

Public Perceptions of the NHS and Social Care Tracker Survey

Winter 2013 wave

04/03/2014

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- Overall satisfaction with the running of the NHS has remained stable during the last six months. It is lower than it was three years ago though.
- Satisfaction remains high when looking just at those who have used NHS services recently.
- o In the context of other issues facing Britain, such as the economy, race and immigration and unemployment, the NHS is still not a primary public concern.
- o People continue to be extremely proud and positive about the NHS. The majority think Britain's National Health Service is one of the best in the world and perceptions that the NHS provides good value for money are stronger than ever before.

- The public are also positive about specific aspects of the NHS at present, including whether people are treated with dignity and respect. Confidence in patient safety is as high as it has ever been.
- o However, there are also concerns about the future funding of the NHS. A large majority think it will face a severe funding problem in the future, and people are divided about whether it is possible to increase quality of care while cutting costs. There has also been a fall in the perception that waiting times are getting shorter.
- o Views about the future of the NHS remain divided, with almost the same proportion thinking it is going to get better over the next few years as thinking it is going to get worse.

- o People remain relatively positive about some aspects of NHS reform, such as moving services which have been traditionally provided in hospitals into community settings. The majority think GPs are best placed to understand which services their patients need.
- o Public opinion is divided about the involvement of the private sector in the provision of NHS services though.
- o Most think people are being given increasing choice about their treatment and care, and those who have had recent experience of services are more likely to think so.

- o Most people continue to use traditional methods of communication to consult their GP, with the majority consulting their GP face-to-face.
- o However, there has been a slow but steady increase in the proportion of people contacting NHS services in new ways during the last two years. In particular, increasing numbers have received text reminders about appointments and have used the NHS 111 service.
- o The appetite for such new methods is growing, with increasing numbers of people keen to be able to book GP appointments online.

# 2. Introduction

### Background and objectives of the research

This survey is the latest in a series of surveys conducted by the Ipsos MORI Social Research Institute on behalf of the Department of Health between spring 2000 and winter 2013.

The aim of the survey is to explore public attitudes towards, and perceptions of, the NHS and social care services, and to provide a means of tracking these perceptions and attitudes over time.

The survey consists of 'tracker' questions which assess how public opinion varies over time, whilst also allowing the additions of new topics and subject areas as they arise. For example, questions about the NHS Constitution were added in 2008, and questions exploring NHS reforms were included in recent waves. This flexibility means that the research always reflects the most current issues facing the NHS and social care.

### Methodology

Ipsos MORI conducted 1016 interviews among a representative sample of adults in England between 18 November and 16 December 2013.

All interviews were carried out by Ipsos MORI interviewers in respondents' homes, using Computer Assisted Personal Interviewing (CAPI).

In order to achieve a sample representative of the national and regional population, quotas were set for the number of interviews carried out with different types of respondents. Quotas were set for age, gender and working status.

Data have been weighted to the known population profile of Great Britain, in order to provide a nationally representative sample.

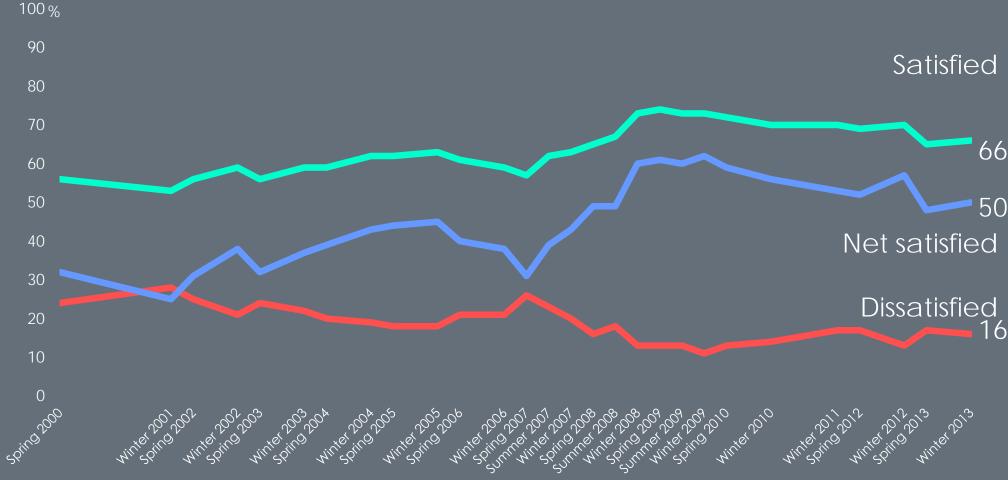
The same methodology has been used in every wave of this survey, allowing results to be tracked over time.

