BMA quarterly survey

Current views from across the medical profession
Quarter 2: June 2016

Public Health and Healthcare
Background

– The BMA's Public Health and Healthcare function (PHH) manages an online panel of approximately 2,600 member doctors

– The panel is broadly representative of the main areas of medical practice and is used for quarterly surveys on topical health questions. This quarter’s survey focuses on the five year forward view in England

– The survey will focus on one topical issue per quarter. The survey also includes recurrent questions on workload, morale and work-life balance. These will be repeated every quarter

– 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 quarterly survey was sent to 1,000 panel members
– Panel members were emailed a link to the online survey between 31 May and 21 June 2016
– The sample size was 328 (a response rate of 33%)
– The following analysis includes comparisons across the largest branches of practice
Respondents: branch of medical practice

Consultants and GPs were the largest groups to respond to the survey; this reflects the composition of the UK medical workforce.

Junior doctors are under-represented in the survey compared to the workforce.

“Other” doctors include respondents that were working in medical academia, pharmaceuticals and other doctors outside one of the main fields of practice. This group was aggregated due to small sample sizes.

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

Three in ten 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?
Current morale
45% of respondents reported their morale as being low or very low.

On average, reported morale is lower than in the last three quarters.

**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.

SAS grades showed moderate on the scale of morale, whereas all other branches were low.

Morale still remains lower across all grades when compared to the last quarter.

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

The most notable drop in morale over time is for juniors, coinciding with industrial action in the ongoing new contract dispute with the UK government.
Work-life balance
Satisfaction with work-life balance

Mean satisfaction with work-life balance is no better than moderate across all branches of practice.

GPs reported slightly higher satisfaction with their work-life balance compared to the last quarter (4.8).

Question: Overall, how satisfied are you with your work-life balance nowadays? Please give your answer on a scale of nought to 10, where nought is ‘not at all’ and 10 is ‘completely satisfied’
Satisfaction with work life balance overall is relatively moderate.

The data is suggestive of small increases in satisfaction over time for SAS doctors and GPs.
Current workload
Working outside regular hours in the last month by branch of practice

Consistent with all previous editions of the Omnibus 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?
Five year forward view
The FYFV (five year forward view) pilots, networks, integrated organisations and devolved health and social care systems are becoming more prevalent across England.

The following questions were included in the quarterly survey and refer to **England only**.
Familiarity with FYFV pilot programme

Overall a greater number of respondents were not at all familiar with the pilot programme (56%) than were familiar/very familiar with it (39%).

Familiarity was highest amongst GPs (55%) followed by consultants (38%), SAS doctors (21%) and then junior doctors (14%).

Question: How familiar are you with the pilot programme (also known as ‘vanguard sites’) for new integrated models of care (e.g. Multispecialty community providers and Primary and acute care systems) in the Five year Forward View?
Network or federated arrangement

The majority of respondents either do not work, or do not know whether they work, within a network of federated arrangement (70%).

Analysis of GP respondents alone shows 39% to be working in a network or federated arrangement across primary care.

Question: Does your practice, hospital or other main employing organisation currently work within a network or federated arrangement?
Hospital doctors’ interest in GP practices’ plans to provide more specialist services

Over half of (hospital doctor) respondents would be interested/very interested to learn more about local GP practices’ proposals to provide more specialist services in the community/primary care setting (60%).

<table>
<thead>
<tr>
<th>Interest Level</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Very interested</td>
<td>19.8%</td>
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<tr>
<td>Interested</td>
<td>40.1%</td>
</tr>
<tr>
<td>Neutral</td>
<td>24.2%</td>
</tr>
<tr>
<td>Not interested</td>
<td>7.1%</td>
</tr>
<tr>
<td>Very uninterested</td>
<td>5.5%</td>
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**Question:** If local GP practices were interested in providing more specialist services in the community or primary care setting, how interested would you be in learning more about the proposals?
What aspects of the proposals would you be most interested in? (hospital doctors)

The information of most interest to hospital doctors was “which services they planned to provide”, attracting the largest volume of responses and overwhelmingly most respondents considered it of primary interest.

This question only applied to respondents who answered “interested or “very” interested to “If local GP practices were interested in providing more specialist services in the community or primary care setting, how interested would you be in learning more about the proposals?”

Respondents were asked to rank in order of importance the three pieces of information that were of the most interest to them.

Question: Which services they planned to provide? Please rank in order of importance the three pieces of information which you are most interested in knowing about.
GPs’ interest in local hospitals’ plans to open or run GP practices

Just over a third (35%) GP respondents would be interested/very interested in learning more about local hospitals’ plans to open or run GP practices. 42% are not interested/very uninterested.

Question: If your local hospital was interested in opening or running one or more GP practices, how interested would you be in learning more about the proposals?
What aspects of the proposals would you be most interested in? (GPs)

The information of most interest to GPs, in order of importance, was:

1. Who would provide the GP service (i.e. skill mix).
2. Whether this would affect my GP practice.
3. What terms and conditions the staff would be on.

This question only applied to respondents who answered “interested” or “very” interested to “If your local hospital was interested in opening or running one or more GP practices, how interested would you be in learning more about the proposals?” Respondents were asked to rank in order of importance the three pieces of information that were of the most interest to them.

Question: Which services they planned to provide? Please rank in order of importance the three pieces of information which you are most interested in knowing about.
Interest in working for a single integrated organisation in the future

Approaching half of all respondents would be interested/very interested in working for a single, integrated organisation in the future (44%). Around a third are neutral (33%) and less than one-fifth are not interested/very uninterested (19%).

Among all respondents, levels of interest were similar regardless of whether the organisation had been led by a hospital, GP practice, or a CCG.

Question: If your local hospital/GP practice/clinical commissioning group was planning to bring together secondary, community, primary and mental health services into one integrated organisation in the future, how interested would you be in working in that organisation?
Observing changes in response to the drive to integrate health and social care

Approximately one in six respondents had noticed changes in service delivery in their area (16%).

Question: The Government has committed to integrating health and social care across the country by 2020. Have you noticed any changes in service delivery related to this commitment in your area?
If health and social care funding was devolved and merged in your area, what would you regard as the greatest opportunity?

Just under half of the respondents felt that their patients could benefit from improved care through integration (42%).

**Question:** The Greater Manchester region has now taken control of its £6 billion combined health and social care budgets. If health and social care funding was devolved and merged in your area in this way, what would you regard as the greatest opportunity?
If health and social care funding was devolved and merged in your area, what would you regard as the greatest threat?

Half of all respondents felt that the greatest threat would be a reduction in overall spending on health services (52%).

**Question:** The Greater Manchester region has now taken control of its £6 billion combined health and social care budgets. If health and social care funding was devolved and merged in your area in this way, what would you regard as the greatest threat?
Summary

- The FYFV questions show that doctors’ are supportive of the principles of more integrated models of care
- However, it is clear that more needs to be done to improve doctors’ awareness and engagement on these changes
- The questions also give a good indication of the aspects of the proposals that are most important to doctors
- We will use this information to inform future work on the new models of care and develop a BMA position on more localised, integrated care planning and delivery
- We will also share the results with stakeholders to demonstrate the need for increased local engagement