BMA quarterly survey

Current views from across the medical profession
Quarter 2: 2018

Public Health and Healthcare
Background

– The BMA’s Public Health and Healthcare function (PHH) manages an online panel of approximately 2,300 member doctors.

– The panel is broadly representative of the main areas of medical practice and is used for quarterly surveys on topical health questions. The survey also includes recurrent questions on wellbeing and morale. These are repeated every quarter.

– Topical issues included in this quarter are questions on independent sector provision, local mental health services, overseas visitor charging and the process of leaving the European Union.

– The survey also allows for additional questions on other issues – if you are a health organisation interested in working with us, contact info.phhd@bma.org.uk
Methodology

– For this quarter, the survey was sent to 2,300 panel members.

– Panel members were emailed a link to the online survey between 30 May and 13 June 2018.

– The response was 857 (a response rate of 37%).

– The following analysis includes comparisons across the largest branches of practice.
Findings

– Respondents displayed generally negative attitudes towards independent sector provision in the NHS, with nearly two thirds of respondents describing themselves as concerned about it. The amount reporting negative attitudes has increased since a similar question was asked in the Q3 2017 quarterly survey.

– 41% of respondents thought that the level of independent sector provision where they work has increased in the last two years and most thought that increasing independent sector provision is having a negative impact on the quality of provision.

– Similar to the above, respondents attitudes to the NHS internal market were largely negative. Respondents thought that the internal market creates barriers to joined up working.

– Negative attitudes of medical staff to independent sector provision and the internal market are corroborated by generally higher costs of provision in equivalent countries with more private or mixed provision.

– Most respondents thought that an appropriate level of mental health services is not currently accessible in their area. This finding highlights the continued need for investment in efforts to achieve parity of esteem between mental and physical health services.

– 70% of respondents thought that the introduction of charges for overseas visitors was likely to have a negative impact on vulnerable groups, with some patients potentially facing confusion as to their eligibility for free treatments.

– Patients failing to present for treatment because of ineligibility or unclear eligibility for treatment has the potential to have negative health impacts.
Respondents: branch of medical practice

“Other” doctors include respondents that were working in medical academia, public health, doctors outside one of the main fields of practice and a small number of unemployed doctors or doctors on a career break.

When retirees were questioned further about their last working post, consultant and GP contractor/principal were most frequently reported.

Question: What grade is your current post?
Respondents: working pattern

About 28% of respondents were working less than full time.

Question: Are you working: full time, less than full time, unemployed, on a career break, on maternity leave, retired?
Independent sector provision
Respondents were asked about their feelings towards independent sector provision in the NHS. Almost three quarters of respondents felt concerned about independent sector provision. Relatively few (6%) respondents described themselves as unconcerned about independent sector provision.

The top three reasons given for concern were:
- Potential destabilisation of NHS services (47%)
- Negative impact on the quality of NHS clinical care (23%)
- Independent provision not representing value for money for the NHS (20%)

Question: How would you describe your feelings toward independent sector provision of NHS clinical services?
41% of respondents reported an increase in independent sector provision where they work, reflecting BMA research showing increasing independent sector provision. This is compared to only 4% of respondents who reported a decreased level of independent sector provision.

As can be seen from the second graph, the majority of respondents who have seen increased independent sector provision where they work thought that it had a negative impact on the quality of care provision.
NHS internal market (England Only)

76% of respondents in England disagreed or strongly disagreed with the statement: “the internal market improves patient outcomes”.

Relatedly, as can be seen from the graph on the left, 84% of respondents thought that competition in the NHS has created barriers to joined up working.

These findings, as well as the ones on previous slides, suggest that a majority of respondents do not see benefits from independent sector provision and the NHS internal market. On the contrary, there are clear negative implications according to the majority of respondents, such as the internal market acting as a barrier to joined up working.

Question: To what extent do you agree with the following statement: Competition is a barrier to joined up working
Mental health services
Mental health services

69% of respondents disagreed or strongly disagreed with the statement; In my local area, and proportionate mental health services are accessible. Only 6% of respondents agreed with the statement.

These results highlight continued issues with the provision and accessibility of mental health services and point to ongoing difficulties with achieving parity of esteem between physical and mental health services.

**Question:** To what extent do you agree with the following statement: In my local area proportionate mental health services are accessible
Impacts of changes to mental health services

Respondents were asked if there had been any change to mental health service provision in their area as a result of the move toward more integrated commissioning. 54% of respondents were aware of changes to provision in their area, with most of these reporting that service provision has decreased.

Respondents who reported changes to mental health provision in their area were asked about the impacts of the changes. 83% thought that there had been a negative impact on mental health service provision, compared to only 9% who thought that there had been a positive impact.

Question: Have the changes to mental health service provision in your area been broadly:
Overseas visitors charging
Impacts of overseas visitor charging

Respondents were asked if they had experience treating overseas patients who do not qualify for certain free NHS care.

70% of respondents thought that the introduction of charges for overseas visitors will have a moderate or significant negative impact on vulnerable groups.

Question: Based on your experience, what impact do you think the introduction of these regulations will have on vulnerable group(s)?
Leaving the European Union
Non-UK applications

Most (57%) respondents report a decline in applications for positions in their departments from non-UK nationals, since the 2016 vote to leave the European Union.

A high level of respondents reporting fewer non-UK applicants points to further problems for the NHS in terms of recruitment and retention.

Question: Since the UK voted in the referendum in 2016 to leave the EU, have you noticed a decline in applications for positions in your department from non-UK nationals?
Current Morale
This quarter, 42% of respondents described their morale as being low or very low, compared to only 22% of respondents who described morale as being high or very high.

There is a significant difference between the morale of those who are retired and the average of those who are working. To gain a more accurate picture of the morale of those currently working, retirees were excluded from this analysis.

Question: Taking everything into account, how would you describe your current level of morale?
Average morale by branch of practice

Using a 5-point scale
(1 = very low, 3 = moderate, 5 = very high)
the mean morale scores can be compared across branches of practice.

Branches of practice average morale scores that are relatively similar, and all have average morale that are below moderate.

Question: Taking everything into account, how would you describe your current level of morale?
Morale over time remains low for all branches of practice.

The morale level for GPs decreased last quarter, returning towards its average position over the past two years.
Value
Working outside regular hours in the last month by branch of practice

Consistent with all previous editions of the Quarterly survey, this quarter shows that GPs remain the most likely to report working outside their regular hours "very often".

Question: In the last month, how often have you worked/trained outside your regular hours?

- Very often: 42.45%
- Often: 26.53%
- Occasionally: 18.64%
- Rarely: 7.21%
- Never: 5.17%