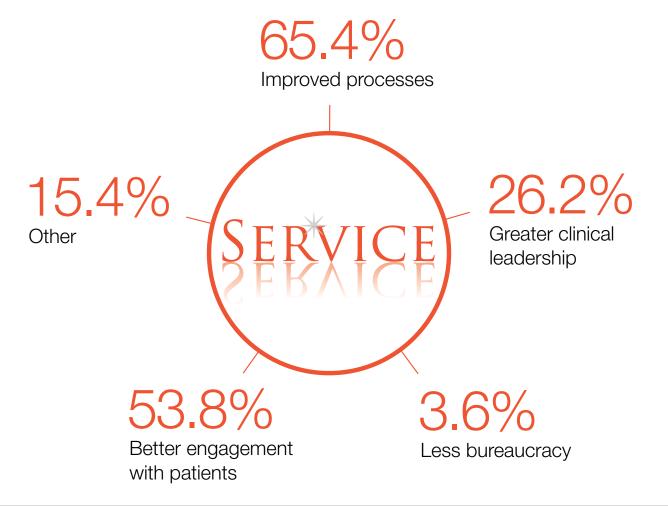


Figure 26 If it has worsened, how?



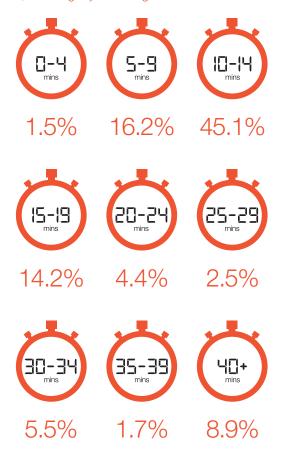
Answered question 408. Skipped question 724

Figure 27 If it has improved, how?



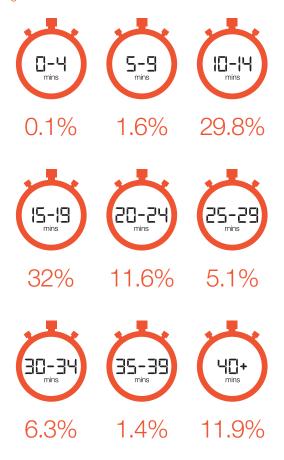
Answered question 390. Skipped question 742

Figure 28 If your role involves seeing patients, how long is your average consultation?



Answered question 727. Skipped question 405

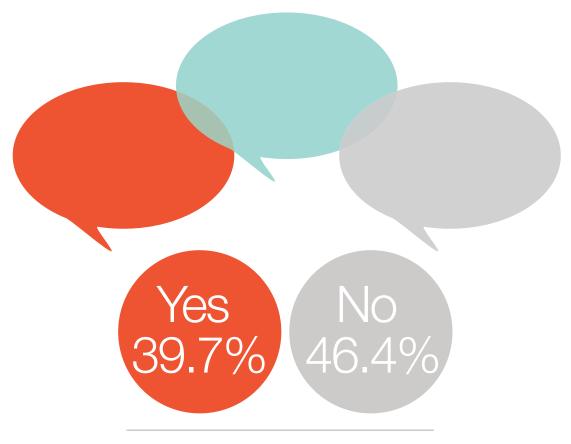
Figure 29 How long do you think the average consultation should be?



Answered question 855. Skipped question 277



Figure 30 Do you get enough time to speak to your patients?



Don't know 1.1% Not applicable 12.8%

Answered question 1048. Skipped question 84

Figure 31 How much of your time is spent on the following duties?

		10%	20%	30 %	40%	50%
Clinical	133	83	66	73	81	122
Administrative	6	173	196	134	103	89
Educational	95	564	95	51	26	29
Career development	283	323	52	25	12	17
Other	142	133	39	22	6	12
	60%	70%	80%	90%		
Clinical	122	143	132	82	19	
Administrative	56	70	110	86	66	
Educational	14	13	18	8	8	
Career development	9	4	4	2	5	
Other	4	4	1	3	7	

Answered question 1119. Skipped question 13

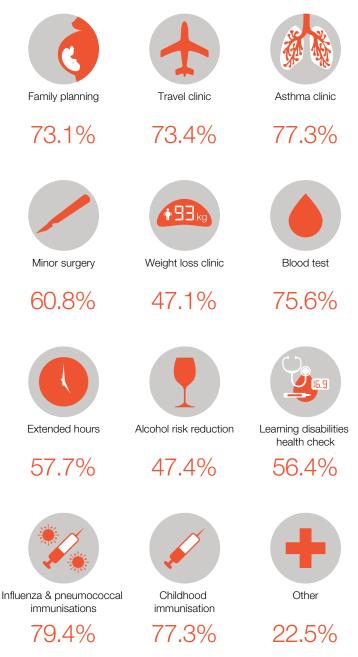


Figure 32 Has access for patients improved or worsened in last two years?



