



# NHS Constitution Wave 4 Report

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# 1 EXECUTIVE SUMMARY

#### 1.1 Introduction and methods

In January 2015 GfK NOP was commissioned to conduct a fourth wave of NHS Constitution tracking research amongst two key populations, health professionals (staff) and members of the general public (including patients).

The broad objectives of the research were to gauge awareness of the NHS Constitution and to compare the results with the previous three waves conducted in 2009, 2010 and 2012.

The staff survey was conducted by telephone, with quotas set to ensure a mix of occupations. 654 interviews were conducted in total in 2015.

The general public survey was conducted via a face-to-face omnibus and the sample was demographically representative of the English adult (16 years plus) population. A total of 1,726 interviews were completed in 2015.

# 1.2 Overview of key findings - staff

#### 1.2.1 Awareness and use of the NHS Constitution

In this report we discuss two kinds of awareness of the NHS Constitution among NHS staff: awareness after prompting with the name (i.e. those who said "yes" when asked if they had heard of the NHS Constitution) and total awareness, by which we mean both awareness after prompting with the name and awareness after being provided with a description of the NHS Constitution.

Levels of awareness of the NHS Constitution after prompting with the name have nearly doubled since 2009 (59% 2015 compared with 31% 2009), while there has also been an upward trend in levels of total awareness (69% 2015 compared with 47% 2009). This is shown in Chart 1 in the main body of this report.

Since the baseline measure in 2009, there have been significant increases in levels of total awareness amongst managers (89% in 2015 compared with 69% 2009), practice nurses (59% 2015 compared with 36% 2009), Hospital Nurses (71% 2015 compared with 36% 2009), hospital doctors (72% 2015 compared with 57% 2009) and pharmacists (72% in 2015 compared with 51% in 2009) (Chart 2).

There have been increases in levels of total awareness since 2012 amongst staff in some occupations which lagged behind for the first few years: there have been significant increases in levels of awareness amongst administrative staff (34% in 2012 to 62% in 2015) and hospital nurses (58% in 2012 to 71% in 2015) (Chart 2).

The main sources of awareness of the NHS Constitution in 2015 were emails/email bulletins (7%), induction/training/Health Education England (7%), national or mainstream press/media (6%), team meetings (6%) and meetings/events/roadshows (6%). The importance of national/mainstream press/media and radio/television as sources of information about the NHS Constitution declined significantly between 2012 and 2015 (Chart 3).

Occupation influenced where NHS staff had heard about the NHS Constitution, for example, GPs, practice nurses and hospital doctors were more likely than the NHS staff average to have heard about it from the medical press (11%, 8% and 10% respectively compared with 5% NHS staff average), whilst managers were more likely than the NHS staff average to have heard about it from



email bulletins (20% compared with 7% NHS staff average) and team meetings (14% compared with 6% NHS staff average).

Three-fifths (58%) of NHS staff said that they had come across the NHS Constitution, significantly higher than in 2012 (39%). The most likely ways to have come across the NHS Constitution were by reading a summary (40%, up from 21% in 2012) or reading about it in an article/journal (34%). One in five (21%) reported that it was discussed/mentioned in a staff meeting (Chart 4).

A third (31%) of NHS staff said that they had used the NHS Constitution in the past 12 months – significantly higher than in 2012 (21%). The ways in which it had been used the most were in a discussion with other staff (24%, up from 17% in 2012) or to inform a decision (20%, up from 11% in 2012) (Chart 6).

#### 1.2.2 Awareness of key elements of the Constitution

Overall levels of unprompted awareness of the main aims of the NHS Constitution (i.e. the ability to cite one or more main aims in response to an open question without any prompting) have further increased in 2015 after a significant increase in 2010 (43% 2015, 29% 2012, 26% 2010 compared with 19% 2009) (Chart 7). Levels of prompted awareness of the main elements have increased significantly since 2012 for all elements with the exception of the Responsibilities (re-worded in 2015). They have also increased significantly since the baseline measure in 2009 (Chart 8).

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 9).

Levels of awareness of most of the key messages about the Constitution have also increased significantly since 2012 – the only one which has not increased in awareness is that it can only be changed by politicians after consultation (Chart 9).

#### 1.2.3 Understanding the value of the NHS Constitution

A large majority of NHS staff (81%) agreed that it is important that the NHS has a Constitution. A majority also agreed that the Constitution will continue to be of value in the future (57%) and that it will ensure that the fundamental principles of the NHS will remain intact through this period of change (57%). Half (50%) agreed that the NHS Constitution will make the NHS a better place to work (Chart 10).

Compared with 2012 NHS staff appear to have a more positive view of the importance of the Constitution and of the future of the NHS Constitution in 2015 as agreement with all of the positive messages about the Constitution increased significantly between 2012 and 2015 (Chart 10).

However, these more positive views about the value of the Constitution are not yet being seen in day to day work. In 2015 just under half of NHS staff felt that the NHS Constitution has had a positive impact on patient experience – a significant decrease since 2010 (from 58% to 46%) (Chart 11). Since 2009, the proportions of hospital nurses, GP practice nurses and GPs saying the Constitution has had a positive impact on patients have all declined. The proportions saying it has had a negative impact have remained very low over time (2% in 2015) (Chart 12).

One third (34%) of NHS staff said that the NHS Constitution has had a positive impact on them: also a significant decline since 2012 (41%). However the proportion saying it has had a negative impact has also declined from 8% in 2012 to 3% in 2015, while the proportion saying it has had no impact has increased from 37% to 54% (Chart 13). Here too the perceptions of hospital nurses and GP practice nurses have become significantly less positive since 2009.



#### 1.2.4 Support for the Constitution

Seven in ten NHS Staff (69%) said they supported the NHS Constitution in 2015, with an increase in stated support between 2012 and 2015 which has more than reversed the decreases between 2009-2010 and 2010-2012. Stated levels of opposition have also fallen slightly from 6% to 2% (Chart 18). The increases in support came particularly from hospital nurses and administrative staff and may be linked to the fact that they were more likely to be aware of the NHS Constitution than they had been in previous years (Chart 19).

There has also been an increase in the proportion of staff saying they are likely to use the NHS Constitution in the future, rising from 61% in 2012 to 69% in 2015. However, around a quarter of staff (27%) say they are not likely to use it (Chart 20).

As at previous waves, staff who were aware of or felt well informed about the NHS Constitution were more likely than the NHS staff average to say they support it and would use the NHS Constitution in the future.

#### 1.2.5 General views of NHS staff

Overall the majority of NHS staff said they were satisfied with the service they deliver to patients in their local area (73%) and they were proud to work for the NHS (92%). While the proportion satisfied with the service they deliver to patients in their local area is not significantly different from the 2012 figure, the proportion saying they were proud to work for the NHS has increased significantly (up from 86% in 2012) (Chart 21 and Chart 22).

#### 1.3 Overview of key findings – public

In 2015, 19% of the general public recognized the name of the NHS Constitution, which is very similar to the 2012 level of 18%. Levels of total awareness<sup>1</sup> of the NHS Constitution amongst the public (after prompting with a description) have declined slightly since 2012 (24% in 2015, compared with 27% 2012 and 22% 2009) (Chart 23). This is not surprising given that there has been little direct public-facing communications on the subject over the period. The public remain less likely than staff to be aware of the NHS Constitution, and the gap appears to be widening.

Very few (2% or fewer) of the public said that they would turn to the NHS Constitution to find out more information about various aspects of the NHS (e.g. what to expect from the NHS or their responsibilities as a patient) (Chart 24). The main sources of information that the public would turn to have consistently been GPs/health professionals, the NHS (Choices) website and the internet more generally. While almost nine in ten (88%) of the public could say where they would look for information on what they can expect from the NHS to keep them healthy, fewer were able to say where they would look for information on their responsibilities as an NHS patient (75%). A similar percentage of the public said they knew what they could do if their expectations weren't met by the NHS (77%). These patterns have remained unchanged over time.

<sup>&</sup>lt;sup>1</sup> The figures reported for awareness after prompting with the name among the general public include those who had spontaneously mentioned the NHS Constitution in response to earlier questions, as well as those who said "yes" after being asked if they had heard of the NHS Constitution. The figures reported for total awareness among the general public include spontaneous awareness, awareness after prompting with the name and awareness after being provided with a description of the NHS Constitution.



# 1.4 Concluding remarks

Although there has not been a large scale communications campaign since the launch of the NHS Constitution, most measures of awareness among NHS staff have remained increased significantly since its launch.

In 2015 significantly more administrative staff and hospital nurses were aware of the Constitution compared with previous studies. However, the increased awareness and support are not translating into increased perceptions that the Constitution has already had a positive impact.

Managers remained the most likely to be aware of the Constitution, knowledgeable about it, have encountered or used the Constitution in their job.

GPs continued to hold views about the Constitution which were less positive than the average for NHS staff, on several measures.

Across all measures, those who felt well informed about the Constitution tended to feel more positive about it.



# 2 Introduction

#### 2.1 Background

The NHS Constitution was one of a number of recommendations in Lord Darzi's report 'High Quality Care for All', published on the 60<sup>th</sup> anniversary of the NHS, which set out a ten-year plan to provide the highest quality of care and service for patients in England.

The NHS Constitution was created to protect the NHS and to make sure it will always provide high-quality healthcare that is free and for everyone. It was first published in January 2009; it was updated in March 2010 and then again in March 2012.

Research was undertaken in 2009 to measure the baseline awareness level. Follow-up surveys were undertaken in 2010, 2012 and 2015.

#### 2.2 Research Methods

The target audiences for the research comprised NHS staff and the general public in England.

The NHS staff sample were in specified occupations, working in the NHS in England. The occupation groups were:

- GPs
- Practice nurses
- Hospital doctors
  - Senior doctors, junior hospital doctors at Foundation 1 and Foundation 2 (F1/F2)
     levels and specialty registrars were covered
- Nurses in secondary care
  - o General ward nurses and specialist nurses were covered
- Senior managers: this sample was spread across primary and secondary care settings
- Administration staff in primary care and secondary care settings
- Dentists
- Pharmacists.

The contact lists for the research were provided by Binleys who hold extensive lists of medical professionals in England. Where good quality, named lists were available, these were used as the sample sources and a stratified random sample was requested in each case. In 2015 GfK experienced much greater difficulty in obtaining interviews with GPs and with hospital doctors at all levels, compared with previous surveys. The random samples of GPs and senior hospital doctors were therefore supplemented with small numbers of leads for doctors who had recently taken part in another survey for the Department of Health and who had agreed to be recontacted (30 additional GP contacts and 36 additional senior hospital doctor contacts were used).

Named lists were available for most occupations with the exception of general ward nurses, junior hospital doctors at F1/F2 level and administrative staff. These were sampled as follows:

- For general ward nurses and F1/F2 junior hospital doctors, Binleys were asked to provide general reception numbers for stratified random samples of hospitals. Interviewers called these numbers and asked to be put through to a ward. When speaking to someone on the ward, they asked to be put through to either a general ward nurse or an F1/F2 doctor.
- Binleys does not hold named listings of administrative staff; we therefore took two
  approaches. For administrative staff in a secondary care setting, the hospital telephone
  numbers obtained from Binleys for general ward nurses and F1/F2 doctors were used;



interviewers called the hospital switchboard number and asked to be put through to a relevant department. For administrative staff in primary care the telephone numbers obtained from Binleys for GPs, Practice Nurse and Practice Manager interviews were used. These numbers are invariably a reception number and the interviewer asked to speak to relevant administrative staff.

GfK's aim in the 2015 survey had been to achieve a sample structure very similar to that achieved in 2012, to maximize comparability. Unfortunately this turned out not to be possible; as mentioned earlier, GfK experienced much greater difficulty in obtaining interviews with both GPs and hospital doctors in 2015, compared with previous surveys. The difficulties were particularly acute with GPs and the F1/F2 doctors and specialty registrars.<sup>2</sup> As a result the quota targets for interviews with different occupation groups had to be relaxed in order to ensure that the target total number of interviews could be achieved within the fieldwork period.

Table 1 shows the number of interviews completed within each occupation.							
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Table 1. Interviewed sample						
Occupation	No of interviews				Notes (2015)	
	2009	2010	2012	2015		
GPs	99	150	100	53		
Practice nurses	102	150	101	107		
Hospital doctors	103	160	100	69	43 senior hospital doctors; 12 specialty registrars; 14 F1/F2 doctors	
Nurses	101	151	100	119	Mix of specialist (70) and general nurses (49)	
Managers	100	164	101	121	41 GP practice managers; 26 CCG managers; 54 hospital managers	
Administration staff	48	80	50	66	51 in secondary care setting, 15 in primary care setting	
Dentists	52	75	50	58		
Pharmacists	47	76	50	61	In secondary care setting only	
Total	652	1006	652	654		

#### 2.3 Questionnaire

The questionnaire which was used in 2015 was based upon the 2012 questionnaire in order to facilitate comparisons over time. However, some small changes to the questionnaire were made to reflect current priorities and information requirements.

This questionnaire was designed by GfK NOP working in close collaboration with DH. The majority of questions used pre-coded lists of responses, although the opportunity to capture further detail

The increased difficulty in interviewing hospital doctors compared with earlier surveys on the same topic seemed to be due to these doctors having less time available and being less able to predict when they might be free (more reluctant to make appointments/more broken appointments). With regard to the increased difficulty in interviewing GPs, the factors seemed to be larger numbers of practices having whole-practice policies not to participate in surveys, and increased workloads/working hours among GPs, leading to gatekeepers such as Practice Managers refusing requests on behalf of the GPs and fewer/briefer windows during the working day when they are accessible. This analysis is based on feedback from members of the GfK interviewing team who had worked on similar studies in previous years as well as the 2015 study.



was possible via "other" answer options at some questions. There were three open ended questions which were office coded after the survey was completed.

