



Department
of Health

Report on the effect of the NHS Constitution

July 2015

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Report on the effect of the NHS Constitution

Presented to Parliament pursuant to Section 6(3)
of the Health Act 2009

Prepared by the Department of Health

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Foreword



The Prime Minister recently said that “there is nothing that embodies the spirit of one nation coming together – nothing that working people depend on more – than the NHS.”¹ The NHS Constitution codifies this spirit of common purpose. It sets out the intrinsic relationship between the NHS, its staff and the public, outlining the entitlements, responsibilities, principles and values that bind together both the communities and the people which the NHS serves. It is a reminder of what makes the NHS so unique.

This second report on the effect of the NHS Constitution is, therefore, very important. It considers where the NHS Constitution is having an impact, and how it can improve. It assesses public and staff awareness of the NHS Constitution, the extent to which the Constitution is understood, and the way in which it is used to help inform change.

I want the NHS Constitution to add real value to patients’ experiences when they receive care and to support NHS staff to do the best job they can. I am delighted therefore that staff awareness and understanding of the NHS Constitution has significantly risen since the first report in 2012. The research finds a significant upsurge in how well informed staff feel about the NHS Constitution, and also finds an increase in its practical use with patients. Sir Robert Francis QC, in his report

on the tragic failings of Mid Staffordshire NHS Foundation Trust, talked about the NHS Constitution embodying “common values, shared by all, putting patients and their safety first... to which all staff must commit themselves”² and the evidence is that healthcare professionals have responded.

However, Sir Robert Francis QC also described the NHS Constitution as “the first reference point for NHS patients”. And here there is significant room for improvement. Public awareness of the NHS Constitution has slightly declined from an already low base in 2012 and it is here where we must make progress.

As Secretary of State, I am committed to playing my part to raise awareness and understanding of the NHS Constitution. I will hold to account NHS England, Clinical Commissioning Groups and Health Education England in their duty to promote the NHS Constitution. I want the NHS Constitution to play an influential role in making sure that everybody gets the NHS this nation deserves.

A handwritten signature in blue ink that reads "Jeremy Hunt". The signature is written in a cursive style with a horizontal line underneath.

Jeremy Hunt
Secretary of State for Health

¹ Prime Minister on plans for a seven day NHS, 18 May 2015, <https://www.gov.uk/government/speeches/pm-on-plans-for-a-seven-day-nhs>

² Sir Robert Francis, Mid Staffordshire NHS Foundation Trust Public Inquiry, www.midstaffpublicinquiry.com/report, (2013).

Executive Summary

The NHS Constitution for England brings together for the first time the principles, values, rights and responsibilities that underpin the NHS. It sets out the enduring character of the NHS as a comprehensive and equitable health service; empowering patients, staff and the public to know and exercise their rights in order to help drive improvements in quality, efficiency and responsiveness throughout the NHS.

This is the second report by a Secretary of State for Health on the Effect of the NHS Constitution. Whilst it has been prepared to meet the legal requirement set out in the Health Act 2009, the broader intention of the report is to fundamentally assess the NHS Constitution's practical impact since it was launched. A specific focus of this is to allow comparability between reports, to help understand how perceptions of the NHS Constitution as the fundamental document of the NHS are changing.

It is clear that patients and NHS staff believe it is important that the NHS has a Constitution; and indeed, there is evidence that the higher the awareness, the greater the support. Yet public awareness of the NHS Constitution remains low, and has even dropped since the 2012 research, from 27% to 24%. There remains little evidence that patients are using the NHS Constitution as a means of exercising their rights.

Staff awareness of the NHS Constitution is significantly higher than the first report in 2012, rising from 54% to 69%. Furthermore there is a statistically significant increase in the understanding of the NHS Constitution amongst staff. Increasingly, NHS staff feel that the NHS Constitution is beneficial to patients, particularly in allowing them to understand their entitlements. Finally, 81% NHS staff believe that it is important that the NHS has a Constitution.

To increase the NHS Constitution's impact and for it to be truly valued, supported and used by patients, staff, carers and the public, it remains vital to raise awareness and embed it at every level in the NHS. There is huge pride amongst those working for the NHS, and indeed, our research found that staff are reporting the highest levels of pride since 2009. The challenge ahead is to ensure that the NHS Constitution, which sets out the basis for that pride, is a well-known and well-used statement of what makes the NHS special.

1. Introduction

Context

1.1. The NHS Constitution brings together, for the first time, the principles, values, rights and responsibilities that underpin the NHS. It sets out the enduring character of the NHS as a comprehensive and equitable health service; and it empowers patients, staff and the public to know and exercise their rights in order to help drive improvements in quality, efficiency and responsiveness throughout the NHS.

1.2. The NHS Constitution has a framework in primary legislation, established by the Health Act 2009.³ NHS bodies and private and voluntary sector providers supplying NHS services are required by law to take account of the NHS Constitution in their decisions and actions.

1.3. While an enduring document, to ensure the NHS Constitution remains up-to-date and of continuing value to patients, staff and the public, the Secretary of State must review and republish the NHS Constitution at least once every ten years, and review and republish the Handbook to the NHS Constitution every three years.

1.4. To ensure that its impact is regularly assessed and understood, the Secretary of State must also report on the effect of the NHS Constitution on patients, staff, carers and members of the public every three

years.⁴ The first such report was published and laid before Parliament on the 5th July 2012.

The development of the NHS Constitution

1.5. The NHS Constitution was first published on 21 January 2009 and given legal effect later that year by the Health Act 2009. It was the product of extensive discussions with patients, staff and the public about what mattered most to them about the NHS and followed a public consultation, overseen by a Constitutional Advisory Forum comprising leading experts and stakeholders.

1.6. Through this engagement, the intention was for the NHS Constitution to have enduring meaning and value to patients, staff and the public who would feel a sense of ownership of it. From the outset, it has enjoyed widespread, cross-party support.

1.7. The NHS Constitution is intended to empower patients, public and staff by helping each group to understand what they could expect from the NHS. For patients, the idea was that the Constitution would provoke challenge and shared responsibilities for NHS services. For staff, the rights and responsibilities were intended to improve engagement with their employers and to empower them to develop better services for patients.

³ Health Act 2009, <http://www.legislation.gov.uk/ukpga/2009/21/contents>.

⁴ This is a statutory requirement under section 6 of the Health Act 2009.

1.8. An identity for the NHS Constitution was created to give a sense of cohesion around all communications. This identity was tested thoroughly with staff and public facing focus groups, with the intention to ensure a consistent, visible identity that patients, staff and the public can relate to.

1.9. This identity, as can be seen in **Figure 1**, has since been applied to NHS facing materials to support local engagement, including;

- Artwork files
- Documents
- Films
- E-learning tools
- Life Channel films (run in GP surgeries)
- Digital media campaigns
- PR and media campaigns
- Partnerships with stakeholders
- Social media



Figure 1 – NHS Constitution identity

1.10. As 'Hard Truths: The Journey to Putting Patients First' sets out,⁵ NHS England, Clinical Commissioning Groups, Health Education England and the Department of Health are working together with others, including NHS staff and patients, to embed the NHS Constitution in everything that the NHS does. This will help to produce a common language that each and every person can relate to.

1.11. A common language requires a set of common values and expectations. The values, rights, pledges and responsibilities for patients and the public set out in the NHS Constitution provide a basis for this and should be reflected in everything the NHS does. This aspiration reflects our current work. As an example, we are currently working with Health Education England to align organisational values used for the purpose of values based recruitment, to the values in the NHS Constitution. This is with the intention to make the NHS Constitution 'the first reference point for all NHS patients and staff', as recommended by Sir Robert Francis QC and ensure the NHS Constitution has impact.

Legal duties to promote and have regard to the NHS Constitution

1.12. The Health Act 2009 places a duty on bodies providing and commissioning NHS services to have regard to the NHS Constitution. The Health and Social Care Act 2012⁶ (the 2012 Act) further applied this duty to the new bodies created by that Act or by amendments the 2012 Act made

⁵ Hard Truths: The Journey to Putting Patients First, <https://www.gov.uk/government/publications/mid-staffordshire-nhs-ft-public-inquiry-government-response>, (2013), Department of Health. This was the Government's further response to Robert Francis QC's report on the Mid Staffordshire NHS Foundation Trust public inquiry.

⁶ Health and Social Care Act 2012, <http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted>.

to the National Health Service Act 2006, as well as to local authorities⁷ – so that in place of Primary Care Trusts and Strategic Health Authorities, it applies to Clinical Commissioning Groups, NHS England and others, for example, Health Education England.

1.13. There is also a duty that requires anyone who provides NHS services under a contract, agreement or arrangements made by the Secretary of State, NHS England, clinical commissioning groups or local authorities to have regard to the NHS Constitution. This is set out in the Health Act 2009, as amended by the 2012 Act. The Care Act 2014⁸ also placed a further duty on Health Education England to promote the NHS Constitution. Health Education England must exercise its functions with a view to securing that education and training for health care workers is provided in such a way which promotes the NHS Constitution (section 99(4)).

1.14. Amendments to the National Health Service Act 2006, made by the 2012 Act, placed a duty on the Secretary of State to have regard to the NHS Constitution. The duty on the Secretary of State ensures that he has to bear in mind the principles, values, rights and pledges in the Constitution when he is discharging his functions in relation to the health service. The 2012 Act also introduced new duties on clinical commissioning groups and NHS England to:

- act with a view to securing that health services are provided in a way which promotes the NHS Constitution; and

- promote awareness of the NHS Constitution among patients, staff and members of the public.