As a sample and not the entire population of adults living in England have been interviewed, not all differences between results are statistically significant. Only differences in results between different groups of the population which are statistically significant have been included in this report. Where differences between one wave of the survey and another are not large enough to be statistically significant, this report will describe the findings as 'remaining the same' or 'unchanged'.

Further details about the methodology and statistical significance are provided in the appendices.

# 3. Overall satisfaction with the NHS

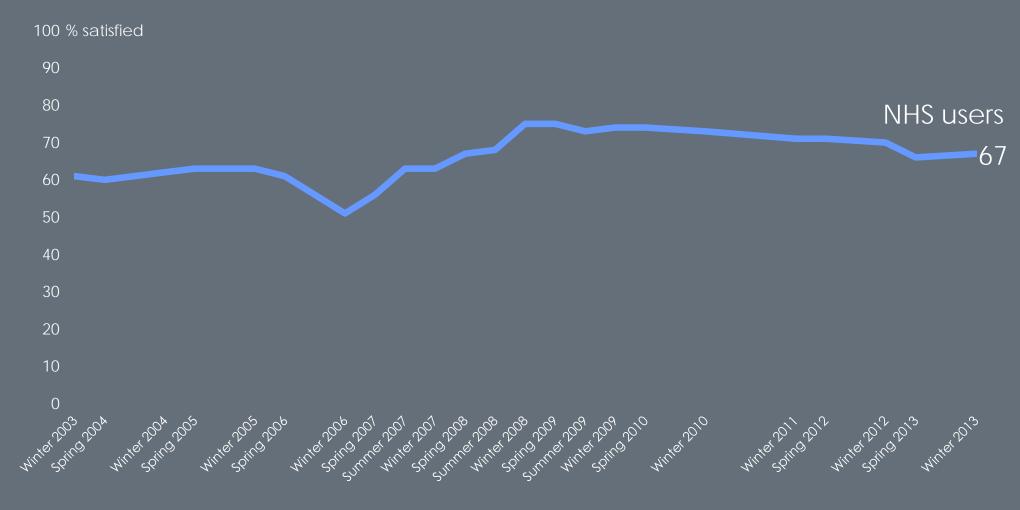
Although lower than levels recorded previously, public satisfaction with the running of the NHS has not changed during the last six months



Overall how satisfied or dissatisfied are you with the running of the National Health Service nowadays?

Base: Adults aged 16+ in England (c. 1000 per wave)

# ...and, when looking just at those who have used NHS services recently, satisfaction also remains high



Overall how satisfied or dissatisfied are you with the running of the National Health Service nowadays?

Base: Adults aged 16+ in England: NHS users (c. 900 per wave)
NHS users are those who have been personally been an inpatient, outpatient, A&E patient, used a walk-in clinic, or visited a minor injuries unit or an NHS GP within the last year