Answered question 1045. Skipped question 87

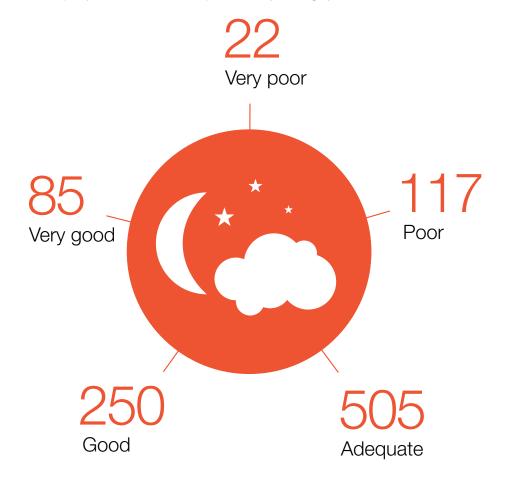
Figure 33 Which of these additional services can patients access at your practice?



Not applicable 14.1%

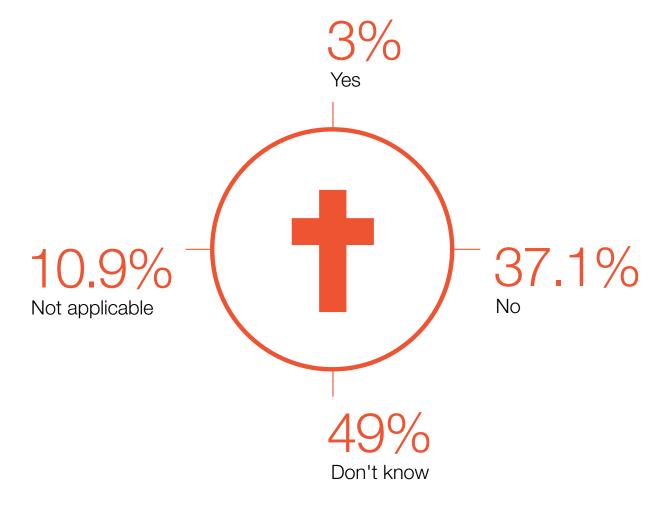


Figure 34 How do you rate the quality of out-of-hours cover provided for your surgery?



Answered question 979. Skipped question 153

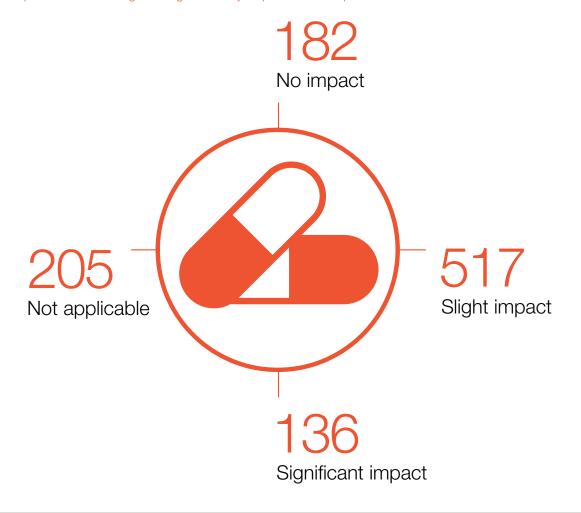
Figure 35 To your knowledge, have patients from your practice died in the past five years as a result of failings in out-of-hours cover?