Intended effect of the NHS Constitution

1.15. The NHS Constitution was intended to achieve two core objectives: to safeguard the NHS as an efficient and equitable health system, and to empower patients, the public and staff within the NHS.

1.16. To achieve these objectives, the NHS Constitution sets out:⁹

- the underlying principles and values of the NHS in England;
- the rights to which patients, public and staff are entitled;
- the pledges which the NHS is committed to achieve; and
- the responsibilities which the public, patients and staff owe to one another to ensure the NHS operates fairly and effectively.

1.17. Understanding how these aspects are intended to work is fundamental to assessing the effect of the NHS Constitution.

1.18. As the original Impact Assessment of the NHS Constitution made clear: “*by clarifying the fundamentals that will not change – through establishing a consensus and articulating in an enduring way the **NHS’s purpose, principles and values** – progress in meeting 21st century challenges will be easier*”.¹⁰ Not only would this help the NHS

⁷ The new duty on local authorities to have regard to the NHS Constitution applies in relation to the public health functions of local authorities under section 2B of the NHS Act 2006 (as inserted by the Health and Social Care Act 2012).

⁸ Care Act 2014, <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>.

⁹ Further detail can be found in **Annex A**.

¹⁰ Impact Assessment of the NHS Constitution, 30 June 2008.

respond to emerging challenges of rising expectations, technological advances and shifts in the way services were delivered, it also “*becomes easier for third sector and independent organisations providing NHS care to know what behaviour is expected of them: it binds all organisations providing NHS care to a common purpose*”.¹¹ A key test for the NHS Constitution was, therefore, its ability to ensure that the values and principles of the NHS were fully embedded as an enduring part of the fabric of the health service.

1.19. By setting out the legal rights of patients and staff, the NHS Constitution was intended to empower patients, public and staff through helping them to understand what they could expect from the NHS. Likewise, by articulating everyone’s responsibilities to each other, and explaining how patients and the public can play their part and see the NHS as a partner, the Constitution was intended to help effect a change in behaviour; provoking challenge and mutual responsibility.

1.20. For this intention to be met, it is important that a fundamental level of awareness and understanding of the NHS Constitution is achieved among patients, the public and staff.

Purpose of the Report on the Effect of the NHS Constitution

1.21. This is the second report by a Secretary of State on the effect of the NHS Constitution. It has been prepared not only to meet the legal duty imposed by the

Health Act 2009, but to understand its real, practical impact over the six years since its launch. It shows us the progress we have made, as well as the lessons that can be learned for the future, and identifies the areas in which improvements must be made to further the impact of the NHS Constitution.

1.22. Researching the impact of the NHS Constitution regularly and objectively can help us critically analyse how the Constitution is woven into the fabric of everything the NHS does.

1.23. The report is necessarily retrospective. But through looking back at the effect of the NHS Constitution, we have the ability to identify lessons that can be learned for future policy-making, and can help to direct future decision making to further the impact of the NHS Constitution.

1.24. For example, previous waves of research found a lack of patient understanding on the actions to take when expectations are not being met. This research, combined with the advice of the Expert Advisory Group on the NHS Constitution, led the Department to publish a guide on how patients can provide feedback or make a complaint, when their expectations aren’t met.¹²

1.25. This is not a report on NHS performance; other reports, for example the *National Health Service Commissioning Board Annual Report & Accounts 2013-14*¹³ and the *Secretary of State for Health’s formal response*,¹⁴ offer that overview.

¹¹ Impact Assessment of the NHS Constitution, 21 January 2009.

¹² Complaints Guide, <https://www.gov.uk/government/publications/the-nhs-constitution-for-england>, Department of Health/NHS England, (2015).

¹³ National Health Service Commissioning Board Annual Report & Accounts, <https://www.gov.uk/government/publications/nhs-commissioning-board-annual-report-and-accounts-2013-to-2014>, NHS, (2014).

¹⁴ Annual Assessment of the NHS Commissioning Board (known as NHS England) 2013-2014, <https://www.gov.uk/government/publications/nhs-england-assessment-of-performance>, Department of Health, (2014).

1.26. Nor is this report the appropriate vehicle to discuss potential additions or amendments to the NHS Constitution. We have recently consulted on proposed additions and amendments to the NHS Constitution,¹⁵ and will be updating it in July 2015. At the same time, we will also be updating the Handbook to the NHS Constitution¹⁶ to reflect the changes to the NHS Constitution, along with a limited package of other changes designed to improve clarity.

¹⁵ NHS Constitution consultation document, <https://www.gov.uk/government/consultations/updating-the-nhs-constitution>, Department of Health, (2015).

¹⁶ Handbook to the NHS Constitution, <https://www.gov.uk/government/publications/the-nhs-constitution-for-england>, (2013).

2. Awareness and understanding of the NHS Constitution

Summary

Public awareness of the NHS Constitution remains relatively low (24%) and patients are not yet using the NHS Constitution as a means of exercising their rights.¹⁷

Staff awareness of the NHS Constitution is significantly higher (69%) than among the public but few feel well informed about it.¹⁸

Overwhelmingly, NHS Staff believe that it is important that the NHS has a Constitution (81%), but there were concerns over whether it would be adhered to in the future, with just a small majority believing it would (57%).

92% of staff agree they are proud to work for the NHS; a significant increase since 2012 (86%).

For the NHS Constitution to have real impact and be truly valued, supported and used by patients, staff, carers and the public, it will be vital to raise awareness and embed it at every level in the NHS.

Methodology

2.1. To inform this report, the Department of Health commissioned independent research. Four waves of research were carried out in 2009, 2010, 2012 and 2015 using the same approach and methodology, to allow comparability over time. If statistical significance was found between waves, this is represented on the charts throughout this report, through a red arrow (↓).

2.2. This research is designed to measure the impact of the NHS Constitution among patients, staff, carers and the public.

To provide a focus for the report, the research investigated:

- awareness that there is a NHS Constitution;
- understanding what the NHS Constitution means for them;
- use of the NHS Constitution; and
- the value of the NHS Constitution, including its impact on patients and staff.¹⁹

¹⁷ Public awareness of the NHS Constitution has dropped since 2012, from 27% to 24%.

¹⁸ Staff awareness of the NHS Constitution has risen since 2012, from 41% to 69%.

¹⁹ NHS staff in this report collectively refers to medical/professional staff and administrative assistants. A more detailed breakdown of NHS staff occupation can be found in **Annex B**.

Methodology

The Department of Health commissioned GfK to conduct this research. GfK are a market research company, who have previously conducted much work on the NHS for the Department of Health, including all previous waves of this report.

The target audiences for the research comprised of NHS staff, and the general public in England. The NHS staff sample were in specified occupations, as outlined in Annex B. The questionnaire was designed in collaboration between GfK and the Department of Health, using a structure very similar to that of the first report to allow for comparability. The majority of questions used pre-coded lists of responses, although the opportunity to capture further detail was possible via 'other' options.

The sample was constructed so as to ensure the views of each occupation of interest could be examined separately, with a representative spread by region. At the analysis stage the sample profile was weighted by occupation to bring it into line with the known profile of NHS staff in these occupations, and by region in line with population numbers. Weighting ensures that the findings reported give a more accurate picture of the views, awareness and understanding of all NHS staff in the occupations examined.

Public awareness of the NHS Constitution

2.3. Research carried out in 2012 revealed that public awareness of the NHS Constitution, when prompted with a description, remained relatively low (27%).

In 2015, this dropped further, to just 24% of the general public. Indeed, public awareness levels when prompted with a description of the NHS Constitution appear to be converging back to the 2009 figure of just 22%. This result is perhaps understandable considering the lack of a public awareness campaign.

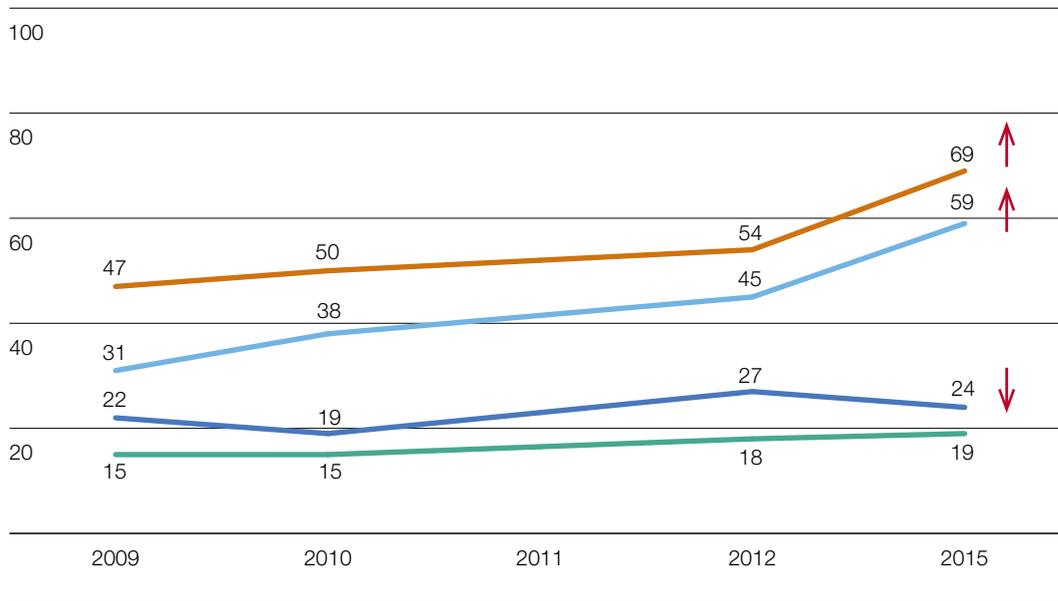


Chart 1 – Awareness of the NHS Constitution

- Staff – aware prompted with name
- Staff – aware prompted with description
- Public – aware prompted with name
- Public – aware prompted with description

2.4. The public are consistently less likely than staff to be aware of the NHS Constitution, and indeed, the gap has significantly widened over time (**Chart 1**).