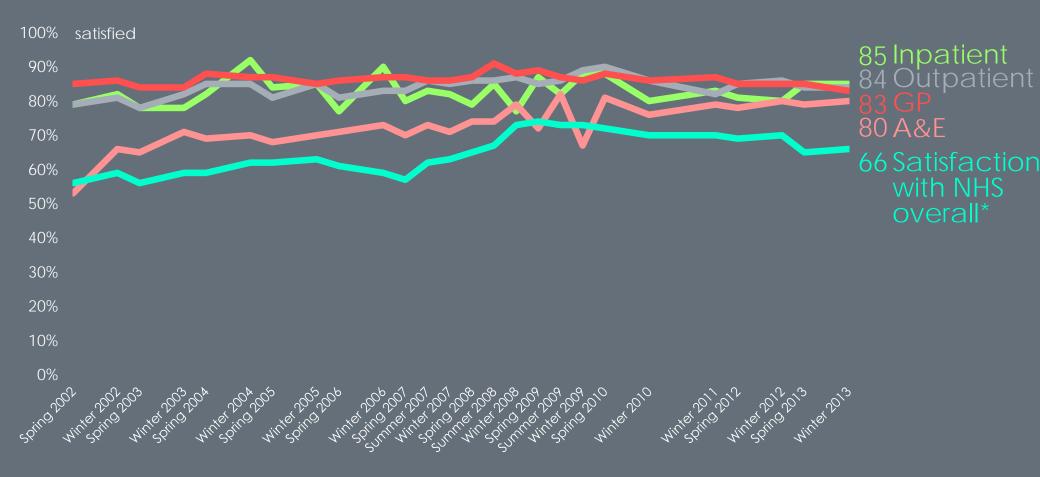
The youngest and the oldest in society are the most satisfied



Overall how satisfied or dissatisfied are you with the running of the National Health Service nowadays? (% satisfied)

Base: Adults aged 16+ in England, Winter 2013: 16 - 24 (139); 25 - 34 (169); 35 - 54 (335); 55 - 64 (155); 65 - 74 (119); 75 and over (99\*)

# Satisfaction also remains high among users of specific services

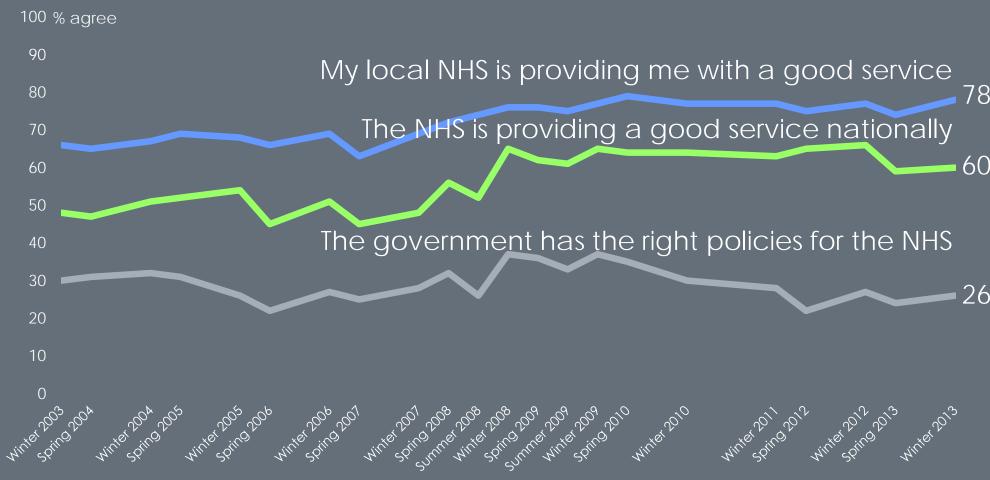


Now thinking about the last time you visited an NHS hospital/your local doctor or GP, overall, how satisfied or dissatisfied were you with this last visit as a patient?

\*Overall how satisfied or dissatisfied are you with the running of the National Health Service nowadays?