#### 2.4 Fieldwork

Fieldwork was conducted by telephone using Computer Assisted Telephone Interviewing (CATI). Fieldwork dates were as follows:

- Wave 1 12<sup>th</sup> January 23<sup>rd</sup> February 2009
- Wave 2 8<sup>th</sup> February 17<sup>th</sup> March 2010
- Wave 3 21<sup>st</sup> February 30<sup>th</sup> March 2011
- Wave 4 17<sup>th</sup> February 2<sup>nd</sup> April 2015

Interviewing took place from GfK NOP's telephone interviewing centre in Central London. GfK NOP is a member of the Interviewer Quality Control Scheme (IQCS) and all interviewers were fully trained and monitored.

A letter from a Department of Health Director was available to fax or email to respondents who required further reassurance before completing the interview. A copy of the letter is included in the appendices.

#### 2.5 Weighting

To enable separate analysis amongst healthcare professionals by job role a minimum number of interviews was conducted within each occupation. Data were then weighted to give an estimate of the views and awareness of all NHS staff in England in the occupations included in the research. Further weighting was also required to account for over-sampling by region.

Weighting was applied by the following criteria:-

- Re-balancing the proportion of staff in different occupations in the sample, then
- Weighting by Area Team.

The weights for occupation were based on the workforce number data taken from the NHS Information Centre. The unweighted and weighted proportions are shown in Table 2.



Table 2. Weighted and unweighted profiles of NHS Staff sample by occupation (2015)					
	Unwe	ighted	Weighted		
Occupation	N =	%	N =	%	
Total	654	100	655	100	
GP	53	8.1	31	4.7	
Practice Nurse	107	16.4	13	2.0	
Hospital doctor	69	10.6	90	13.7	
Nurse in secondary care	119	18.2	239	36.5	
Administration staff	66	10.1	208	31.8	
Managers	121	18.5	39	6.0	
Dentists	58	8.9	21	3.2	
Pharmacists	61	9.3	14	2.1	

The regional weights were based on ONS population estimates for adults living in each Area Team. These weights are shown below in Table 3.

Table 3. Weighted and unweighted profiles of NHS Staff sample by region (2015)				
Region	N = 654	%	N = 654	%
North	195	29.8	183	28.0
Midlands and East of England	187	28.6	189	28.9
London	105	16.1	102	15.6
South	167	25.5	180	27.5

The statistical impact of the weighting has reduced the effective sample size for the total sample, as follows, and this has been taken into account in significance testing conducted:

- Wave 1 (2009) 248
- Wave 2 (2010) 372
- Wave 3 (2012) 265
- Wave 4 (2015) 330.

#### 2.6 Notes on reading this report

The following points explain the way in which the results have been commented upon in this report.

- We refer to "all NHS staff" in this report, for brevity. However, it should be noted that this
  report does not take into account the views of every NHS staff group, only those listed in
  Table 1.
- All of the differences which have been commented upon within this report are statistically significant. The significance tests which have been used are two-tailed Z tests and are based on a 95% confidence level. This means that we are 95% certain that the difference in the survey findings is due to a real difference in the population. Different significance tests were used depending on whether comparisons were being made between two independent samples or between a sub-sample and the total.



- In order to conduct this significance testing, we have referred to the effective sample sizes for each group. However, because the greatest impact on the effective sample size arises when weighting by staff occupation, base sizes for individual staff groups show the unweighted base. This is because the weighting mainly affects the total staff sample and not samples within each occupation. Significant differences are marked on charts in the following way. ↑ denotes a significant increase wave on wave to the relevant answer, and ↓ denotes a significant decline wave on wave
- Sub-groups which have an effective sample size below 30 are too small for statistical significance testing to be carried out and so no comments on these groups are made in this report.
- Throughout this report '\*' indicates a proportion of less than 0.5% but greater than 0. '-' indicates a 0 proportion.

Sections 3 to 7 of this report deal solely with the findings from the staff survey. Section 8 summarises the research methods and findings from the general public survey.

All work carried out by GfK NOP is in accordance with the ISO 9001: 2008 Quality Assurance Standard and ISO 20252: 2006 Market, opinion and social research standard. GfK NOP is a member of the Market Research Society's (MRS) Company Partner Service.

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# 3 Awareness of the NHS Constitution

Findings related to awareness of the Constitution amongst NHS staff are included in this chapter of the report. In reading this chapter, it should be noted that the main centrally run communication activity to raise awareness of the NHS Constitution ran in 2009 and 2010, and any further activity would have been run on a local basis.

#### 3.1 Summary

Levels of awareness of the NHS Constitution after prompting with the name have nearly doubled since 2009 (59% 2015 compared with 31% 2009), while there has also been an upward trend in levels of total awareness (69% 2015 compared with 47% 2009). Since the baseline measure in 2009, there have been significant increases in levels of total awareness amongst managers (89% 2015 compared with 69% 2009), practice nurses (59% 2015 compared with 36% 2009), hospital nurses (71% 2015 compared with 36% 2009), hospital doctors (72% 2015 compared with 57% 2009) and pharmacists (72% in 2015 compared with 51% in 2009). (Chart 2)

There have been increases in levels of total awareness since 2012 amongst staff in some occupations which lagged behind for the first few years: there have been significant increases in levels of awareness amongst administrative staff (34% in 2012 to 62% in 2015) and hospital nurses (58% in 2012 to 71% in 2015). (Chart 2)

The main sources of awareness of the NHS Constitution in 2015 were emails/email bulletins (7%), induction/training/Health Education England (7%), national or mainstream press/media (6%), team meetings (6%) and meetings/events/roadshows (6%). The importance of national/mainstream press/media and radio/television as sources of information about the NHS Constitution declined significantly between 2012 and 2015. (Chart 3)

Occupation influenced where NHS staff had heard about the NHS Constitution, for example, GPs, practice nurses and hospital doctors were more likely than the NHS staff average to have heard about it from the medical press (11%, 8% and 10% compared with 5% NHS staff average), whilst managers were more likely than the NHS staff average to have heard about it from email bulletins (20% compared with 7% NHS staff average) and team meetings (14% compared with 6% NHS staff average).

Three-fifths (58%) of NHS staff said that they had come across the NHS Constitution, significantly higher than in 2012 (39%). The most likely ways to have come across the NHS Constitution were by reading a summary (40%, up from 21% in 2012) or reading about it in an article/journal (34%). One in five (21%) reported that it was discussed/mentioned in a staff meeting. (Chart 4)

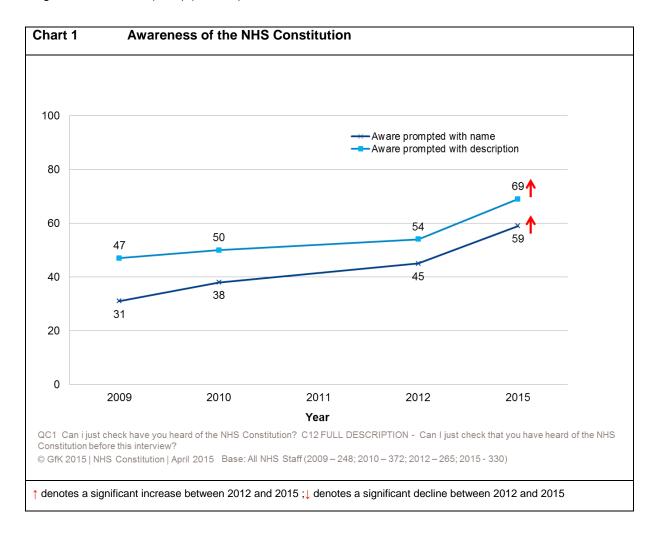
A third (31%) of NHS staff said that they had used the NHS Constitution in the past 12 months – significantly higher than in 2012 (21%). The ways in which it had been used the most were in a discussion with other staff (24%, up from 17% in 2012) or to inform a decision (20%, up from 11% in 2012). (Chart 6)



#### 3.2 Awareness of the NHS Constitution

As in previous years NHS staff were asked "Can I just check, have you heard of the NHS Constitution?" The NHS staff who had not heard of it were then read a description<sup>3</sup> and asked "Can I just check, had you heard of the NHS Constitution before this interview?"

In 2015, three-fifths (59%) of NHS staff had heard of the NHS Constitution after prompting with the name only. This was a significantly higher proportion compared with 2012 when 45% were aware of it. Further prompting with a description of the NHS Constitution increased the total level of awareness of the NHS Constitution to around seven in ten staff (69%): this is also significantly higher than in 2012 (54%) (Chart 1).



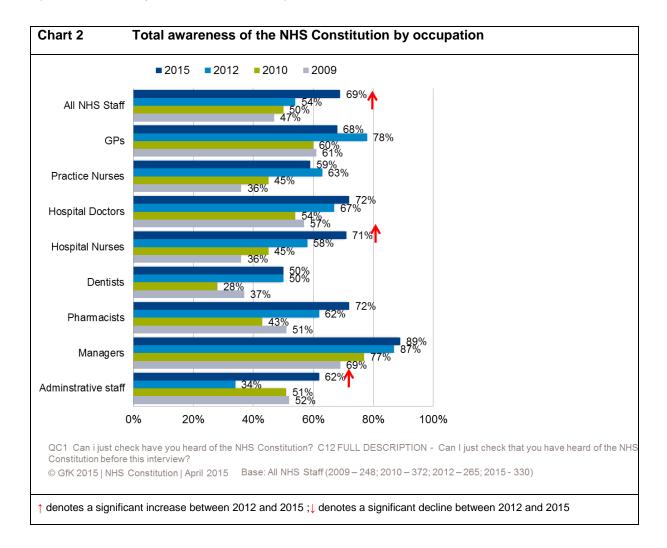
At all waves of the research, managers have been the most likely to be aware of the Constitution by name. Among managers, recognition of the NHS Constitution name in 2015 was very similar to the 2012 level at 84% (87% in 2012) (Chart 2). Levels of total awareness (after prompting with the description) were also very similar to 2012 levels among managers (89% 2015 compared with 87% 2012 and 69% 2009).

<sup>&</sup>lt;sup>3</sup> The description provided about the NHS Constitution was "In 2009, for the first time in the history of the NHS, an NHS Constitution was created. This document reflects what matters to staff, patients and the public. It sets out what staff and patients can expect from the NHS. It also describes the responsibilities which the public, patients and staff have towards each other to ensure that the NHS operates fairly and effectively".



The significant increases in levels of awareness of the NHS Constitution (both by name and after description) between 2012 and 2015 were largely driven by significant increases in awareness among administrators, who represent a large proportion of the total workforce. Administrators' recognition of the Constitution by name has risen from 30% in 2012 to 56% in 2015, and their total awareness has risen from 34% in 2012 to 62% in 2015. This corrected the decline previously seen between 2010 and 2012. Total awareness among hospital nurses, who also represent a large proportion of the total workforce, has continued to rise, going from 58% in 2012 to 71% in 2015.

Looking at changes since the first wave of this research in 2009, within the overall rise in total awareness from 47% to 69% there have been significant increases in awareness for most of the occupation groups included – the exceptions are GPs, dentists and administrative staff. There have been significant increases in levels of total awareness amongst managers (89% 2015 compared with 69% 2009), practice nurses (59% 2015 compared with 36% 2009), hospital nurses (71% 2015 compared with 36% 2009), hospital doctors (72% 2015 compared with 57% 2009) and pharmacists (72% in 2015 compared with 51% in 2009).

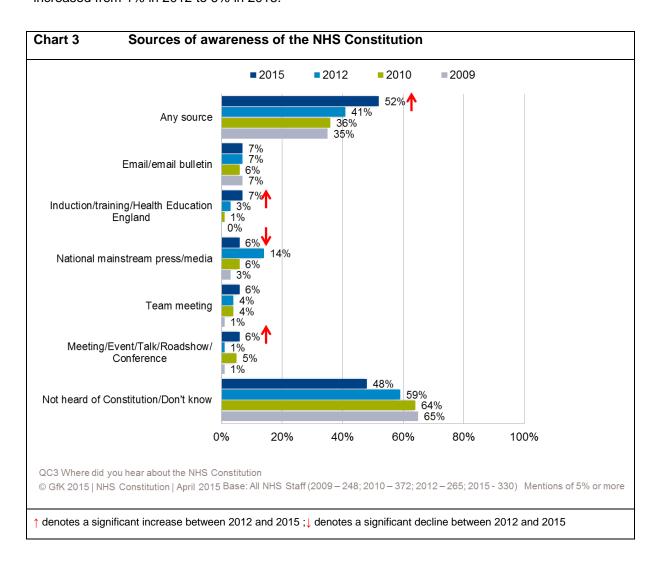


#### 3.3 Where staff had heard about the NHS Constitution

All NHS staff members who were aware of the NHS Constitution after they were prompted with the name were asked to say, without prompting, where they had heard about it. The responses to this question were re-percentaged on all survey respondents to provide an overall figure for the groups included in the survey.