2.5. More than the headline awareness figures, however, a key test of the effect of the NHS Constitution is the extent to which people are using it as a means of upholding their rights and the pledges made to them.

2.6. All general public respondents were asked to say in their own words where they would look if they wanted to find out information about the following:

- what they can expect from the NHS to help keep them healthy and care for them when they are ill;
- what their responsibilities as a NHS patient are; and

- what they can do if they do not get what they expect from the NHS.

2.7. As in previous waves, very few members of the public mentioned the NHS Constitution as a source of information about any of these subjects, and these have remained largely unchanged over time:

- what they can expect from the NHS to help keep them healthy and care for them when they are ill – 28 people (2% of the sample) mentioned the NHS Constitution;
- what their responsibilities as an NHS patient are – 22 people mentioned the NHS Constitution; and
- what they can do if they do not get what they expect from the NHS – 18 people mentioned the NHS Constitution.

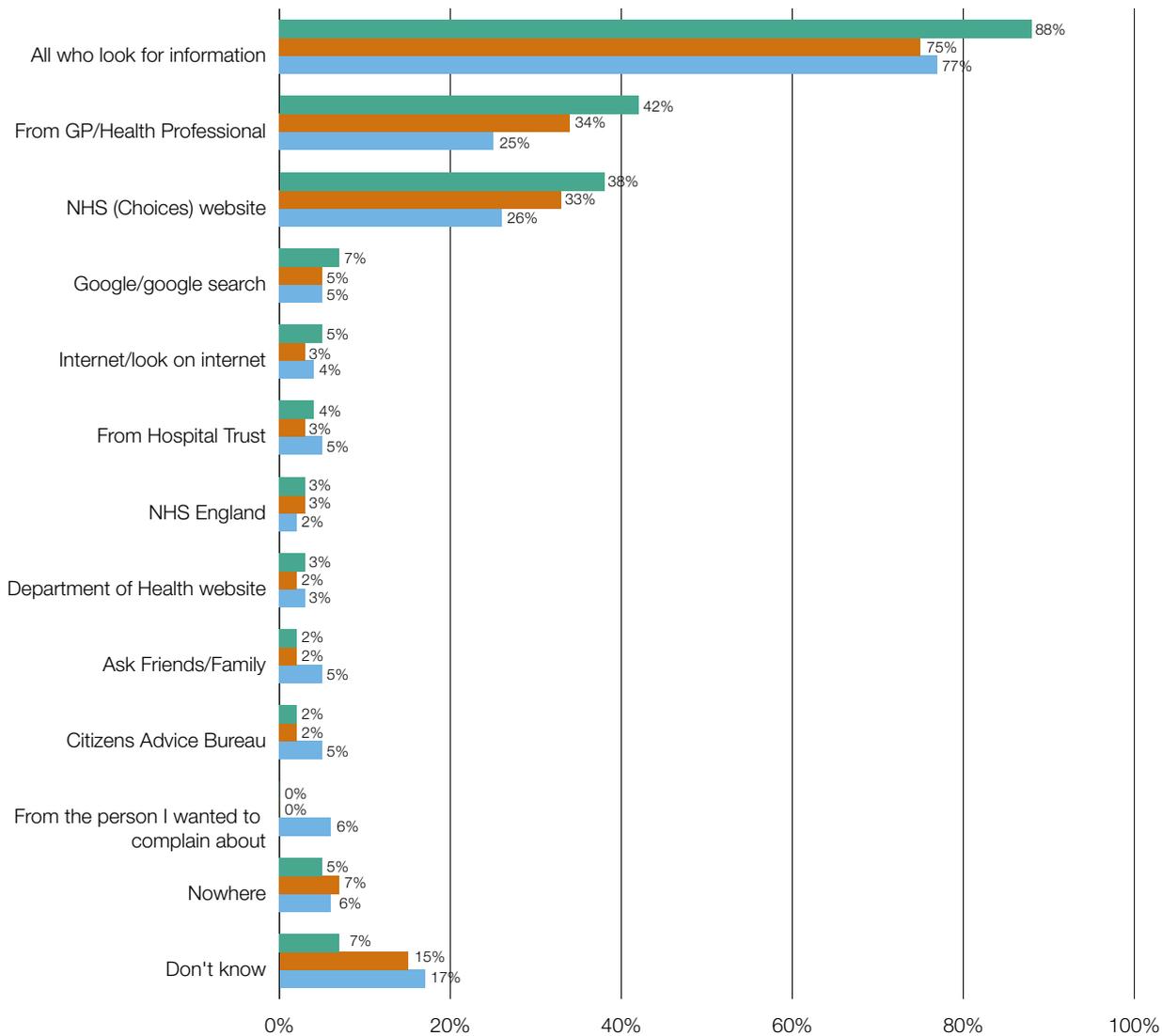


Chart 2 – Where the public look for different types of information about the NHS

- What you can expect from NHS to keep you healthy
- Your responsibilities as an NHS patient
- What you can do if you don't get what you expect

2.8. Instead, patients were found to be most likely to ask a GP/Health professional or visit the NHS Choices website as shown by **Chart 2**.

2.9. Mentions of Google or other internet searches are becoming increasingly common, with 13% of respondents

mentioning these in the 2015 study in relation to what they can expect from the NHS to help keep them healthy and care for them when they are ill, 8% in relation to their responsibilities as an NHS patient and 10% in relation to what they can do if they do not get what they expect from the NHS.

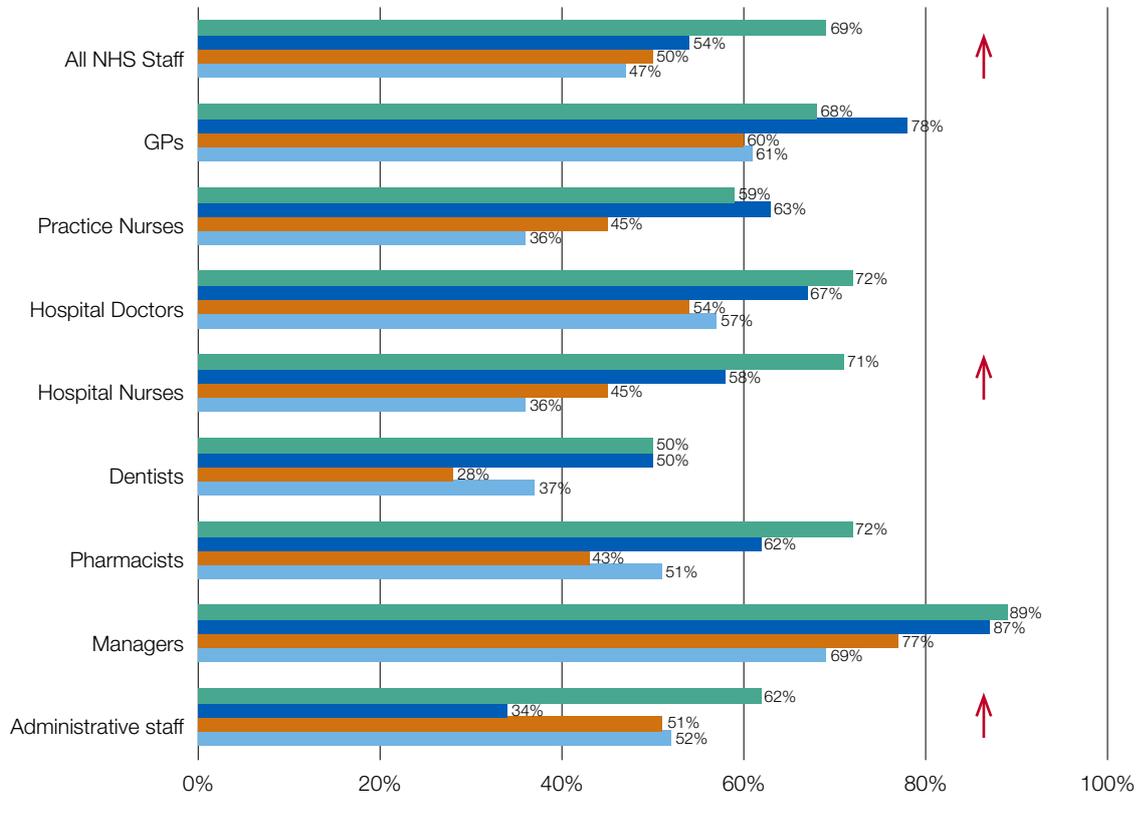


Chart 3 – Total awareness of the NHS Constitution by NHS staff occupation

■ 2015
■ 2012
■ 2010
■ 2009

NHS staff awareness of the NHS Constitution

2.10. Among NHS staff, awareness of the NHS Constitution is significantly higher than among the public (Chart 1). NHS staff are now significantly more aware of the NHS Constitution when prompted with its name, increasing from 31% in 2009 to 59% in 2015. When provided with a description of the Constitution, NHS staff awareness rose to over two-thirds (69%); this has increased significantly from 47% in 2009. These results show that over the past few years the NHS Constitution name is becoming more familiar with staff.