Answered question 1050. Skipped question 82

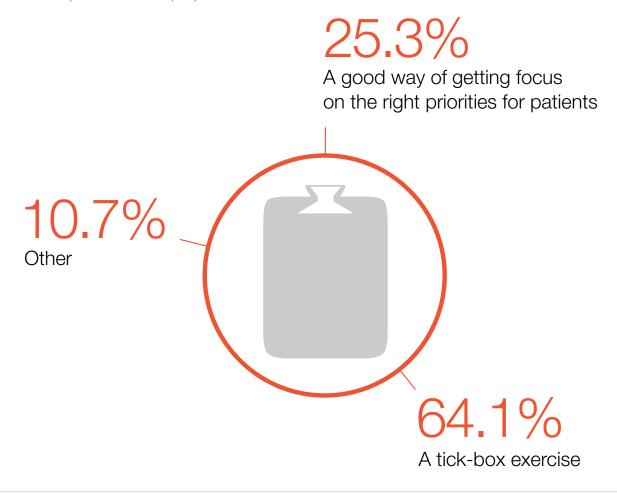


Figure 36 What impact have recent drugs shortages had on your practice and its patients?



Answered question 1040. Skipped question 92

Figure 37 What is your verdict on the quality and outcomes framework?

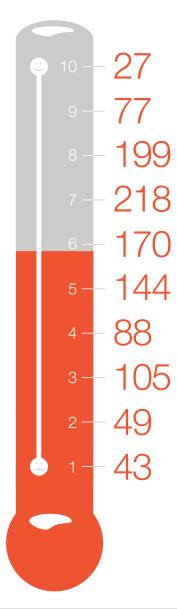


Answered question 1041. Skipped question 91



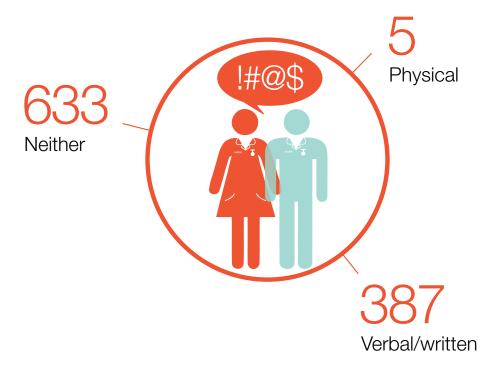
4 Morale and abuse

Figure 38 How would you rate your morale out of 10?



Answered question 1120. Skipped question 12

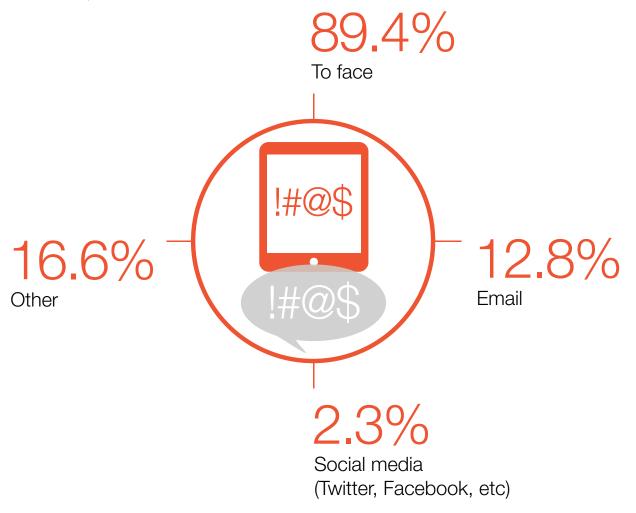
Figure 39 Have you ever been abused at work?



Answered question 1119. Skipped question 13

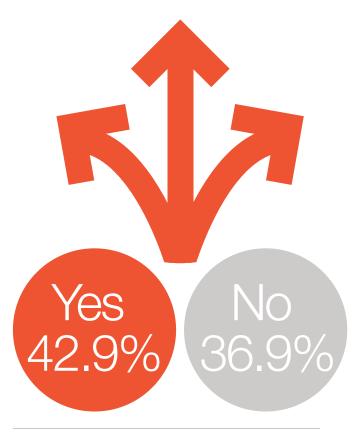


Figure 40 If verbal/written, what form did it take?



Answered question 736. Skipped question 396

Figure 41 If you could start again, would you choose the career you are in now?



Don't know 20.2%

Answered question 1120. Skipped question 12



Figure 42 If not, why not?



Answered question 577. Skipped question 555

Figure 43 Are you planning to leave your job in the next five years?



Don't know 19.6% Other 3.8%

Answered question 1122. Skipped question 10



Figure 44 If so, why?



Answered question 638. Skipped question 494