The most commonly mentioned sources of awareness of the Constitution in 2015 were emails or email bulletins (7%); induction/training/Health Education England (7%); national or mainstream press or media (6%); team meetings (6%); meetings/events/talks/roadshows/conferences (6%); health and medical press or media (5%); colleagues (5%); websites other than NHS Direct/NHS Choices/NHS England/DH (5%). Since 2012, mentions of the press or media have declined significantly, both national/mainstream press or media (from 14% to 6%) and health/medical press or media (down from 10% to 5%), while mentions of radio/television have declined from 10% to 1% in 2015. These latter findings are unsurprising, given that there has been little national or mainstream press coverage since the Constitution's launch. Sources of information which have risen in importance over this period include induction or training which has risen significantly from 3% in 2012 to 7% in 2015 – possibly because of the role of Health Education England, which has been added to this answer category - and meetings/events/talks/roadshows/conferences which have increased from 1% in 2012 to 6% in 2015.



At all waves, managers were more likely than the NHS staff average to have found out about the NHS Constitution from the following sources (2015 data shown):

- Emails/bulletins (20% compared with 7% on average)
- Other websites (16% compared with 5% on average)
- Team meetings (14% compared with 6% on average)



- Colleagues (14% compared with 5% on average).
- Meeting/event/roadshow (10% compared with 6% on average).

GPs, practice nurses and hospital doctors were more likely to have heard about the NHS Constitution through the health/medical press/media compared with the NHS staff average (11%, 8% and 10% respectively compared with 5% NHS staff average). Data shown are from 2015, but similar patterns were observed in previous years.

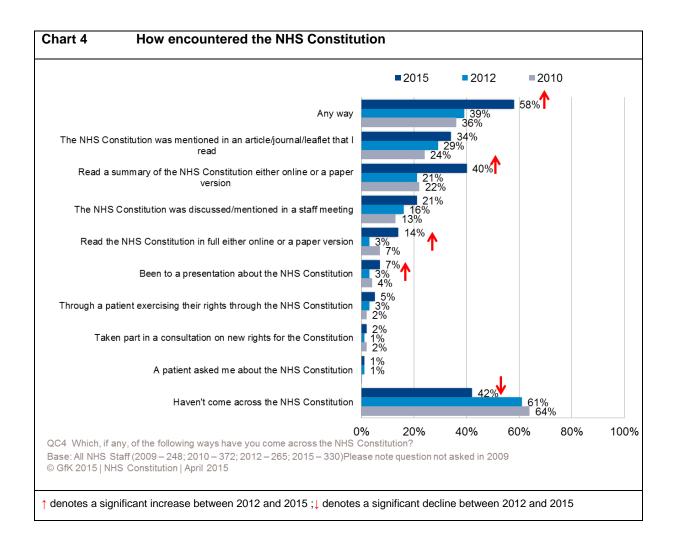
#### 3.4 How staff encountered the NHS Constitution

To further understand whether staff have come into contact with the NHS Constitution, all who were aware of the NHS Constitution after prompting with the name were read a number of ways in which they could have come into contact with it and asked which applied to them (Chart 4). Data are presented based on all staff to give an indication of the penetration of contact with the Constitution.

Around three-fifths (58%) said they had come across the Constitution in some way, and the contacts most commonly mentioned in 2015 were reading a summary of the Constitution either online or in a paper version (mentioned by around twice as many staff in 2015 compared with 2012, at 40%) and the Constitution being mentioned in an article/leaflet/journal they had read (34%). About one fifth said the Constitution had been mentioned in a staff meeting (21%). Compared with 2012, the proportion of staff saying they had read the Constitution in full has increased significantly (14% in 2015 compared with 3% in 2012), as has the proportion saying they have been to a presentation about the Constitution (7% in 2015 compared with 3% in 2012).

As in previous years, fewer staff had come across the Constitution in a more active manner: 5% had experience of a patient exercising their rights through the Constitution and 2% had taken part in a consultation related to the Constitution.





Managers were again the most likely staff group to have come across the NHS Constitution in some way at 83%. The overall increase in the proportion of staff saying they had encountered the NHS in some way was largely driven by significant increases among staff who reported particularly low levels of contact in 2012:

- Administrative staff (55% in 2015 compared with 22% in 2012)
- Hospital Nurses (56% 2015 compared with 41% 2012).

In 2015, for the first time staff were asked if they had come across the Constitution through their organisation having its own set of values which links to the Constitution: 41% of all staff said this was the case. However all the staff who said this was the case also said that they had encountered the Constitution in another way.

Managers (64%) were significantly more likely than other NHS staff to say their organisation had its own set of values which links to the Constitution, while practice nurses (20%) and dentists (15%) were less likely than other NHS staff to say this. The differences between staff working in hospitals, practices and other settings were not significant.



	g that they had encountered the NHS Constitution through n having its own set of values that links to the Constitution				
	ective base size				
All NHS staff	330 %	41			
Occupation					
GPs	53 %	42			
Practice nurses	107 %	20			
Hospital doctors	69 %	42			
Hospital nurses	119 %	39			
Dentists	58 %	15↓			
Pharmacists	61 %	49			
Managers	121 %	64↑			
Administrative staff	66 %	41			
Work setting					
Hospital	243 %	43			
Practice	63 %	32			
Other	84 %	34			

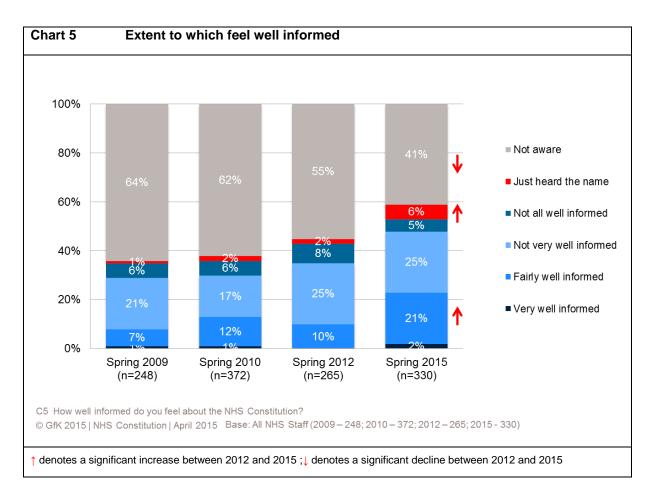
#### 3.5 How well informed NHS staff feel about the NHS Constitution

All staff members who were aware of the NHS Constitution by name were asked how well informed they felt about the NHS Constitution. These questions were only asked of those who were aware of the NHS Constitution after prompting with the name, to gain a true picture of how well informed staff felt. Data are presented re-percentaged on all NHS staff to give an indication of how well informed the workforce as a whole, within our specific occupation groups, felt about the Constitution.

In 2015 one in four NHS staff (23%) said they felt very or fairly well informed about the NHS Constitution, with two per cent reporting they felt very well informed. The proportions feeling well informed have increased significantly since 2012, when 10% of staff felt well informed about the Constitution. Occupation groups which have seen significant increases in the proportions feeling well informed include managers (up from 36% in 2012 to 50% in 2015), administrative staff (up from 8% in 2012 to 28% in 2015), hospital doctors (up from 11% in 2012 to 23% in 2015) and hospital nurses (up from 9% in 2012 to 19% in 2015). Looking at the longer trend since 2009, the same occupation groups have seen significant increases in the proportions feeling well informed over this period.

As at all previous waves managers were more likely than the NHS staff average to say they felt very or fairly well informed (50% compared with 23% on average in 2015).



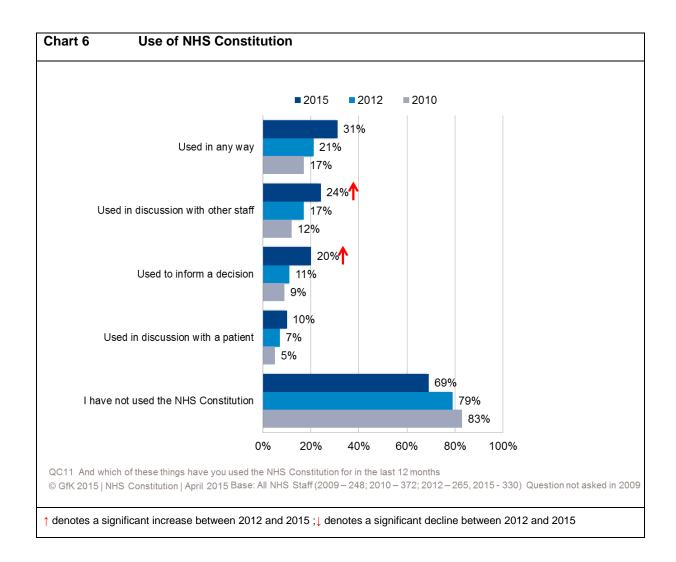


#### 3.6 Use of the NHS Constitution

Staff who were aware of the NHS Constitution by name were shown a list of situations where the NHS Constitution could have been used and asked which, if any, they had used it for in the last 12 months (Chart 6). Again, the findings have been re-percentaged to provide overall workforce data for the occupation groups included in the survey. Please note that this question was not asked in the 2009 survey.

About one third (31%) of NHS staff said they had used the NHS Constitution in any way in the previous 12 months in the 2015 study, a significant increase on 2012 when 21% said they had used it in any way. The main ways in which the NHS Constitution had been used were in discussion with other staff (24%) or to inform a decision (20%), and both of these figures also represent significant increases since the 2012 survey. One in ten (10%) of staff had used the Constitution in discussion with a patient.





Managers were the most likely to have used the Constitution in some way (55% compared with the NHS staff average of 31%) and specifically they were more likely than other staff to report having used it in discussion with other staff (43% compared with 24%) and to report having used it to inform a decision (38% compared with 20%). This pattern was also evident in previous years.



# 4 Awareness of the key elements of the NHS Constitution

As well as looking at awareness of the NHS Constitution, the research also aimed to understand what staff knew about its aims.

# 4.1 Summary

Overall levels of unprompted awareness of the main aims of the NHS Constitution (i.e. the ability to cite one or more main aims in response to an open question without any prompting) have further increased in 2015 after a significant increase in 2010 (43% 2015, 29% 2012, 26% 2010 compared with 19% 2009) (Chart 7). Levels of prompted awareness of the main elements have increased significantly since 2012 for all elements with the exception of the Responsibilities (re-worded in 2015). They have also increased significantly since the baseline measure in 2009 (Chart 8).

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 9).

Levels of awareness of most of the key messages about the Constitution have also increased significantly since 2012 – the only one which has not increased in awareness is that it can only be changed by politicians after consultation (Chart 9).

#### 4.2 Understanding of the main aims of the NHS Constitution

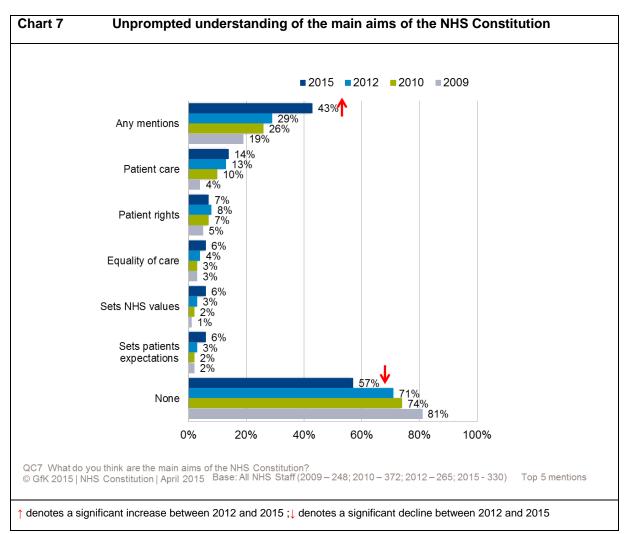
All staff members aware of the NHS Constitution by name were asked to say without prompting what they thought the main aims of the NHS Constitution were. The figures have been re-percentaged to provide an overall workforce figure for the occupation groups included in the survey.

Around four in ten (43%) of all staff were able to give a description of the aims of the Constitution, with the most common mentions related to patient care and patient rights. This represents a further significant increase in the proportion of NHS staff able to give a description of the aims of the Constitution, up from 29% in 2012).

The main aims mentioned in 2015 are similar to those mentioned in 2012: patient care (14%) remains the aim most widely mentioned, followed by patient rights (7%), equality of care (6%). More strategic elements such as that the Constitution sets out the NHS values (6%) or sets patient expectations (6%) are mentioned by similar numbers.

There have been increases in the proportions mentioning quality/quality of service (up from 1% in 2012 to 5% in 2015), providing patient-centred service (up from 1% in 2012 to 4% in 2015) and mentions of privacy and dignity (up from less than half of one per cent in 2012 to 4% in 2015).