2.11. There have been significant increases in awareness amongst all different occupations surveyed since 2009. Since 2012, there has been a significant increase in total awareness, with Hospital Nurses and Administrative staff displaying the most significant increase. In 2015, Dentists had the lowest awareness (50%), followed by just over half of practice nurses (59%) (Chart 3).

2.12. Managers consistently have the highest awareness at 89%. Indeed throughout all research, Managers consistently showed the highest increases in awareness, understanding and use of

the NHS Constitution, which is particularly encouraging given their role.

2.13. To raise awareness, it is important to know of the sources where staff hear about the NHS Constitution. Since 2012, there have been significant changes in where staff hear about the NHS Constitution, which can help inform our future strategy in increasing the impact of the NHS Constitution.

2.14. To help our understanding of where staff hear about the NHS Constitution, all staff members who were aware of the NHS Constitution were asked to say, without prompting, where they had heard about it. Figures were then re-percentage to produce an overall figure for the groups included in this survey. The most commonly mentioned sources of information were through emails and bulletins, and induction/training/Health Education England, with 7% each. Managers, being the most aware group of the Constitution, were more likely to have heard from emails and bulletins (20%) and team meetings (14%).

2.15. The research also noted that there have been significant variations in how the NHS Constitution has been used since the 2012 report. 20% of NHS staff report to using the NHS Constitution to inform a decision, a statistically significant increase since 2012 (11%). Similarly, 24% of NHS staff used the NHS Constitution in discussion with other staff, compared to 17% in 2012. The percentage of NHS staff who have not used the NHS Constitution has dropped from 79% in 2012, to 69% in 2015.

2.16. Contact with the Constitution in the healthcare workspace has also increased. Nearly three-fifths (58%) said they had come across the NHS Constitution in some way, whilst 40% mentioned they had

read a summary either online or on paper. The proportion who had read it in full has also increased significantly (14% in 2015 compared to 3% in 2012).

2.17. Given this, correspondingly there has been a significant drop in NHS staff who have never encountered the NHS Constitution. In 2012, 61% of individuals had never encountered the NHS Constitution; in 2015, this figure dropped to 42%. Whilst these statistics show that progress is being made in making the NHS Constitution a more visible document and that it is increasingly being used in health care settings, it also outlines the significant work ahead to further embed the NHS Constitution to make it visible and accessible to all.

2.18. One way in which we are driving the visibility of the NHS Constitution, is through aligning organisational values to the values of the NHS Constitution, as mentioned in Chapter 1. This is to help make the NHS Constitution the 'first reference point for all NHS patients and staff'.²⁰ For the first time, this research focused on how NHS staff could have encountered the NHS Constitution through these links. Overall, 41% of staff had encountered the NHS Constitution through linking their own organisational values. Again, this was significantly higher amongst managers (64%), whilst significantly lower amongst dentists (16%). There was no statistical significance found between work setting (hospital, practice or other).

2.19. However, it is one thing to know that the NHS Constitution exists or to have seen or heard of it, but another to be knowledgeable about its contents, including how to use it, and the actions to take when rights and pledges are not being delivered. This is key if staff are to be able to use the NHS Constitution effectively as a means

²⁰ Sir Robert Francis, Mid Staffordshire NHS Foundation Trust Public Inquiry, www.midstaffpublicinquiry.com/report, (2013).

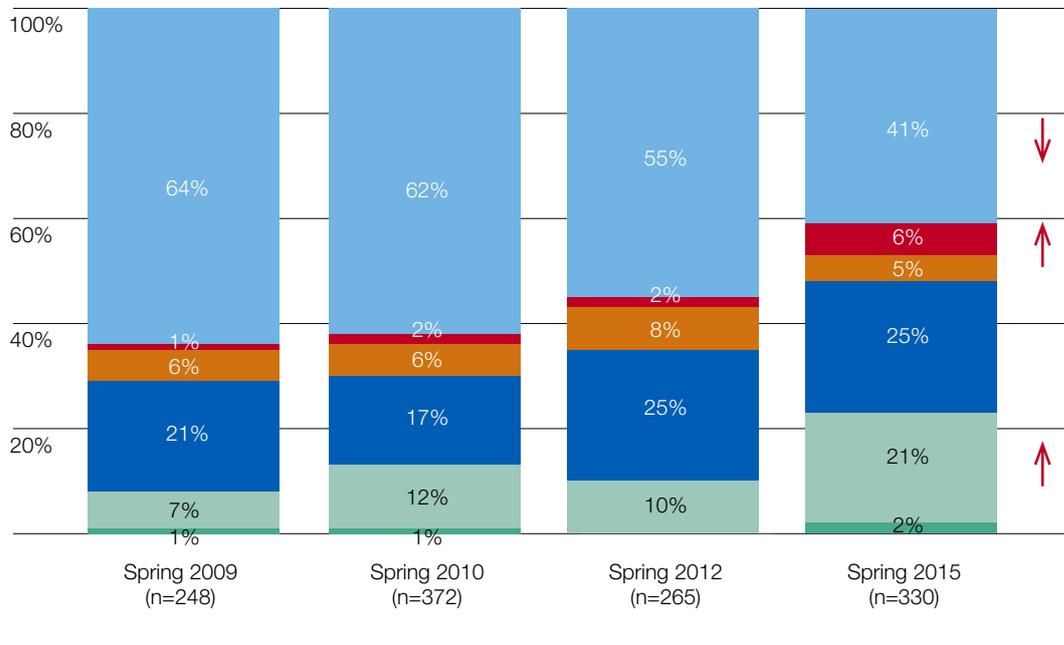


Chart 4 – How well informed do staff feel about the NHS Constitution

- Not aware
- Just heard the name
- Not all well informed
- Not very well informed
- Fairly well informed
- Very well informed

of upholding their rights and the pledges made to them, and something that future work around the NHS Constitution could investigate.

2.20. The research also looked at how informed staff felt about the NHS Constitution and its key elements (**Chart 4**). There has been an increase in the percentage of NHS staff who feel very well informed about the NHS Constitution (2% from 0%) compared to 2012, and a statistically significant difference in those who felt fairly well informed (21% compared to 10%). Similar to all previous waves of research, managers were more likely to say that they were fairly well informed in comparison to other staff.

Awareness of the key elements of the NHS Constitution amongst NHS staff

2.21. **Whilst few staff feel they are very well informed about the NHS Constitution, a greater proportion are aware of its main elements.** When prompted with a description, nearly two fifths of staff were able to recall all the main elements of the NHS Constitution, with a significant increase in each of these elements (except patients/staff rights) compared with previous years. Awareness levels of GPs, practice nurses, hospital nurses, hospital doctors

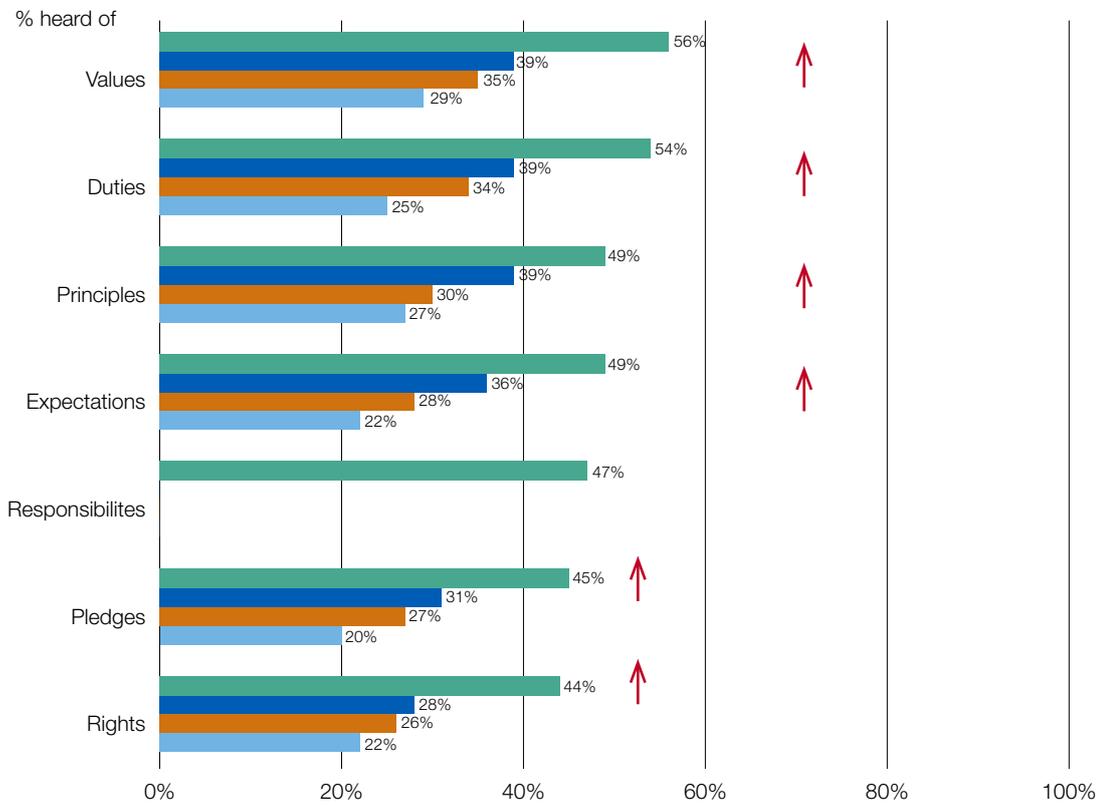


Chart 5 – Prompted awareness of the main elements of the NHS Constitution



and managers in particular all increased significantly. Levels of prompted awareness of the main elements have also increased significantly since 2012 for all elements with comparable data (**Chart 5**).²¹

2.22. 56% of NHS staff were able to name 'values', when prompted with a description. 54% were able to name 'duties', whilst 49% were able to name 'principles' and 'expectations'. All have also seen progressive increases since the NHS Constitution's launch in 2009.

