PRIVATE HEALTHCARE MARKET INVESTIGATION

Invitation to comment on patient survey methodology

On 11 September 2012, as part of its investigation into the supply or acquisition of privately funded healthcare in the UK, the Competition Commission (CC) issued a notice which invited comment on the methodology for the GPs and Consultants surveys that are being carried out as part of the investigation as well as on the surveys carried out by the Office of Fair Trading during its market study. A number of interested parties who expressed an interest in commenting were also sent draft questionnaires for comment. The notice also indicated that the CC was considering carrying out a survey of patients.

The CC has decided to proceed with a patient survey. This notice sets out our proposed methodology for the patient survey, including details of the conjoint exercise that will form part of the questionnaire. Any comments on the methodology set out below should be made by email to the Inquiry Manager at christiane.kent@cc.gsi.gov.uk as soon as possible, and in any event no later than Monday 22 October. Unfortunately, due to the need to complete survey work before the end of the year, we will be unable to incorporate any responses to the consultation received after the deadline.

Objectives of the patient survey

The objectives of the patient survey are to understand how the private healthcare market works in relation to:

- the referral process;
- patient interactions with healthcare professionals, private healthcare facilities and insurers;
- patient preferences/expectations; and
- sources of information available to patients.

Patient survey methodology

The main (‘primary’) approach we are taking is to contact patients who have recently experienced private healthcare and completed a consent form to take part in our survey. As a backup (‘secondary’) approach, in case issues arise with the primary approach, we are also exploring contacting recent patients by way of commercial market research panels.

The following areas of medical care will be excluded: elective cosmetic surgery (including corrective laser eye treatment and other purely elective laser treatments), mental health, dentistry, and standard maternity care and fertility treatments.

Primary approach

- Consent will be sought from patients receiving in-patient treatment (overnight and day case) at facilities run by the five main private healthcare providers and at a number of NHS Private Patient Units (PPUs).
• Exclusions:
  — patients below the age of 18;
  — patients paid for by the NHS; and
  — non-UK residents.
• An online survey of about 20 minutes. A small number of patients may be contacted by phone if an online survey is not suitable for them.
• Target minimum sample size: 1,000.

**Secondary (back-up) approach**

• Online survey using commercial market research panels.
• Panel members screened for recent experience of in-patient private healthcare.
• Target minimum sample size: 800.

**Conjoint exercise**

The patient questionnaire will include a conjoint exercise that will help us to understand patient preferences. An extract from the questionnaire providing full details of the exercise, including attribute definitions and a grid showing attribute levels, is attached. In summary:

• The conjoint exercise will be carried out by all respondents.
• The exercise will cover six attributes.
• Each conjoint task (screen) will present three concepts, ie combinations of attributes at varying levels, for the respondent to choose from. A ‘none’ option will also be offered. All concepts will include all attributes.
• Each respondent will be given a maximum of ten tasks to complete, allocated at random.
• Sawtooth Software will be used to create the overall design.
• Analysis will be carried out using a Hierarchical Bayes methodology.

As previously, a number of interested parties who expressed an interest have been sent the conjoint sections of the patient questionnaire for comment. If you would like to comment on the conjoint parts of the patient questionnaire, please contact the Inquiry Manager by noon on Friday 19 October 2012.