#### 4.3 Prompted awareness of the NHS Constitution's aims

In order to assess levels of awareness of the main elements of the Constitution, staff members aware of the NHS Constitution by name were read a description of each of the seven elements and asked whether they had heard of it. The descriptions read to staff were:

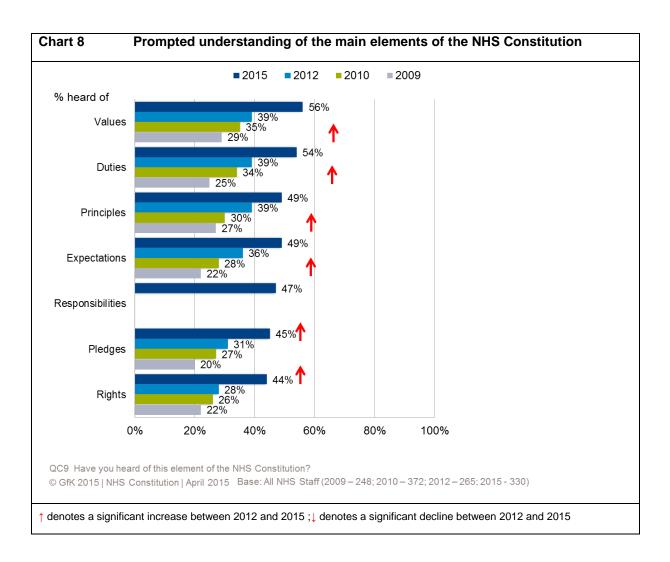
- The Principles are the guiding principles in all the NHS does, such as care being based on clinical need and not the ability to pay
- The Values inspire and guide staff behaviour, for example treating people with respect and dignity, and making sure no one is excluded
- The Pledges describe the NHS commitment to provide things above and beyond staff's legal rights, for example to provide all staff with personal development and training
- The Rights are patients' and staff's legal rights
- The Expectations describe what staff are expected to do to ensure the success of the NHS, such as attending training, or involving patients in their care
- The Duties describe the legal duties which staff must undertake, for example protecting patient confidentiality
- The Responsibilities describe how patients and the public can help the NHS work effectively, for example taking responsibility for their own health and their family's health and wellbeing.



The first six of these definitions were identical to those used in 2012; the definition of the Responsibilities has changed slightly since the last report and therefore no trends are shown for this item.

In 2015, just over half of NHS staff had heard of the Values (56%) and the Duties (54%). Around half had heard of the Principles (49%), the Expectations (49%) and the Responsibilities (47%), while just under half had heard of the Pledges (45%) and the Rights (44%).

Chart 8 shows the levels of awareness of each of the elements, and changes over time: data is based on all staff to give an indication of the reach of each element. Excluding the Responsibilities, there has been a significant increase since 2012 in the proportion of staff aware of all elements. Similarly, there has been a significant increase in the proportion of staff aware of these elements since the baseline measure in 2009.



The increases in levels of awareness since 2012 have been driven by significant increases in awareness amongst administrative staff (all elements except the principles); managers (values, expectations, rights); hospital doctors (principles, pledges); pharmacists (values, expectations, pledges); and hospital nurses (rights). Charts giving further breakdowns can be found in Appendix D.



While only a quarter (23%) of NHS staff said that they felt well informed about the NHS Constitution, recognition of the elements of the Constitution among this "well informed" group was much higher than the average for NHS staff as a whole (Table 5). Levels of awareness of the key elements amongst this well informed group ranged from 89% to 100%.

Table 5. Prompted awareness of the main elements of the NHS Constitution by knowledge about it						
Element	All NHS staff	Aware of and felt well informed about the NHS Constitution				
Unweighted base	654	146				
Weighted base	654	152				
	%	%				
Values	56	100				
Duties	54	98				
Expectations	49	96				
Principles	49	91				
Responsibilities	47	91				
Pledges	45	94				
Rights	44	89				

<sup>\*</sup> bold denotes significantly higher than NHS staff average

# 4.4 Prompted awareness of key messages about NHS Constitution

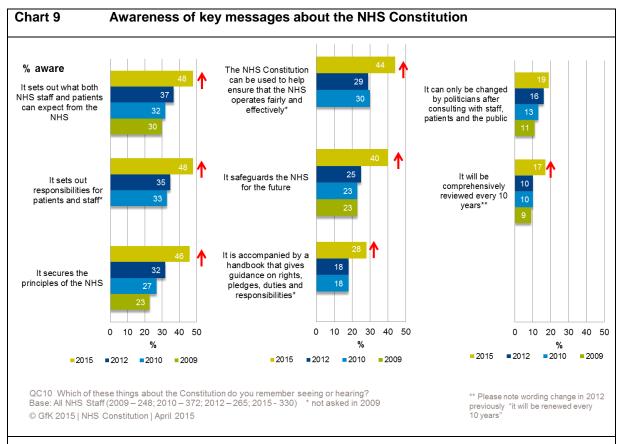
In addition to asking staff about their awareness of the main elements of the Constitution, the survey also aimed to find out whether staff had heard of a number of key messages about it. Those aware of the Constitution by name were read a number of messages and asked if they recalled seeing or hearing any of them. Data are shown based on all NHS staff, within our specified occupation groups, to give an indication of the reach of each message (Chart 9). Comparisons over time are shown where available.

Recognition of some of the key messages has reached nearly half of NHS staff in 2015. Nearly half of all staff (48% in 2015) were aware that the Constitution sets out what both NHS staff and patients can expect from the NHS, and the same proportion were aware that it sets out responsibilities for staff and patients. Over two-fifths recognised that the NHS Constitution secures the principles of the NHS (46%) and that the Constitution can be used to help ensure that the NHS operates fairly and effectively (44%). Two-fifths were aware of the message that it safeguards the NHS for the future (40%).

Levels of awareness were generally higher for messages relating to what the actual purpose of the NHS Constitution was, compared with points of detail. For example, around three in ten (28%) were aware that it is accompanied by a handbook that gives guidance on right, pledges, duties and responsibilities; one in five (19%) that it can only be changed by politicians after consulting with staff; around one in six (17%) that it will be comprehensively reviewed every 10 years.

Recognition of the most of these key messages has increased since 2012; the only exception is awareness of the fact that the Constitution can only be changed by politicians after consulting with staff, patients and the public.







# 5 Understanding the value of the NHS Constitution

#### 5.1 Summary

A large majority of NHS staff (81%) agreed that it is important that the NHS has a Constitution. A majority also agreed that the Constitution will continue to be of value in the future (57%) and that it will ensure that the fundamental principles of the NHS will remain intact through this period of change (57%). Half (50%) agreed that the NHS Constitution will make the NHS a better place to work (Chart 10).

Compared with 2012 NHS staff appear to have a more positive view of the importance of the Constitution and of the future of the NHS Constitution in 2015 as agreement with all of the positive messages about the Constitution increased significantly between 2012 and 2015 (Chart 10).

In 2015 just under half of NHS staff felt that the NHS Constitution has had a positive impact on patient experience – a significant decrease since 2010 (from 58% to 46%) (Chart 11). Since 2009, the proportions of hospital nurses, GP practice nurses and GPs saying the Constitution has had a positive impact on patients have all declined. The proportions saying it has had a negative impact have remained very low over time (2% in 2015) (Chart 12).

One third (34%) of NHS staff said that the NHS Constitution has had a positive impact on them: also a significant decline since 2012 (41%). However the proportion saying it has had a negative impact has also declined from 8% in 2012 to 3% in 2015, while the proportion saying it has had no impact has increased from 37% to 54% (Chart 13). Here too the perceptions of hospital nurses and GP practice nurses have become significantly less positive, since 2009, though their opinions have become more neutral rather than negative.

#### 5.2 Main messages

In order to understand whether NHS staff were aware of the Constitution's value, all staff were read a number of statements about the NHS Constitution and asked to what extent they agreed or disagreed with each one.

Chart 10 shows the proportion of NHS staff agreeing with each statement about the value of the Constitution. Please note that two new statements were added in 2010 and a further statement added in 2012 so comparison data are not always shown for all three waves.

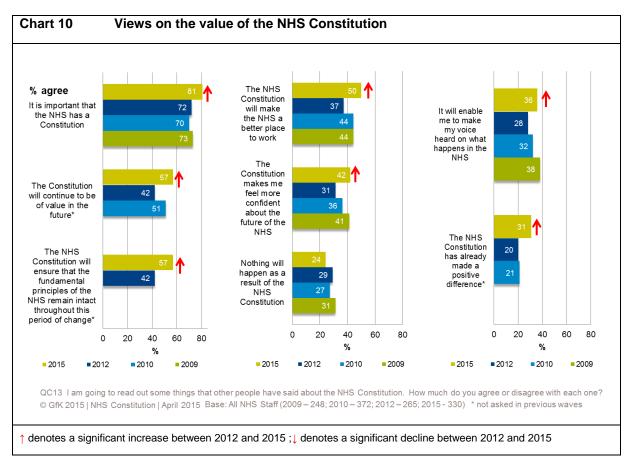
A large majority of NHS staff see the value in the concept of the NHS Constitution with four out of five (81%) in 2015 agreeing that it is important that the NHS has a Constitution.

Levels of agreement with other statements about the value of the Constitution were somewhat lower, though a three-fifths majority agreed that the Constitution will continue to be of value in the future (57%) and a similar proportion agreed that it will ensure that the fundamental principles of the NHS will remain intact through this period of change (57%). Half (50%) agreed that the NHS Constitution will make the NHS a better place to work while two-fifths (42%) agreed that the Constitution makes them feel more confident about the future of the NHS.

Only a quarter (24%) agreed with the negative message that *nothing will happen* as a result of the *NHS Constitution*.

Agreement with all of the positive messages increased significantly between 2012 and 2015, reversing the decreases seen between 2010 and 2012.





#### 5.3 Perceived impact of NHS Constitution on patients and NHS staff

All NHS staff were asked a series of questions to determine the value NHS staff place on the NHS Constitution, by looking at their perceptions of its impact on patients, and on staff.

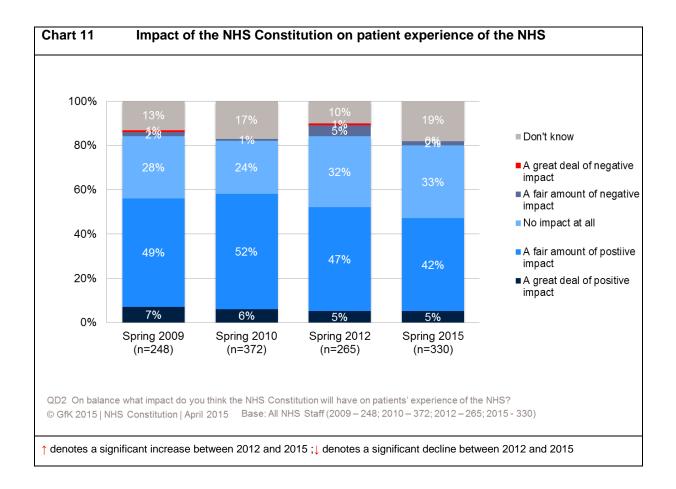
Previous tracking research (e.g. tracking of the communications supporting the 18 Weeks programme) indicated that staff more readily picked up on potential positive impacts of new initiatives on patients, with positive perceptions of impacts on staff and their jobs taking a longer time to build. In all previous waves of the NHS Constitution research, staff were more likely to perceive that there had been positive impacts on patients' experience of the NHS than positive impacts on themselves. This pattern is still evident in Wave 4.

#### 5.3.1 Impact of the NHS Constitution on patients

All staff were asked to rate on a five-point scale whether they thought that the NHS Constitution has had a positive or negative impact on patient experience of the NHS.

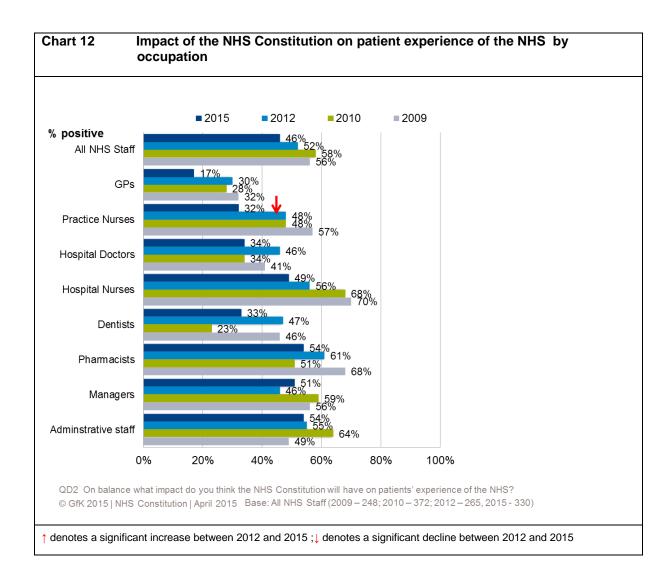
Just under half (46%) of NHS staff felt that the NHS Constitution has had a positive impact on patient experience of the NHS, with five per cent feeling it has had a great deal of positive impact. Only two per cent thought it has had a negative impact. There has been a significant decline since the high point in 2010 in the proportion who feel it has had a positive impact (from 58% in 2010 to 46% in 2015). The proportion saying that they don't know what the impact has been is somewhat unstable over time, but 2015 findings show a significant increase since 2012 (from 10% in 2012 to 19% in 2015).





Occupation was a factor in whether NHS staff felt that the NHS Constitution has had a positive impact on patient experience of the NHS (Chart 12). GPs, practice nurses and Hospital Nurses were all less likely to feel that the NHS Constitution had a positive impact on patient experience of the NHS in 2015 than they had been in 2009, and in fact practice nurses' perceptions of positive impact declined significantly between 2012 and 2015.





As in all previous waves, GPs were significantly less likely than the NHS staff average to think that the NHS Constitution has had a positive impact on patient experience of the NHS (17% compared with 46% NHS staff average in 2015).

The perceived impact that the NHS Constitution has on patient experience was much more positive amongst staff who were either aware of the NHS Constitution or felt well informed about it.

- Half (52%) of NHS staff who were aware of the NHS Constitution felt it has had a positive
  experience on patient experience of the NHS, compared with a third (34%) of those who
  were not aware of the NHS Constitution.
- Two-thirds (67%) of NHS staff who felt well informed about the NHS Constitution thought it
  has had a positive experience on patient experience of the NHS, compared with two-fifths
  (40%) of those did not feel well informed.