2.23. Overall levels of unprompted awareness concerning the main reasons why the NHS Constitution was created (i.e. patient rights, patient care and equality of care), have significantly increased in 2015 in comparison to 2012 (43% from 29%). Encouragingly, this has progressively increased since the NHS Constitution's introduction in 2009, where levels of unprompted awareness stood at 19%, despite the promotion campaign at the time.

²¹ For the purpose of the 2015 report, the underpinning definition of 'responsibilities' was amended in line with the current version of the NHS Constitution, and therefore there was no representative data to compare this against.

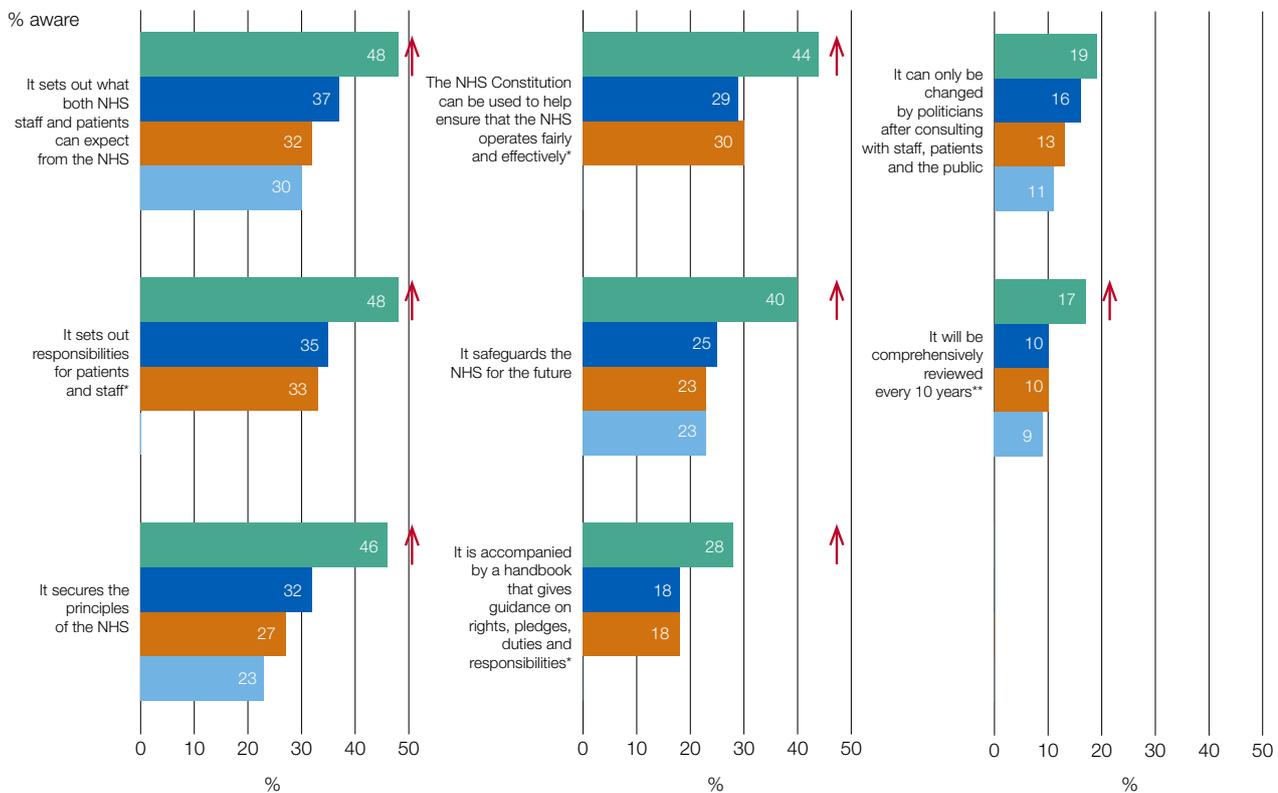


Chart 6 – Awareness of the key messages about the NHS Constitution



2.24. In addition to asking staff about their awareness of the main elements of the NHS Constitution, staff were also asked whether they had heard of a number of key messages contained within it. As in 2012, the most commonly recalled messages related to the fact that the Constitution sets out what staff and patients can expect from the NHS (48%), responsibilities for staff and patients (48%) and that it secures the principles of the NHS (46%) (Chart 6).

2.25. Levels of awareness were found to be generally higher for messages relating to the broader purpose of the NHS Constitution, as opposed to points of detail. For example, 44% of NHS staff knew that the NHS Constitution can be used to ensure the

NHS operates fairly and effectively, whereas just 19% of NHS staff were aware that any changes to the NHS Constitution are subject to a full public consultation.

2.26. Encouragingly, each wave of research has seen a progressive increase in the awareness of key messages, with the exception of ‘the NHS Constitution being used to help ensure that the NHS operates fairly and effectively’, which encountered a marginal drop between 2010 and 2012. Significant increases across the majority of key messages suggest that staff are engaging with, and understanding the NHS Constitution to a greater degree compared to previous waves.

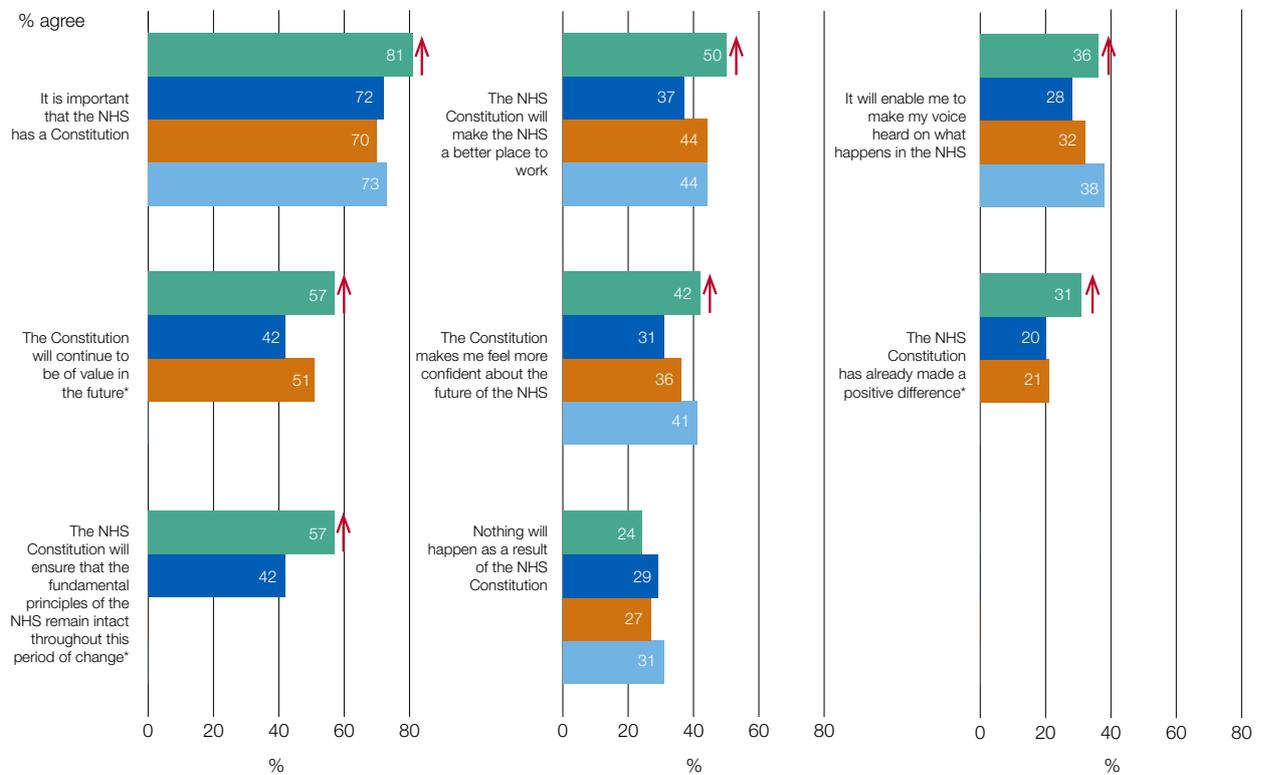


Chart 7 – Views on the values of the NHS Constitution

2015
2012
2010
2009

2015
2012
2010
2009

2015
2012
2010
2009

The value of the NHS Constitution among staff

2.27. Compared to all previous waves, NHS staff have a more positive view of the importance of the NHS Constitution. In 2015, 81% of NHS staff stated the importance for the NHS to have a Constitution, whilst there have also been statistically significant increases across all other values with positively framed messages,²² since 2012.

2.28. However, just 57% believe that the NHS Constitution will continue to be of value in the future, and will ensure that the fundamental principles of the NHS remain intact through periods of change (**Chart 7**). Whilst still a significant increase on the 2012 percentage (42%), there remains much work to be done to consolidate and embed the NHS Constitution into the NHS.

²² Chart 7 shows seven positively framed messages, and one negatively framed message- 'Nothing will happen as a result of the NHS Constitution'. It is very encouraging that this message displayed a decrease in NHS staff views since 2012.