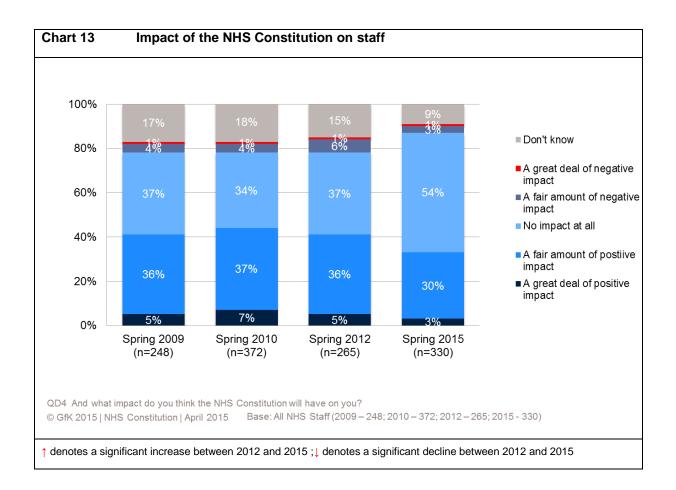
#### 5.3.2 Impact of the NHS Constitution on staff

As well as thinking about the impact of the NHS Constitution on patients, staff were also asked to consider whether the Constitution has had a positive or negative impact on them. As in previous



years, they tended to think that the Constitution has had a more positive impact on patients than on them.

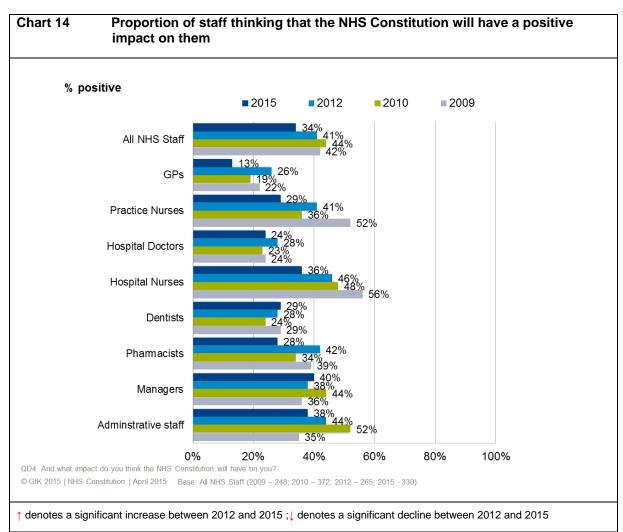
A third (34%) of NHS staff thought that the NHS Constitution has had a positive impact on them in 2015, whilst just over half (54%) thought that the NHS Constitution has had no impact. Only three per cent said that it has had a negative impact (Chart 13). Compared with 2012 and earlier waves, there have been declines in the proportion saying it has had a positive impact (down from 41% in 2012), but also a small decline since 2012 in the proportion saying it has had a negative impact (down from 8% in 2012), while the proportion saying no impact has increased from 37% to 54%.



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).

The two occupation groups where there is a fairly clear pattern of declining positive views over time are hospital nurses and GP practice nurses. 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. (Significant decreases in the proportions perceiving positive impact on them have not been recorded for the other occupation groups measured.)





Length of time in current role, gender and age did not influence whether NHS staff felt it 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 of the NHS Constitution and those who felt well informed (2015 data shown).

- Two-fifths (41%) of those who were aware of the NHS Constitution thought it has had a positive impact on them, compared with 18% of those not aware.
- Nearly three-fifths (58%) who were felt well informed thought it has had a positive impact on them, compared with a third (33%) of those did not feel well informed.

# 5.4 Reasons given for thinking that the NHS Constitution has had a positive or negative impact

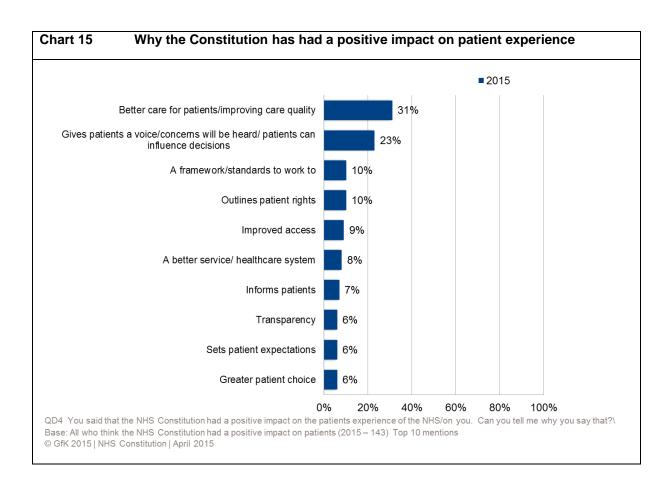
Two new questions were added to the questionnaire in 2012 to understand why NHS staff felt that the NHS Constitution has had a positive or negative impact on either patient experience of the NHS or on themselves; and what influence it had on their day-to-day work.

#### 5.4.1 Reasons for thinking it has had a positive impact

A broad range of reasons were given as to why the NHS Constitution had a positive impact on patient experience. The two reasons most commonly given were that it would lead to better care of patients/improve care quality (31% of those who thought it would have a positive impact on patients)

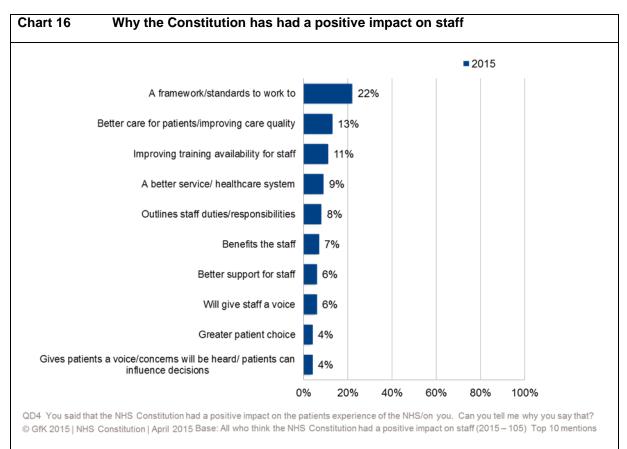


and that it would give patients a voice/enable their concerns to be heard (23% of this group). A large number of reasons were given by 10% or fewer of those who thought it would have a positive impact on patients; see Chart 15 for more details.



A broad range of reasons were also given for thinking that the NHS Constitution had had a positive impact on the staff themselves, with the commonest reason being that it provided a framework or standard (22%), while 13% mentioned better care of patients and 11% mentioned improving availability of training for staff. Chart 16 shows further details.



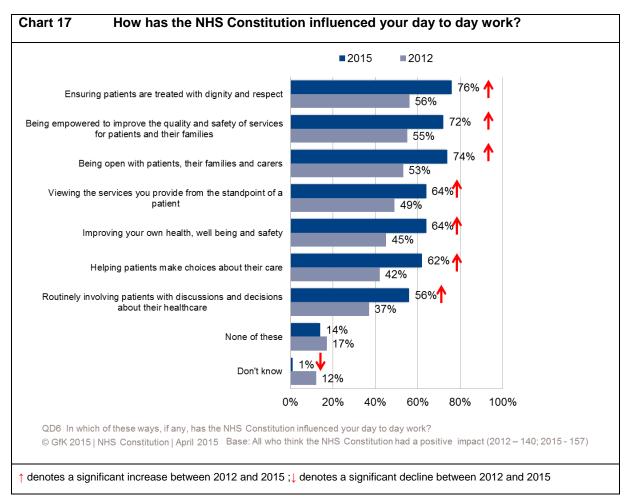


NHS staff who thought that the NHS Constitution had a positive impact on either patient experience of the NHS or on themselves were read a number of ways in which it could have influenced their day to day work and asked if any applied to them.

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 (Chart 17). 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%). Three-fifths (64%) felt it had helped them to improve their own health, well-being and safety.

Compared with 2012, all the possible effects read out at this question elicited significantly more positive responses.





There were few differences in responses given by staff in different occupations, though (as was also noted in 2012) 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, in particular 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).



#### 5.4.2 Reasons for thinking it has had a negative impact

Staff who felt that the NHS Constitution has had a negative impact on patient experience of the NHS or on them were asked why they thought this. Because very few staff thought that the impact would be negative, base sizes for these questions are very low (15 staff members thought that the impact on patient experience would be negative, and 27 thought that the impact on them would be negative), so responses are shown as weighted raw figures, rather than percentages.

In general, responses suggest that staff were answering in relation to their opinions about NHS reforms in general rather than making specific negative comments about the NHS Constitution.

When asked why the NHS Constitution had a negative impact on patient experiences, the main responses were that there was a lack of resources (mentioned by 3 staff members), it increased patients' expectations (3 staff members) or generally was not in the patients' interests (2 staff members). Other responses were given by 1 staff member each (it would lead to increased workload, it's too complicated, it affects the GP/patient relationship). Three staff members didn't know why they thought the impact would be negative.

When asked why the NHS Constitution has had a negative impact on them (the staff), the main responses related to increased bureaucracy (mentioned by 9 staff members), increased workload 6 staff members), increased patient expectations (4 staff members) and generally not being in the patients' interests (4 staff members). Other comments were made by only one or two staff members and included comments about lower income, that they did not enjoy their job, that the NHS has got worse recently and comments about the impact of the Constitution on the GP/patient relationship. Six staff members did not know why they thought the Constitution has had a negative impact on them.

Please note these findings come from very small groups of respondents and therefore they should not be over-interpreted.



# 6 Support for the NHS Constitution

As well as looking at awareness of the NHS Constitution and knowledge of the key messages etc, the research also aimed to understand whether staff supported the NHS Constitution.

### 6.1 Summary

Seven in ten NHS Staff (69%) said they supported the NHS Constitution in 2015, with an increase between 2012 and 2015 which has more than reversed the earlier decreases. Stated levels of opposition have also fallen slightly from 6% to 2% since 2012 (Chart 18). The increases in support came particularly from hospital nurses and administrative staff and may be linked to the fact that they were more likely to be aware of the NHS Constitution than they had been in previous years.

There has also been an increase in the proportion of staff saying they are likely to use the NHS Constitution in the future, rising from 61% in 2012 to 69% in 2015. However, around a quarter of staff (27%) say they are not likely to use it.

As at previous waves, staff who were aware of or felt well informed about the NHS Constitution were more likely than the NHS staff average to say they support it and would use the NHS Constitution in the future.

#### 6.2 Support for the NHS Constitution

All NHS staff were asked to rate on a five point scale the degree to which they support or oppose the NHS Constitution. Overwhelmingly, more staff support than oppose the Constitution: in 2015 seven in ten staff (69%) said they support the Constitution while only two per cent oppose it.

The significant decline in the proportion of NHS staff who said they support the Constitution between 2010 and 2012 has been reversed, and levels of support are now around the same as they were in 2009 (Chart 18). In particular the proportions saying they strongly support the NHS Constitution have risen from 18% in 2012 to 28% in 2015.



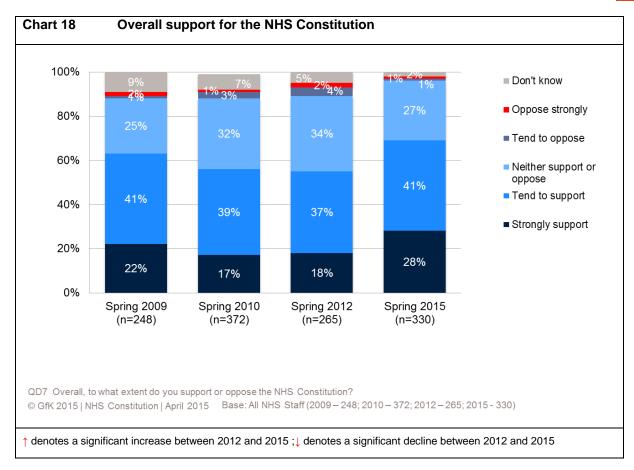
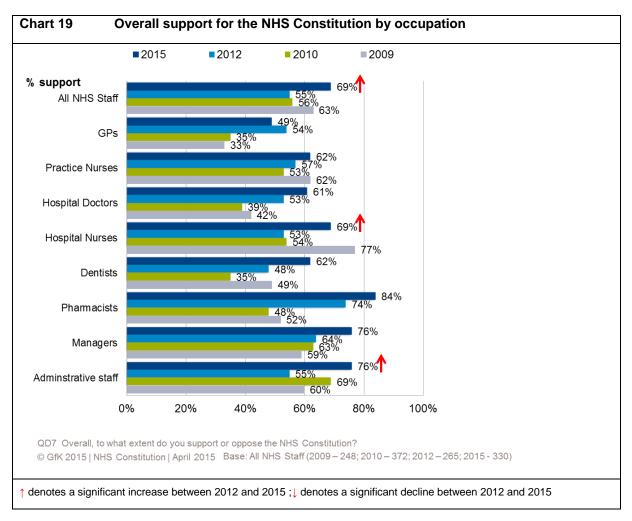


Chart 19 shows changes in levels of support over time amongst staff in different occupations. Levels of support for the NHS Constitution have increased significantly since 2012 among administrative staff and hospital nurses. The increased support amongst these groups may be linked to the fact that they were now more likely to be aware of the NHS Constitution than in previous years (Chart 2). Pharmacists (84%) and managers (76%) also stood out as being more likely than the NHS staff average to support the Constitution in 2015, while GPs were less likely than average to do so (49% in 2015, a slight decline from 54% in 2012).