2.29. Whilst there have been significant improvements in NHS staff views on the values of the NHS Constitution, there has been a significant decrease in the belief that the NHS Constitution has had a positive impact on patient experience (from 58% in 2010 to 47% in 2015). However there is no evidence of a swing to a negative impact. Instead, staff have displayed a more neutral perspective (with the majority saying no impact, or don't know) in terms of the Constitution's effect on patient experience.

2.30. This shift was particularly evident within certain groups. GPs, GP practice nurses and hospital nurses are all less likely to feel that the NHS Constitution is having a positive impact on patients. This decrease was statistically significant within the practice nurses occupation. Alternatively, there was an increase in managers feeling that the NHS Constitution was having a positive impact on patients.

2.31. 34% of NHS staff felt that the NHS Constitution has had a positive impact on them; a significant decline since 2012 (41%). Yet there was also a decline in NHS staff who thought that the NHS Constitution was having a negative impact (7% to 4%). Again, it is apparent that increasing numbers of staff are unsure, or cannot see, the impact of the NHS Constitution on them, for good or bad.

2.32. Interestingly, the data shows that GPs and healthcare professionals feel less informed (11% compared to 23%) and less supportive of the NHS Constitution (49% compared to 69%), and also do not feel that the NHS Constitution has as positive an impact on patients, as compared to the staff average (17% compared to 46%). Yet the data also indicates that the public are most likely to go to their GP or healthcare professional as a source of information regarding the NHS Constitution (42%). This is therefore an area in which significant improvement needs to be made, in order to allow the NHS Constitution to be used more widely, and enable better routes of access to the required information.

2.33. Across all waves of the survey, GPs have remained consistently less likely than the NHS staff average to think that the NHS Constitution has had a positive impact on them (13% compared with 34% NHS staff average in 2015).

2.34. Both hospital nurses and GP practice nurses have also displayed a drop regarding the positive impact the NHS Constitution has had on them. For hospital nurses, positive perceptions of impact on them have decreased from 56% in 2009 to 36% in 2015, while for GP practice nurses they have decreased from 52% in 2009 to 29% in 2015.

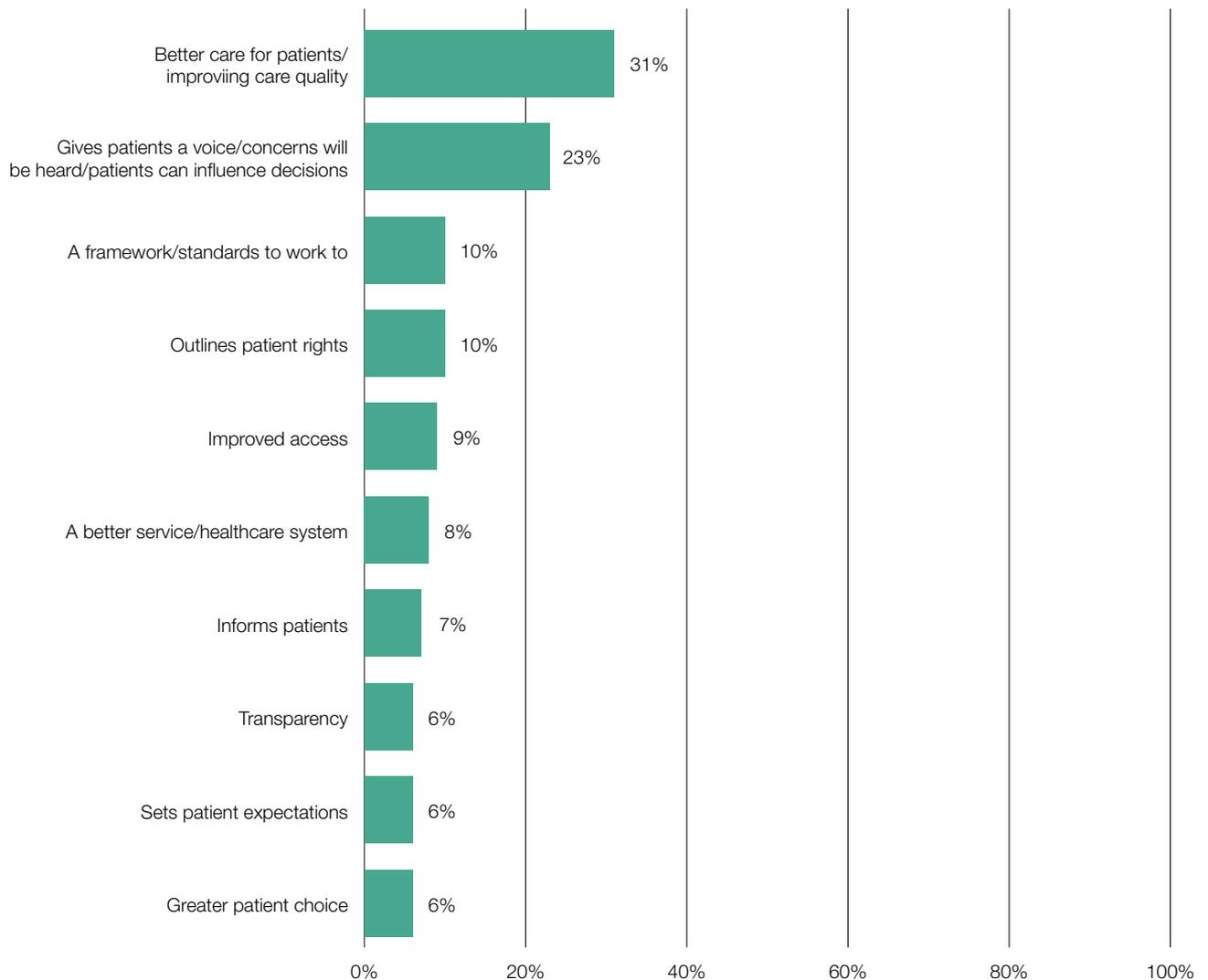


Chart 8 – Why the NHS Constitution has had a positive impact on patient experience

2015

2.35. Length of time in current role, gender and age did not influence whether NHS staff felt the NHS Constitution has had a positive impact on staff; but the proportion feeling that the NHS Constitution has had a positive impact on staff was higher amongst those who were aware and felt well informed. Of

those who thought that the NHS Constitution would have a positive impact on patient experience, the most common reasons mentioned by staff were to improve patient care and to give patients a voice²³ (**Chart 8**).

²³ Staff could provide multiple reasons on why the NHS Constitution has had a positive impact on patients experience. The results in Chart 8 and 9 followed the same methodology, and show the top ten most common responses.

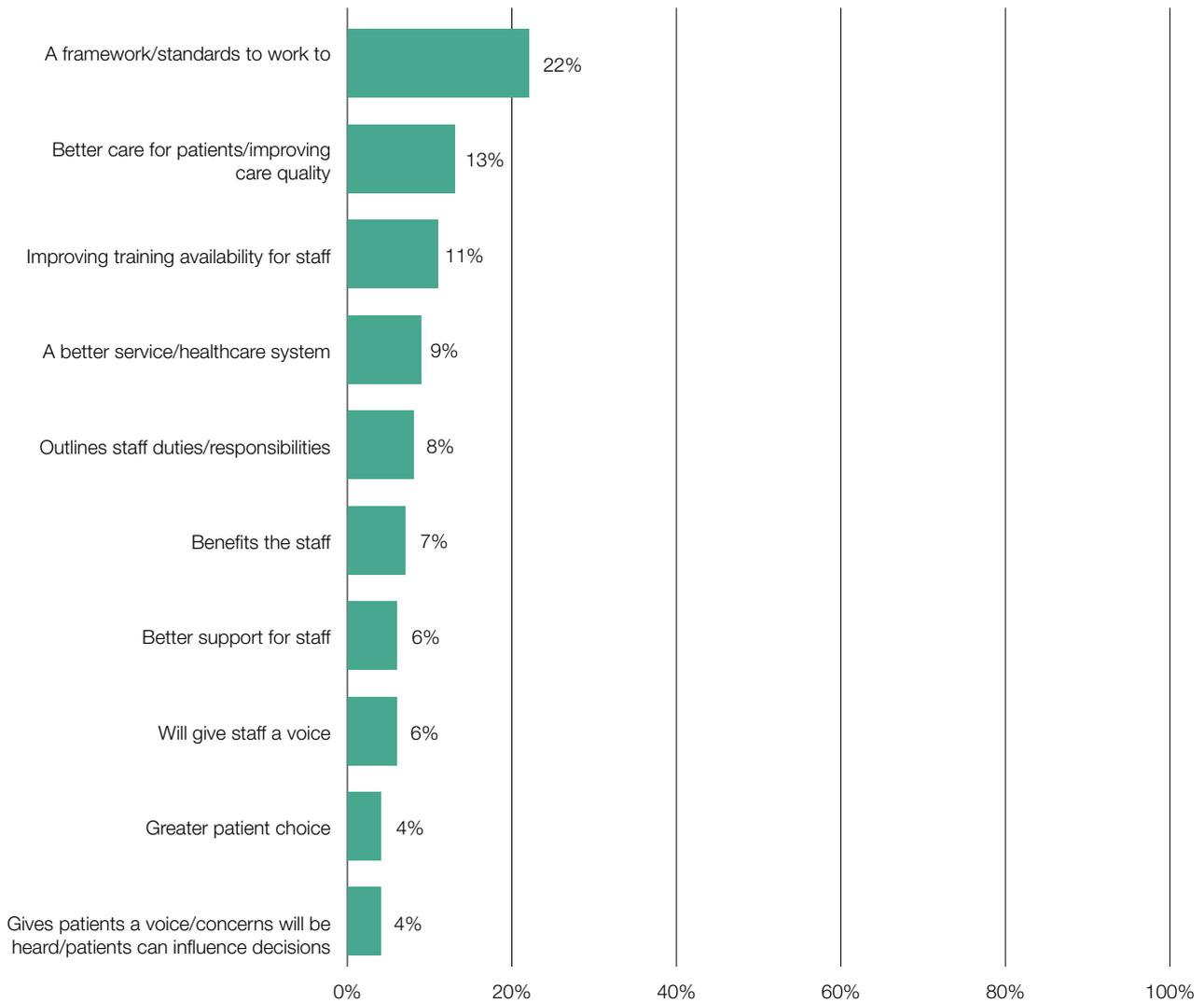


Chart 9 – Why the NHS Constitution has had a positive impact on staff

2015

2.36. A broad range of reasons were also provided by NHS staff as to why the NHS Constitution had had a positive impact personally, with the most common being that it provided a framework or standard (22%). 13% also mentioned that the NHS Constitution ensured a better standard of care for patients, whilst 11% mentioned how it improved the availability of training for staff (Chart 9).