Looking at the pattern of changes in support since 2009, although the headline figure for all staff has not changed significantly, there have been significant increases in support among administrative staff (up from 60% to 76%), managers (up from 59% to 76%), pharmacists (from 52% to 84%) and for hospital doctors (up from 42% to 61%).





As in previous waves of the survey and as noted earlier in this report, the links between awareness of the Constitution and feeling well informed about it and positive views of the Constitution were clear:

- 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
- Over nine in ten (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.

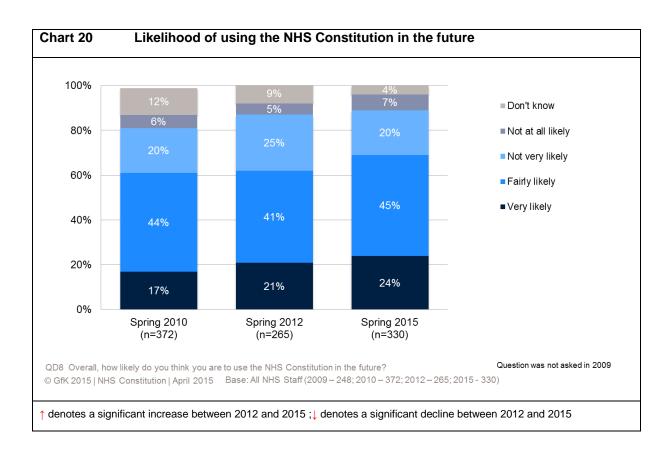
#### 6.3 Likelihood of using the NHS Constitution in the future

All NHS staff were asked how likely they were to use the NHS Constitution in the future. Seven out of ten (69%) NHS staff said that they were either fairly or very likely to use the NHS Constitution in the future, a slight increase since 2012 (61%). The only significant change by occupation group between 2012 and 2015 comes from administrative staff, 76% of whom said they were very/fairly likely to use it in 2015, compared with 55% in 2012.

GPs have been consistently less likely compared with NHS staff on average to say they will use the Constitution in the future, but their 2015 finding of 47% represents a significant increase from the 2010 level of 30%.



This question was first asked in 2010. Looking at how levels of stated likelihood of using the Constitution have changed for occupation groups since 2010, in addition to the increase for GPs mentioned above, there have also been increases for dentists (from 40% to 62%) and pharmacists (from 44% to 65%).



As was also found in the 2012 study, support for the NHS Constitution played a role in how likely they were to use it in the future. More than four-fifths (84%) of those who supported the NHS Constitution said they were likely to use it in the future compared with just 9% of those who opposed the NHS Constitution.

Again repeating the pattern seen in 2012, NHS staff who were aware of the NHS Constitution and those who felt well informed about the NHS Constitution tended to have a more positive view compared with those who were not aware or were not well informed.

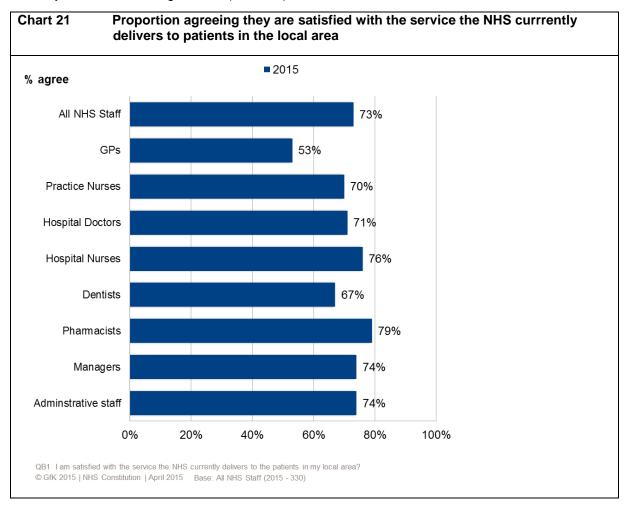
- Seven in ten (73%) who were aware of the NHS Constitution indicated they were likely to
  use the NHS Constitution in the future, compared with three-fifths (59%) of those who were
  not aware
- Nine in ten (86%) of those who felt well informed about the NHS Constitution said they were likely to use it in the future, compared with two thirds (63%) of those who did not feel well informed.



### 7 General Views on the NHS

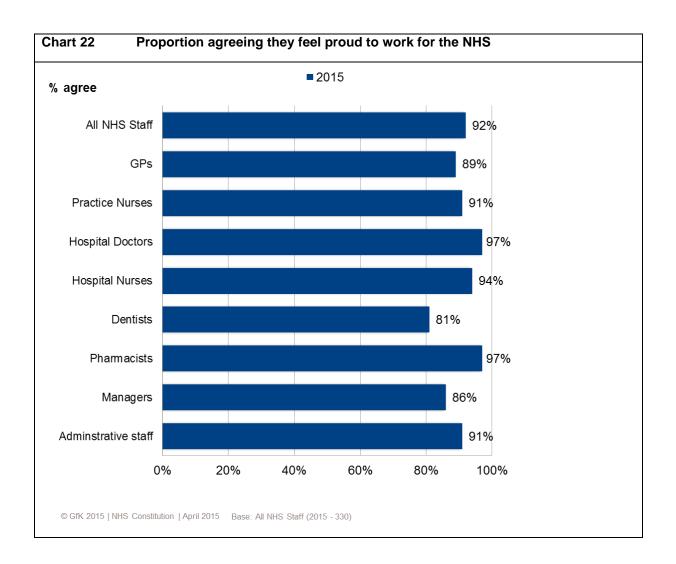
At the start of the interview, before introducing the Constitution, all staff were asked how much they agreed or disagreed with two statements about the NHS: I am proud to work for the NHS and I am satisfied with the service the NHS currently delivers to patients in my local area.

Nearly three-quarters (73%) of NHS staff agreed that they were satisfied with the service that the NHS currently delivers to the patients in their local area – this is not significantly different from the 2012 finding. GPs stood out as those least likely to agree (53%), while other occupation groups had broadly similar levels of agreement (Chart 21).



More than nine out of ten (92%) of NHS staff agreed that they are proud to work for the NHS, which is significantly higher than the level of agreement found in 2012 (86%). Repeating a pattern seen in 2012, dentists were the least likely to say that they were proud to work for the NHS (81% compared with 92% NHS average).





NHS staff who felt satisfied with the service the NHS delivers to patients in their local area were more likely to agree that they were proud to work for the NHS (97% v 73% of those not satisfied with local NHS services to patients).



# 8 General Public Survey

#### 8.1 Objectives & Method

The general public survey aimed to provide a further measure of public awareness of the Constitution. The 2009 survey was conducted soon after the publication of the NHS Next Stage Review's report, but there was little public-facing communications activity in the run up to any of the later surveys. The 2015 survey therefore aimed to provide a further measure of how general awareness of the NHS Constitution amongst the general public was changing over time.

#### 8.2 General Public Survey methodology

The general public survey was placed on GfK NOP's Random Location Omnibus (RLO) survey. Interviews were conducted face-to-face in respondents' homes using computer-assisted personal interviewing (CAPI). The sample was drawn using random location sampling and a representative sample of adults aged 16+ in England was interviewed.

The data were weighted to correct for any small differences between the interviewed sample and known population statistics to produce a representative sample of the target audience.

The same methodology has been used at all four waves of the survey, and the sample profiles have remained very stable across all four waves, allowing comparisons over time.

Table 6.	Weighted and unweighted pro	files	
Wave	Fieldwork Dates	Unweighted	Weighted
1	22 <sup>nd</sup> March – 27 <sup>th</sup> March 2009	1735	1751
2	11 <sup>th</sup> March – 16 <sup>th</sup> March 2010	1610	1645
3	15 <sup>th</sup> March – 20 <sup>th</sup> March 2012	1576	1566
4	12 <sup>th</sup> February – 23 <sup>rd</sup> February 2015	1726	1697

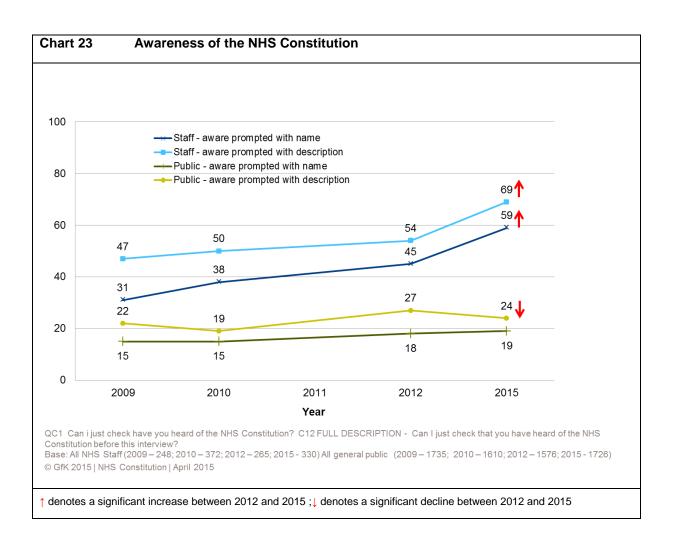
#### 8.3 Awareness of the NHS Constitution

Members of the public were asked if they had heard of the NHS Constitution, and those who did not recognize the name were read a description of the Constitution and asked if they had either heard of it or something like it.

The proportion of the public aware of the NHS Constitution after prompting with the name has not risen dramatically over the four waves of research but the slight increase since 2009/2010 is significant (19% in 2015, 18% in 2012 and 15% at both 2009 and 2010).



As in previous waves, claimed levels of awareness went up following prompting with a description of the Constitution<sup>4</sup>. However, in the 2015 study total awareness has declined from 2012 levels, dropping back to 24% in 2015 from 27% in 2012 (Chart 23), though it remains higher than the level of 19% recorded in 2010. Levels of awareness amongst staff are also shown in the chart to provide a comparison.



The public are consistently less likely than staff to be aware of the NHS Constitution, and indeed the gap has widened over time.

<sup>&</sup>lt;sup>4</sup> The description provided about the NHS Constitution was "In 2009, for the first time in the history of the NHS, an NHS Constitution was created. This document reflects what matters to staff, patients and the public. It sets out what staff and patients can expect from the NHS. It also describes the responsibilities which the public, patients and staff have towards each other to ensure that the NHS operates fairly and effectively".



#### 8.4 Sources of information about the NHS (unprompted)

As detailed questions about the NHS Constitution aims and values were unlikely to be relevant to the general public, instead, they were asked general questions to provide a baseline against which to track future use of the NHS Constitution as a source of information when needed.

All general public respondents were therefore 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
- what they can do if they do not get what they expect from the NHS.

Results are shown in Chart 24.

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:

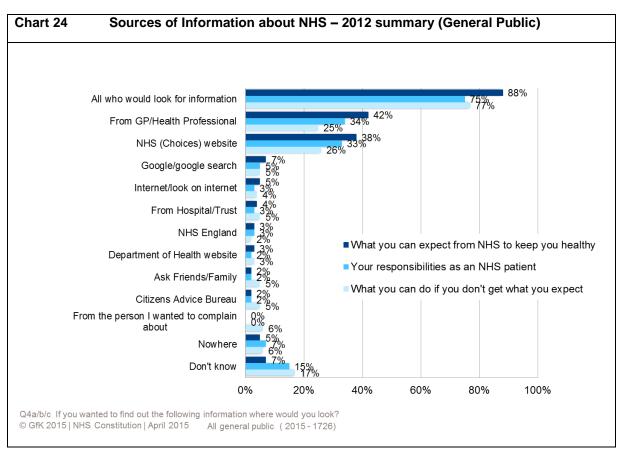
- what they can expect from the NHS to help keep them healthy and care for them when they are ill – 28 people (2% of the sample) mentioned the NHS Constitution
- what their responsibilities as an NHS patient are 22 people mentioned the NHS Constitution
- what they can do if they do not get what they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

Those who had used a hospital as an in-patient were slightly more likely than those who had had no contact with the NHS to mention the Constitution in relation to what they can expect from the NHS to help keep them healthy and care for them when they are ill (5% compared with 2%); several groups of users of secondary care were slightly more likely than those who had had no contact with the NHS to mention the Constitution in relation to what their responsibilities as an NHS patient are (e.g. 3% of users of A&E compared with less than half of one per cent of non-NHS users); but there was no significant difference between users and non-users of the NHS with regard to mentioning the NHS Constitution in relation to what they can do if they do not get what they expect from the NHS.

The remainder of this chapter gives further details on the sources of information that respondents said they would use, to provide background for future planning.

In 2015 around nine in ten (88%) of the public were able to spontaneously mention any places where they would look to find out more about what they can expect from the NHS to keep them healthy and care for them when they are ill. As in all previous waves, the most commonly mentioned sources of information were GPs or Health Professionals (42% in 2015), and the NHS (Choices) website (38% in 2015).





Around 75% of the public were able to spontaneously mention places where they would look to find out information about what their responsibilities as an NHS patient are. GPs/health professionals (34%) and the NHS (Choices) website (33%) were also most commonly mentioned as sources of information about responsibilities as a patient and what to do if you don't get what you expect from the NHS.

The proportion of the public mentioning the NHS (Choices) website as a source of information about responsibilities as a patient has also continued to increase (33% in 2015 compared with 29% in 2012 and 20% 2009) with a 10 point increase from 20% to 30% among 55-64 year olds.