2.37. Overall, NHS staff were more likely to feel that the NHS Constitution had influenced how they treated and dealt with patients rather than influenced them personally. Three-quarters felt that it had ensured patients were treated with dignity and respect (76%), that they were empowered to improve the quality and safety of services for patients and their families (72%) and to be open with patients, their families and carers (74%).

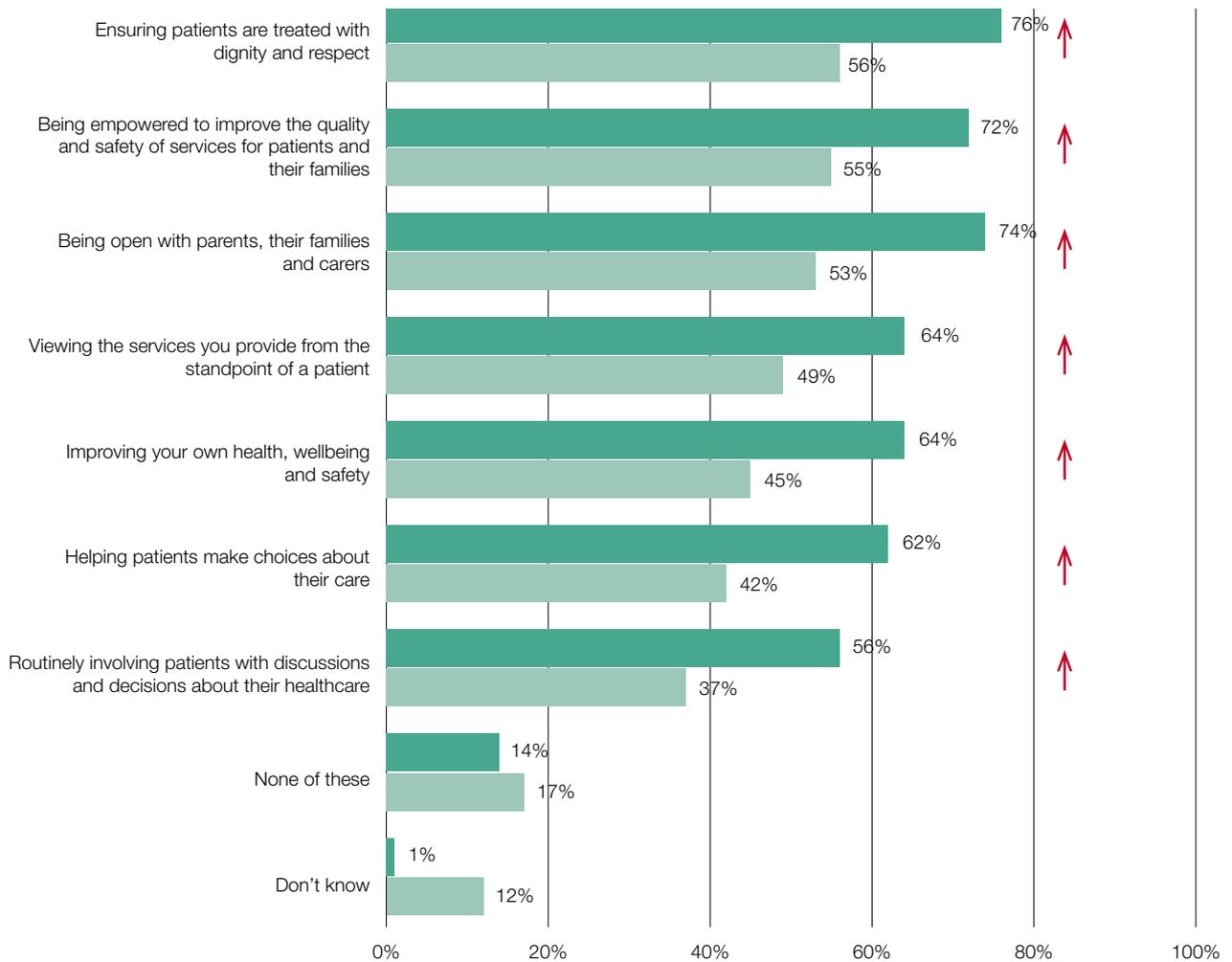


Chart 10 – How has the NHS Constitution influenced your day to day work?

■ 2015
■ 2012

Three-fifths (64%) felt it had helped them to improve their own health, well-being and safety (**Chart 10**).

2.38. Encouragingly there has been a significant increase in how the NHS Constitution has influenced the day to day work of staff across all examples outlined in **Chart 10**. In particular, practice nurses were more likely than the NHS staff average to say that the NHS Constitution has impacted on

their day to day work in relation to patient choice, specifically in:

- Routinely involving patients with discussions and decisions about their healthcare (79% practice nurses compared with 56% on average).
- Helping patients make choices about their care (82% practice nurses compared with 62% on average).

- Viewing the services you provide from the standpoint of a patient (81% practice nurses compared with 64% on average).
- Being open with patients, their families and carers (87% practice nurses compared with 74% on average).

2.39. Within Sir Robert Francis QC's Inquiry Report into the failings at Mid-Staffordshire NHS Foundation Trust, the importance of the NHS Constitution for patient empowerment, patient choice and transparency was mentioned. It is therefore particularly encouraging that the research highlights the improvements being made in these areas.

2.40. In circumstances where NHS staff thought the NHS Constitution was having a negative impact on patients, this was often based around a lack of resources to deliver the expectations. In circumstances where NHS staff thought the NHS Constitution was having a negative impact on themselves personally, the main reason given was down to increased bureaucracy, and the increased workload delivering the legal duties and expectations the NHS Constitution places on them.

Support for the NHS Constitution

2.41. Finally, we tested staff support for the NHS Constitution. Three-quarters (76%) of NHS staff who were aware of the NHS Constitution supported it, compared with just over half (56%) of all NHS staff who were not aware. Furthermore 95% of NHS staff who felt well informed about the NHS Constitution supported it, compared with two-thirds (64%) of those who did not feel well informed.

2.42. **The evidence also shows that the significant decline in the proportion of NHS staff who said they support the NHS Constitution between 2009 and 2012 has been reversed**, and levels of support have now surpassed that of 2009, when the NHS Constitution was first introduced.

2.43. **Since 2012, the proportion of NHS staff saying they strongly support the NHS Constitution has risen from 18% in 2012 to 28% in 2015.** Nearly seven in ten NHS Staff (69%) said they supported the NHS Constitution to some extent in 2015, with an increase between 2012 and 2015 which has more than reversed the earlier decreases seen in 2009 and 2010.

2.44. This increase in support was particularly evident within specific occupations, such as hospital nurses and administrative staff. Both occupations also experienced significant increases in levels of awareness of the NHS Constitution (**Chart 3**), suggesting a link between those who are aware and understand the NHS Constitution, and subsequent levels of support.

2.45. Stated levels of opposition to the NHS Constitution have also fallen from 6% to 2% since 2012, as is shown in **Chart 11**.

2.46. There has also been an increase in the proportion of staff saying they are likely to use a copy of the NHS Constitution in the future (61% in 2012 to 69% in 2015). Whilst just over a quarter of staff (28%) say they are not likely to use it, even GPs who proportionately show the least desire to use the NHS Constitution in their work have experienced a rise. This is highly encouraging as the more the NHS Constitution is used, the deeper it will be embedded into the system, and therefore the more tangible benefits it will deliver to all who use it.