Around three quarters (77%) of the public were able to spontaneously mention places where they would find out what you can do if you don't get what you expect from the NHS. GPs/health professionals and the NHS (Choices) website remained the most commonly given answers to this question in 2015 but the proportions of the public mentioning each of these was slightly down (GPs/health professionals from 28% to 25% in 2015 and NHS (Choices) website from 29% to 26% in 2015). There were slight increases in the proportions mentioning the person they wanted to complain about (up from 3% to 6%) and PALS or complaints manager (up from 1% to 5%).

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 health 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.



# **APPENDICES**



# 9 APPENDIX A – Staff Questionnaire



Master Questionnaire Template
NHS Constitution W4 Staff Survey
Project number 272.209.30186
Issue Control: v1.4 10/02/2015

#### I. SAMPLE VARIABLES

Name Job title

GPs
Specialty registrars
Senior hospital doctors
Specialist nurses
GP practice nurses
GP Practice managers
CCG managers
Secondary care managers
Dentists
NHS Pharmacists
Admin staff in secondary
care
Junior Hospital Doctors
F1/F2
General Ward Nurses
Admin staff in GP practices

#### III/IV. SCREENER/INTRODUCTION

Base: all GPs, Specialty Registrars, Senior hospital doctors, Specialist Nurses, GP practice nurses, GP Practice Managers, CCG Managers, Secondary Care Managers, Dentists, NHS

Pharmacists

S01 [S]

Please can I speak to {NAME}?

SHOW THE FOLLOWING DETAILS FROM SAMPLE:

JOB TITLE (ALL SAMPLE TYPES)

SPECIALISM (FOR SPECIALIST NURSES, SPECIALTY REGISTRARS AND SENIOR HOSPITAL DOCTORS)

There is only one answer possible

- 1. Yes CONTINUE TO I01
- 2. Named respondent temporarily unavailable GO TO SMS
- 3. Named respondent no longer works there GO TO S02
- 4. Refused GO TO SMS



#### Base: If named respondent no longer works there (S01=3)

#### S02 [S]

Please can I speak to the person who has now replaced them or who has taken over the work that they were previously doing?

There is only one answer possible

- 1. Yes CONTINUE TO I01
- 2. Replacement temporarily unavailable GO TO SMS
- 3. No direct replacement has been appointed GO TO S03
- 4. Refused GO TO SMS

#### Base: If no direct replacement has been appointed (S02=3)

#### S03 [S]

Please can I speak to someone who works in the same department, at the same level and specializes in a similar area?

SHOW THE FOLLOWING DETAILS FROM SAMPLE:

JOB TITLE (ALL SAMPLE TYPES)

SPECIALISM (FOR SPECIALIST NURSES, SPECIALTY REGISTRARS AND SENIOR HOSPITAL DOCTORS)

Use information you have from job title and specialism as appropriate. If you go to SMS record the name of the respondent if it is different from the original sample. There is only one answer possible

- 1. Yes CONTINUE TO I01
- 2. Alternatives temporarily unavailable GO TO SMS
- There are no alternatives for the named individual GO TO SMS
- 4. Refused GO TO SMS

#### Base: all F1/F2 Junior Doctors, General Ward Nurses

#### S04[S]

Please can you put me through to a general ward? Hello, I would like to speak to a [ward nurse IF WARD NURSE SAMPLE]/[junior doctor for example a house officer or senior house officer now known as foundation level 2 and foundation level 2 IF F1/F2 JUNIOR DOCTOR SAMPLE]. ADD IF NECESSARY: is there a [ward nurse IF WARD NURSE SAMPLE]/[junior doctor IF F1/F2 JUNIOR DOCTOR SAMPLE] available at the moment who I could speak to?

There is only one answer possible

- 1. Yes CONTINUE TO I01
- 2. No GO TO SMS
- 3. DK GO TO SMS

#### Base: all Admin staff in secondary care

#### S05[S]

Please can I speak with a member of administration staff, perhaps a medical secretary, someone who works in medical records or the human resources department?

Ask to be transferred where necessary. There is only one answer possible.

- 1. Yes CONTINUE TO I01
- 2. No GO TO SMS
- 3. DK GO TO SMS



#### Base: all admin staff in GP practice

#### S06[S]

Please can I speak with a secretary, a receptionist or a member of the administration staff? Ask to be transferred where necessary. Is there anyone available who I can speak to? There is only one answer possible

- 1. Yes CONTINUE TO I01
- 2. No GO TO SMS
- 3. DK GO TO SMS

#### Base: All

There is only one answer possible

- 1. Yes CONTINUE TO S07 OR S08
- 2. No GO TO SMS
- 3. Make an appointment/Call back later GO TO SMS
- 4. I am not currently working for the NHS SCREENOUT THANK AND CLOSE
- 5. More reassurance needed GO TO I02

#### Base: if I01=CODE 5

#### 102[S

I have a letter from the Department of Health which I can send to you explaining the importance of the survey and what it will cover. I can email this to you now and arrange a time to call you back. There is only one answer possible

- 1. Yes COLLECT CONTACT DETAILS AND EMAIL LETTER; ARRANGE CALL BACK
- 2. No, continue with survey CONTINUE TO S07 OR S08
- 3. No, refusal GO TO SMS

Base: all General Ward Nurses, F1/F2 Junior Doctors, admin staff in secondary care, admin staff in GP practice

#### S07[S]

Please can I just check that you have not taken part in this survey before? There is only one answer possible

- 1. Not taken part before- CONTINUE TO S08
- 2. Taken part before GO TO SMS



### Base: if s01=1, s02=1, s03=1, or if general ward nurses & s07=1, or if F1/F2 junior doctors & s07=1

#### S08[S]

Please can I just check that you are working as [INSERT TEXT FROM TABLE BELOW BASED ON JOB TITLE]?

Job title	TEXT
GPs	A GP
Specialty registrars	A doctor in a hospital graded below consultant level as a Specialty registrar
Senior hospital doctors	A doctor in a hospital graded as a Consultant or above
Specialist nurses	A specialist nurse in secondary care (a hospital nurse specialising in a certain area such as A&E or anaesthetics etc).
GP practice nurses	A practice nurse
GP Practice Managers	A practice manager
CCG managers	A manager within a Clinical Commissioning Group
Secondary care managers	A manager in a secondary care setting
Dentists	A dentist
NHS Pharmacists	A pharmacist
F1/F2 doctor	A doctor at Foundation level 1 or Foundation level 2
General Ward Nurse	A general ward nurse

#### There is only one answer possible

- 1. Yes CONTINUE TO S10 for GPs, S11 FOR OTHERS
- 2. No ASK TO SPEAK TO SOMEONE ELSE WHO IS IN SPECIFIED ROLE
- 3. DK ASK TO SPEAK TO SOMEONE ELSE WHO IS IN SPECIFIED ROLE
- 4. Refuse THANK AND CLOSE

#### Base: all admin staff in secondary care, admin staff in GP practice

#### S09[S]

Please can I just check that you are working in an administrative role? There is only one answer possible

1. Yes PROMPT FOR JOB TITLE AND GO TO S11

Medical Secretary Medical Records Recruitment Human Resources Other

- 2. No ASK TO SPEAK TO SOMEONE ELSE WHO IS IN SPECIFIED ROLE
- 3. DK ASK TO SPEAK TO SOMEONE ELSE WHO IS IN SPECIFIED ROLE
- 4. Refuse THANK AND CLOSE



#### Base: all GPs

#### S10[S]

How long ago did you qualify as a GP?

Read out as necessary. Interviewer: if respondent doesn't know ask for approximation. There is only one answer possible

- 1. Less than 2 years ago
- 2. 2 years but less than 5 years ago
- 3. 5 years but less than 10 years ago
- 4. 10 years but less than 20 years ago
- 5. 20 years but less than 30 years ago
- 6. 30 years ago or more
- 7. (Don't know)

Quota for GPs based on length of time since qualification S10

S10=1,2,3 (less than 10 years): N=50 S10=4,5,6,7 (10 years or more or dk) N=50

#### Base: all

#### S11[S]

Can I just check do you work directly for the NHS or are you employed through a contractor to work in the NHS?

There is only one answer possible

- 1. Directly for NHS GO TO B01
- 2. Employed through contractor GO TO B01
- 3. I do not work in the NHS either directly employed or through a contractor THANK AND CLOSE
- 4. Don't know THANK AND CLOSE

#### V. MAIN QUESTIONNAIRE

### B STAFF SATISFACTION AND ADVOCACY

#### Base: all respondents

#### B01 [S]

I'd like to start by asking you a bit about the NHS in your area. To what extent do you agree or disagree with these things that other people have said?

- a) I am proud to work for the NHS
- b) I am satisfied with the service the NHS currently delivers to patients in my local area

There is only one answer possible.

- 1. Agree strongly
- 2. Tend to agree
- 3. Neither agree nor disagree
- 4. Tend to disagree
- 5. Disagree strongly
- 6. (don't know)



#### C AWARENESS AND UNDERSTANDING OF THE NHS CONSTITUTION

#### Base: all respondents

C02 [S]

The next section of the questionnaire asks you about key events in the NHS. Can I just check, have you heard of the NHS Constitution?

There is only one answer possible.

- 1. Yes
- 2. No
- 3. (don't know)

#### Base: those who have heard of Constitution (C02=1). (Others go to C12 READ OUT)

C03 [M]

Where did you hear about the NHS Constitution?

Do not prompt. Code all that apply

You can choose more than one answer

- 1. From patients
- 2. Manager
- 3. Colleague
- 4. Team meeting
- 5. David Nicholson/Bruce Keogh/Simon Stevens/member of the NHS leadership team
- 6. Meeting/event/talk/roadshow/conference
- 7. Induction/training/Health Education England
- 8. Word of mouth/on the grapevine
- 9. Royal College/Professional body/BMA
- 10. Charity/voluntary sector organisation
- 11. Healthwatch
- 12. Involvement in committees
- 13. Clinical network
- 14. Health/medical press/media
- 15. National/mainstream press media
- 16. Heard about it on radio/television
- 17. Life Channel/TV channel in GP surgeries
- 18. DH Website/DH pages on .gov.uk website
- 19. NHS Direct Website
- 20. NHS Choices Website
- 21. NHS England website
- 22. Doctors.net
- 23. Social media (e.g. Facebook, MySpace, Twitter)
- 24. Other website (PLEASE SPECIFY) [O]
- 25. Emails/email bulletins
- 26. Leaflet/booklet 'Staff guide to the NHS Constitution'
- 27. Leaflet/booklet 'PCT Guide to Local NHS Services'
- 28. Handbook to the NHS Constitution
- 29. Local values or Constitution for my Trust/Practice/Area
- 30. Other leaflet/booklet
- 31. Poster
- 32. Video
- 33. Noticeboard
- 34. A consultation
- 35. Other (PLEASE SPECIFY) [O]
- 36. Don't know

#### Base: those who have heard of Constitution (C02=1)



Which, if any, of the following ways have you come across the NHS Constitution?

Read out and code all that apply. You can choose more than one answer

- 1. Read the NHS Constitution in full either online or a paper version
- 2. Read a summary of the NHS Constitution either online or a paper version
- 3. Been to a presentation about the NHS Constitution
- 4. The NHS Constitution was mentioned in an article/journal/ leaflet that I read
- 5. The NHS Constitution was discussed/ mentioned in a staff meeting
- 6. A patient asked me questions about the NHS Constitution
- 7. Through a patient exercising their rights through the NHS Constitution
- 8. Taken part in the consultation on new rights for the Constitution
- 9. My organization has its own set of values, which links to the Constitution
- 10. Other (specify) [O]
- 11. None of these
- 12. Don't know

#### Base: those who have heard of Constitution (code 1 at C02)

C05 [S]

How well informed do you feel about the NHS Constitution?

Read out. There is only one answer possible.

- 1. Very well informed
- 2. Fairly well informed
- 3. Not very well informed
- 4. Not at all well informed
- 5. (Have just heard the name)
- 6. Don't know

#### Base: those who have heard of Constitution (code 1 at C02)

C07 [O]

I now want to ask you what you know about the NHS Constitution. What do you think are the main aims of the NHS Constitution? *Probe*: What other aims can you think of?

Probe fully, do not prompt.

(Open ended for later coding) Don't know



#### Base: those who have heard of Constitution (code 1 at C02)

C09 [S]

I am going to read out some of the elements of the Constitution. Can you tell me for each if you have heard of it.

Have you heard of this element of the Constitution?

#### ROTATE ORDER OF ASKING THESE ITEMS

- a) **The Principles** are the guiding principles in all the NHS does, such as care being based on clinical need and not ability to pay
- b) **The Values** inspire and guide staff behaviour, for example we will treat people with respect and dignity, and make sure no one is excluded
- c) **The Pledges** describe the NHS commitment to provide things above and beyond staff's and patients' legal rights, for example to provide all staff with personal development and training
- d) The Rights are staff and patients' legal rights
- e) **The Expectations** describe what staff are expected to do to ensure the success of the NHS, such as attending training, or involving patients in their care
- f) **The Duties** describe the legal duties which staff must undertake, for example protecting patient confidentiality
- g) **The Responsibilities** describe how patients and the public can help the NHS work effectively, for example taking responsibility for their own health and their family's health and wellbeing

Please re-read the question at the fourth iteration. There is only one answer

- 1. Yes
- 2. No
- 3. Don't know



#### Base: those who have heard of Constitution (C02=1).

#### C10 [S]

Which of these things about the Constitution do you remember seeing or hearing?

#### ROTATE ORDER OF ASKING THESE ITEMS

- a) It sets out what both NHS staff and patients can expect of the NHS
- b) It secures the principles of the NHS
- c) It safeguards the NHS for the future
- d) It will be comprehensively reviewed every 10 years
- e) It can only be changed by politicians after consulting with staff, patients and the public
- f) The NHS Constitution can be used by NHS staff, patients and the public to help ensure that the NHS operates fairly and effectively
- g) It sets out responsibilities for patients and staff
- h) It is accompanied by a handbook that gives guidance on rights, pledges, duties and responsibilities

Please re-read the question at the fourth iteration. There is only one answer

- 1. Yes
- 2. No
- 3. Don't know

#### Base: those who have heard of Constitution (C02=1).

#### C11 [M]

And which of these things have you used the NHS Constitution for in the last 12 months?

Read out and code all that apply. You can choose more than one answer

- 1. Used in discussion with a patient
- 2. Used in a discussion with other staff
- 3. Used it to inform a decision
- 4. Other (specify) [O]
- 5. I have not used the NHS Constitution
- 6. Don't know

#### Base: all respondents

#### C12 READ OUT ISI

In 2009, for the first time in the history of the NHS, an NHS Constitution was created. This document reflects what matters to staff, patients and the public. It sets out what staff and patients can expect from the NHS. It also describes the responsibilities which the public, patients and staff have towards each other to ensure that the NHS operates fairly and effectively. Read out and go to next screen

#### Base: those who have not heard of Constitution (C02=2). (Others go to D1)

#### C12 [S]

Can I just check, had you heard of the NHS Constitution before this interview? There is only one answer

- 1. Yes
- 2. No
- 3. Don't know



#### D SUPPORT FOR THE CONSTITUTION

#### Base: all respondents

#### D01 [S]

I am going to read out some things that other people have said about the NHS Constitution. How much do you agree or disagree with each one?

#### ROTATE ORDER OF ASKING THESE ITEMS

- a) The NHS Constitution has already made a positive difference
- b) It is important that the NHS has a Constitution (like this)
- c) The NHS Constitution makes me feel more confident about the future of the NHS
- d) Nothing will happen as a result of the NHS Constitution
- e) The NHS Constitution will make the NHS a better place to work
- f) It will enable me to make my voice heard on what happens in the NHS
- g) The NHS Constitution will continue to be of value in the future
- h) The NHS Constitution will ensure that the fundamental principles of the NHS remain intact through this period of change

There is only one answer possible.

- 1. Agree strongly
- 2. Tend to agree
- 3. Neither agree nor disagree
- 4. Tend to disagree
- 5. Disagree strongly
- 6. (don't know)

#### Base: all respondents

#### D02 [S]

On balance what impact do you think the NHS Constitution has had on patients' experience of the NHS?

Read out. There is only one answer possible.

- 1. A great deal of positive impact
- 2. A fair amount of positive impact
- 3. No impact at all
- 4. A fair amount of negative impact
- 5. A great deal of negative impact
- 6. (Don't know)

#### Base: all respondents

#### D03 [S]

And what impact do you think the NHS Constitution has had on you?

Read out. There is only one answer possible.

- 1. A great deal of positive impact
- 2. A fair amount of positive impact
- 3. No impact at all
- 4. A fair amount of negative impact
- 5. A great deal of negative impact
- 6. (Don't know)

#### Base: respondents who mentioned positive impact at D02 or D03 (D02=1 or 2, D03=1 or 2)

D04 [O]



You said that the NHS Constitution had a positive impact on TEXT SUBSTITUTION (the patients' experience of the NHS) IF CODE 1 OR CODE 2 AT D02/(on you) IF CODE 1 OR CODE 2 AT D03.

Can you tell me why you say that?

PROBE: Can you give me an example?

Probe fully, do not prompt.

Open-ended for later coding Don't know

#### Base: respondents who mentioned negative impact at D02 or D03 (D02=4 or 5, D03=4 or 5)

D05 [O]

You said that the NHS Constitution had a negative impact on TEXT SUBSTITUTION (the patients' experience of the NHS) IF CODE 4 OR CODE 5 AT D02/(on you) IF CODE 4 OR CODE 5 AT D03. Can you tell me why you say that?

PROBE: Can you give me an example?

Probe fully, do not prompt.

Open-ended for later coding Don't know

#### Base: respondents who mentioned positive impact at D02 or D03 (D02=1 or 2, D03=1 or 2)

#### D06 [M]

In which of these ways, if any, has the NHS Constitution influenced your day to day work? Read out and code all that apply. You can choose more than one answer.

- 1. Routinely involving patients and discussions and decisions about their healthcare
- 2. Viewing the services you provide from the standpoint of a patient
- 3. Helping patients make choices about their care
- 4. Ensuring patients are treated with dignity and respect
- 5. Being open with patients, their families and carers, including if anything goes wrong, welcoming and listening to feedback and addressing any concerns promptly
- 6. Being empowered to improve the quality and safety of services for patients and their families
- 7. Improving your own health, well-being and safety
- 8. None of these
- 9. Don't know

#### Base: all respondents

### D07 [S]

Overall, to what extent do you support or oppose the NHS Constitution? Read out. There is only one answer possible.

- 1. Support strongly
- 2. Tend to support
- 3. Neither support nor oppose
- 4. Tend to oppose
- 5. Oppose strongly
- 6. (Don't know)



D08 [S]

Overall, how likely do you think you are to use the NHS Constitution in the future? Would you say .. Read out. There is only one answer possible.

- 1. Very likely
- 2. Fairly likely
- 3. Not very likely
- 4. Not at all likely
- 5. Don't know

#### **Demographics**

E01 [S]

Finally, a few questions about yourself. What was your age last birthday?

Read out as necessary.

COLLECT ACTUAL AGE [Q] OR CODE INTO BANDS IF REFUSED

- 1. Under 25
- 2. 25-34
- 3. 35-44
- 4. 45-54
- 5. 55-64
- 6. 65+

E02[S]

How long have you been working for the NHS in your current role?

Probe to pre-codes.

- 1. Less than 2 years
- 2. 2 years but less than 5 years
- 3. 5 years but less than 10 years
- 4. 10 years but less than 20 years
  5. 20 years but less than 30 years
  6. 30 years or more

- 7. Don't know



#### E03[S]

How long ago did you qualify as a/an [INSERT JOB TITLE FROM SAMPLE]?

#### Probe to pre-codes.

- 1. Less than 2 years
- 2. 2 years but less than 5 years
- 3. 5 years but less than 10 years
- 4. 10 years but less than 20 years
- 5. 20 years but less than 30 years
- 6. 30 years or more
- 7. Don't know

#### Base: all respondents

#### E04[M]

Which newspapers, including their online equivalent, do you read regularly? By regularly I mean at least twice a week

#### Do not read out.

- 1. Daily Mirror (or online equivalent)
- 2. Daily Star
- 3. The Sun
- 4. Daily Record
- 5. Daily Mail

- 6. Daily Express7. The Times8. Financial Times
- 9. The Guardian
- 10. The Daily Telegraph
- 11. The Independent
- 12. The Daily Sport
- 13. Other regional morning papers (e.g. Yorkshire Post, Western Daily Press)
- 14. Evening paper (e.g. Evening Standard)
- 15. None [S]

#### E05[S]

The Department of Health may wish to undertake further research with health professionals on these issues in the future. Would you be willing to be contacted again?

- Yes (ENSURE NAME AND CONTACT NUMBER ARE RECORDED)
   No

# Base: all respondents

#### E06[S]

Respondent gender

- 1. Male
- 2. Female
- 3. Indeterminate
- 4. Not known

#### END OF QUESTIONNAIRE



# 10 APPENDIX B - General Public Questionnaire

# NHS CONSTITUTION

ALL ADULTS AGED 16+ SECTION ANSWERED ---- 01 ASK Q1

I'd like to ask you some questions about your awareness and use of the NHS

SHOWCARD NHS1 In the last 6 months, have you personally done any of the following? CODE ALL THAT APPLY

ALL ITIAT AFFLT	
Visited an NHS GP	01
Attended an NHS hospital as an outpatient	02
Visited a Pharmacist/Chemist for medical advice	03
Visited an Accident and Emergency (A&E) department	04
Been an inpatient at an NHS hospital	05
Used 111 service (formerly known as NHS Direct)	06
Used a walk-in clinic/urgent care centre	07
Used social care services	08
Used the NHS Choices website	09
Received a visit from a GP, a district nurse or a health visitor	10
None of these	11
Don't know	12



# SHOWCARD NHS1 (AGAIN) And in the last 6 months, has a close family member or household member done any of the following? CODE ALL THAT APPLY

Visited an NHS GP	01
Attended an NHS hospital as an outpatient	02
Visited a Pharmacist/Chemist for medical advice	03
Visited an Accident and Emergency (A&E) department	04
Been an inpatient at an NHS hospital	05
Used 111 service (formerly known as NHS Direct)	06
Used a walk-in clinic/urgent care centre	07
Used social care services	08
Used the NHS Choices website	09
Received a visit from a GP, a district nurse or a health visitor	10
None of these	11
Don't know	12



If you wanted to find out about the following information, where would you look?

A4a Information about what you can expect from the NHS to help keep you

healthy and care for you when you're ill. DO NOT PROMPT. CODE

ALL THAT APPLY. Probe: WHERE ELSE WOULD YOU LOOK?

A4b Information about what your responsibilities as an NHS patient are.

DO NOT PROMPT. CODE ALL THAT APPLY. Probe: WHERE ELSE WOULD YOU LOOK?

A4c Information about what you can do if you don't get what you expect from the NHS.

DO NOT PROMPT. CODE ALL THAT APPLY. Probe: WHERE ELSE WOULD YOU LOOK?

	A4a	A4b	A4c
From the person I wanted to complain about			01
GP/health professional	02 .	02	02
Clinical Commissioning Group (CCG) or Primary Care Trust (PCT)	03 .	03	03
Hospital/Trust/Foundation Trust	04 .	04	04
PALS (Patient Advice and Liaison Service) or complaints manager	05 .	05	05
NHS Constitution	06 .	06	06
Handbook to the Constitution	07 .	07	07
DH (Department of Health) Website/DH pages on .gov.uk	08 .	08	08
NHS (Choices) website	09 .	09	09
Other website (specify)	10 .	10	10
Citizen's Advice Bureau	11 .	11	11
Other charity/voluntary organisation	12 .	12	12
NHS England	13 .	13	13
Monitor/CQC/TDA	14 .	14	14
Ombudsman/Parliamentary and Health Service Ombudsman	15 .	15	15
Healthwatch	16 .	16	16
Other answer (specify)	17 .	17	17
Nowhere	18 .	18	18
Don't know	19 .	19	19

The next section of this questionnaire asks you about key events in the NHS recently.

B1 Can I just check, have you heard of the NHS Constitution?



Yes	01	1
No		2
Don't k	know03	3
	ALL WHO ARE UNAWARE OF THE NHS CONSTITUTION (CODE 02 at B1) OTHERS GO SECTION	OT (
	RVIEWER NOTE: IN ADDITION TO HANDING (SHOWCARD NHS4) TO YOUR ONDENT, PLEASE ALSO READ OUT DESCRIPTION SHOWCARD NHS4	
reflects help ke	9, for the first time in the history of the NHS, an NHS Constitution was created. This docur is what matters to staff, patients and public. It sets out what you can expect from the NHS eep you healthy and care for you when you are ill. It also says what your responsibilities a nember of the public and an NHS patient.	to
B6	Can I just check, have you heard of the NHS constitution or something like it before	
	this interview?	
Yes	01	l
Nο	02	)



# 11 APPENDIX C- Reassurance Letter





February 2015

To whom it may concern

#### **Department of Health Survey of NHS Staff**

I am writing to ask you to take part in an important survey of NHS staff. The Department of Health wishes to ask about staff attitudes towards a particular NHS policy initiative. The survey will include staff from a range of grades and job roles to reflect staff attitudes across the NHS in England. This research will help the Department of Health fulfil a statutory requirement, with results being available for use in future policy-making.

GfK NOP, an independent survey company, has been commissioned to undertake the survey, which will take the form of a telephone interview. The fieldwork will take place in February and March 2015. We are aiming to achieve roughly 650 interviews across England, and it is anticipated that each interview will last around 10 minutes on average. If you are not available to complete the interview when called, the survey company would be pleased to make an appointment to call back at a more convenient time.

All responses are kept completely confidential, so the Department will never be able to access anyone's individual answers. Data are kept secure and processed in line with the Data Protection Act, and GfK NOP also operates within the Market Research Society Code of Conduct.

This survey has been assessed by the Burden Advice and Assessment Service (BAAS) and is now pending approval from the **Standardisation Committee for Care Information** (SCCI).

All collections that are assessed by BAAS will be listed on the schedule of approved collections which can be found at <a href="http://www.hscic.gov.uk/baas">http://www.hscic.gov.uk/baas</a>. The BAAS schedule is the definitive source of assessed collections and is referred to in the NHS standard contract.

If you have any questions about this survey, please contact Claire Ivins who is the project manager at GfK NOP, either by email or phone on: Claire.ivins@gfk.com 020 7890 9783.

I do hope that you will be able to help with this important research project.

Yours sincerely

Ben Dyson

Director, NHS Group



# 12 APPENDIX D - Additional Data Breakdowns

#### KEY ELEMENTS OF THE NHS CONSTITUTION BY OCCUPATION