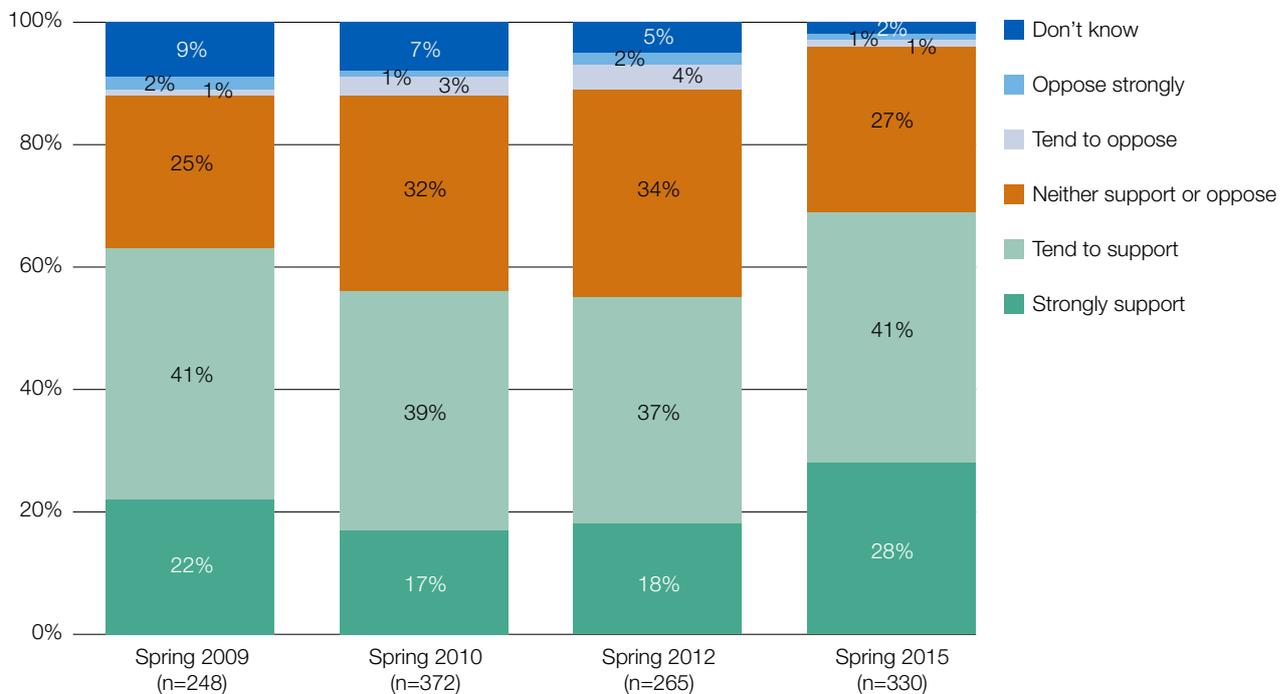


Chart 11 – Overall support for the NHS Constitution

3. Conclusions

3.1. Six years on from its launch, it is clear that there remains much work to do to embed the NHS Constitution into the NHS. The first report on the effect of the Constitution, could only offer an interim assessment of where the Constitution was making a difference. This report has allowed us to understand in more depth the impact of the NHS Constitution, and importantly, where the NHS Constitution is having a limited effect.

3.2. This report highlights clearly the continuing need to raise awareness of the NHS Constitution, particularly amongst the public. It is vital that individuals are aware of the NHS Constitution, and understand how to use it in order to drive improvement of the NHS. It is unsatisfactory that public awareness of the NHS Constitution has therefore stagnated since 2012, and even dropped in some cases.

3.3. It is clear that staff feel there are tangible benefits to having an NHS Constitution, but until public awareness of the Constitution is increased, these benefits will be limited. Across all measures, and for staff, patients and the public, those who felt well informed about the Constitution tended to feel more positive about it. Yet there is little evidence that the public and patients are using the NHS Constitution as a means of identifying and exercising their rights, even when they are aware of it.

3.4. The NHS Constitution helps patients understand what they can expect from the NHS, and in turn, the responsibilities they owe to the health service and each other. Patient empowerment, one of the focal points of the Constitution, means more than this. It means understanding the Constitution, and how to use it to ensure patients receive the entitlements the NHS promises. Without significant effort to increase awareness of the NHS Constitution we cannot expect it to drive patient empowerment and involvement in their health and care in the way that it is intended.

3.5. Conversely, staff awareness of the NHS Constitution continues to rise. This advocates taking a long term approach, building awareness over time. It is particularly striking that those who know about the Constitution are more likely to support and value it, and that the more they know about it the greater their support. Particular professions have shown significant increases in awareness of the NHS Constitution, for example, NHS managers. However, the overall picture is very mixed, with certain professions reporting much lower levels of awareness compared to others. It is disappointing to find such variations exist, and therefore very important to engage with NHS staff to better understand why they are not aware of the NHS Constitution or why they are failing to use it.

3.6. This report showed that NHS staff are increasingly engaging with the NHS Constitution to help inform their work and day to day role and that, in general, staff remain enthusiastic and supportive of the NHS Constitution. This is an important finding which suggests that a stronger, more visible and more effective NHS Constitution could have a positive effect on all who have regard to it in the years to come.

4. Next steps

4.1. The NHS Constitution brings together in one place what makes the NHS unique and special. Not only does it give a focal point to what the health service is all about, it reminds everyone what the NHS is striving to achieve each and every day.

4.2. This report reminds us of the challenges ahead in raising awareness and embedding the NHS Constitution at every level of the NHS. It provides us with evidence which emphasises the importance of embedding the Constitution as the first reference point for all NHS patients and staff.

Subsequent reports on the effect of the NHS Constitution

4.3. The Health Act 2009 requires the Secretary of State to report on the effect of the NHS Constitution every three years. This is the second such report. The third report must be laid before Parliament by 29 June 2018.

4.4. This report has highlighted the areas in which improvements must be made in order to ensure the NHS Constitution has a meaningful impact on service improvement and quality. It intended to act as a basis for policy making to ensure that the Constitution is woven into the fabric of the NHS. The next report must focus on the extent to which this has happened.

4.5. Future reports on the effect of the NHS Constitution would also benefit from richer sources of evidence that address more

directly the reasons behind low awareness in certain NHS professions and amongst the public, so that we can best identify how to further embed the NHS Constitution into the health system. It is one thing to know that the NHS Constitution exists, or to have heard of it, but another to be knowledgeable about its contents, including how to use it, and the actions to take when rights and pledges are not being delivered.

4.6. The National Health Service Act 2006 places clear duties on NHS England, and on clinical commissioning groups, to promote the NHS Constitution. This means promoting awareness of the Constitution among patients, staff and the public. It also means that NHS England and clinical commissioning groups must exercise their own functions in a way that promotes the Constitution.

4.7. Rightly, it will be for NHS England and Clinical Commissioning Groups to determine precisely how they will fulfil these legal duties. Rather than seeking to develop and publish a cross-system strategy with key stakeholders, and implement specific behaviour change campaigns, NHS England have decided that a more effective use of resources would be to focus on promoting the NHS Constitution through their core work.

4.8. It will therefore be up to NHS England to fulfil their legal duty to raise awareness and promote the NHS Constitution via such means. The Department will hold NHS England to account in order to ensure this is achieved.

Annex A – Glossary

The NHS Constitution for England is a ‘declaratory document’, articulating existing rights and responsibilities in one place. The NHS Constitution is made up of five main elements:

- **Principles** – described as “enduring high level ‘rules’ that govern the way that the NHS operates, and define how it seeks to achieve its purpose”.
- **Values** – which underpin the principles and are intended to “provide the common ground for co-operation to achieve shared aspirations”.
- **Responsibilities** – “expectations of how patients, the public and staff can help the NHS work effectively and ensure that finite resources are used fairly.”
- **Rights** – an “entitlement protected by law”. These include rights conferred explicitly by law and rights derived from legal obligations imposed on NHS bodies and healthcare providers. The Constitution brings together all of these rights in one place but does not create or replace them.
- **Pledges** – aims that the NHS is committed to achieve. Pledges are not legally binding and express an ambition to improve going beyond legal rights. Pledges, though, are more than aspirations; there is an expectation that pledges will be delivered whether through performance management, regulation, choice or accountability frameworks.

The Constitution is also supported by two additional documents that provide further information, including information that would be subject to frequent changes, allowing the NHS Constitution itself to be a more high-level and enduring document:

- **the Handbook to the NHS Constitution** – which provides additional, detailed information on the rights, pledges and responsibilities set out in the Constitution, as well as explaining what underpins them.
- **the Statement of NHS Accountability** – a description of the system of responsibility and accountability for taking decisions in the NHS. The Constitution commits the Government to providing a clear and up-to-date Statement of NHS Accountability.

Annex B – Sample weightings

Altogether there have been four waves of research on the impact of the NHS Constitution. In wave four, 654 NHS staff members were interviewed:

Wave	Spring 2009	Spring 2010	Spring 2012	Spring 2015
Fieldwork dates	12 January – 23 February	8 February – 17 March	21 February – 30 March	17 February – 1 April
Total sample size	652	1006	652	654

Within their research, GfK weighted occupations in order to produce a more representative report of the thoughts and feelings of NHS staff in general. Surveys were conducted by telephone using Computer Assisted Personal Interviewing (CATI), with data weighted by occupation and region to provide a representative sample.

The sample figures for NHS staff are as follows:

Job title	Number in sample
GPs	53
Specialty registrars	12
Senior hospital doctors	43
Specialist nurses	70
GP Practice Nurses	107
GP Practice Managers	41
CCG managers	26
Secondary care managers	54
Dentists	58
NHS Pharmacists	61
Admin staff in secondary care	51
Junior Hospital Doctors F1/F2	14
General Ward Nurses	49
Admin staff in GP practices	15
Total	654

Overall, 1726 members of the public were interviewed:

Wave	Spring 2009	Spring 2010	Spring 2012	Spring 2015
Fieldwork dates	22-27 March 2009	11-16 March 2010	15-20 March 2012	12-21 February 2015
Total sample size	1735	1610	1576	1726

Further notes on reading this questionnaire

- Data have been weighted to provide representative estimates. Only weighted data are shown.
- The weighting is by job title and region (not interlocked).
- In some cases proportions may sum to more or less than 100% because of rounding error, because the question was a multi-coded option or because 'Don't know' and 'Prefer not to say' answers are not shown.
- Significance testing is based on the effective sample size for each survey, 95% confidence intervals and two-tailed tests.