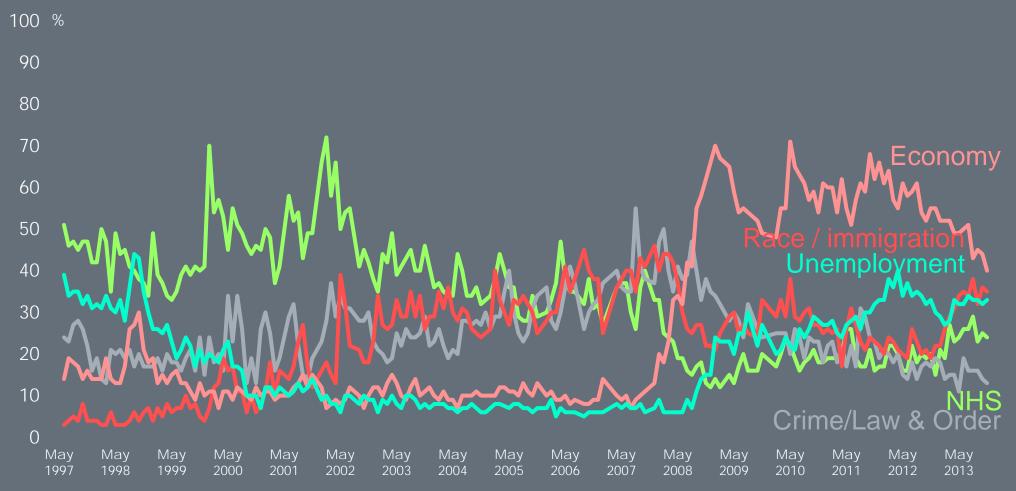
Base: Adults aged 16+ in England: NHS overall (c. 1000 per wave); GP – all visiting GP in last year (c. 750 per wave); Outpatient – all whose last hospital visit was an outpatient (c. 300 per wave); Inpatient – all whose last hospital visit was an inpatient (c. 100 per wave\*\*); A&E – all whose last hospital visit was to A&E (c. 100 per wave\*\*)

# ...while views of local and national NHS services and government policies remain unchanged



To what extent, if at all, do you agree or disagree with the following statements?

### In the context of other issues, the NHS is still not a primary public concern



- Q1. What do you see as the most important issue facing Britain today?
- Q2. What do you see as the other important issues facing Britain today?

The data in this chart represent the percentage of people mentioning each issue under either Q1 or Q2 above. All respondents were asked both questions. Respondents are only able to give one answer to Q1 but able to give more than one answer to Q2.

### ...despite recent negative media coverage of the service

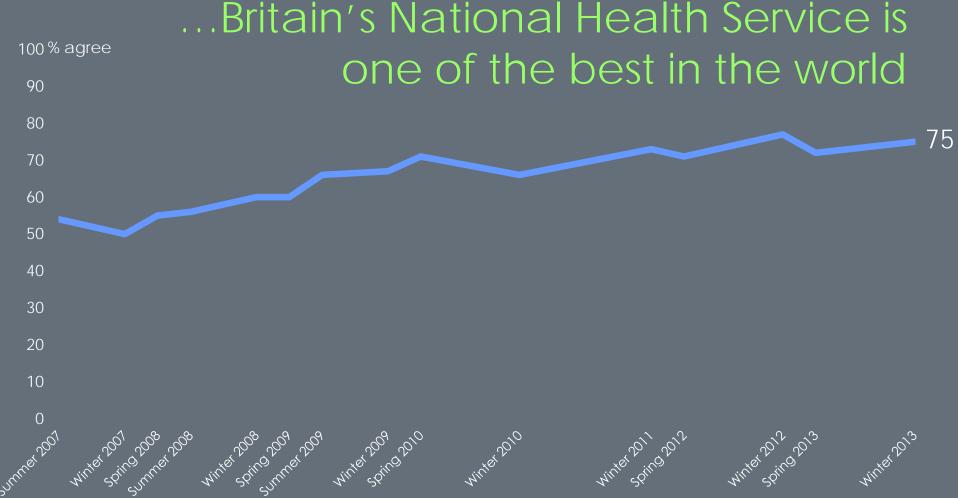


### Key points

- o Overall satisfaction with the running of the NHS has not changed during the last six months. Satisfaction remains lower than in 2008 to 2010 though.
- Satisfaction with the running of the NHS remains high when looking just at those who have used NHS services recently.
- Views of local and national NHS services and government policies remain unchanged.
- o As will be discussed in the next chapter, there remain some extremely positive perceptions of various aspects of the NHS.

# 4. Key perceptions of the NHS

Pride in the NHS remains very high, with three quarters of the public agreeing that...



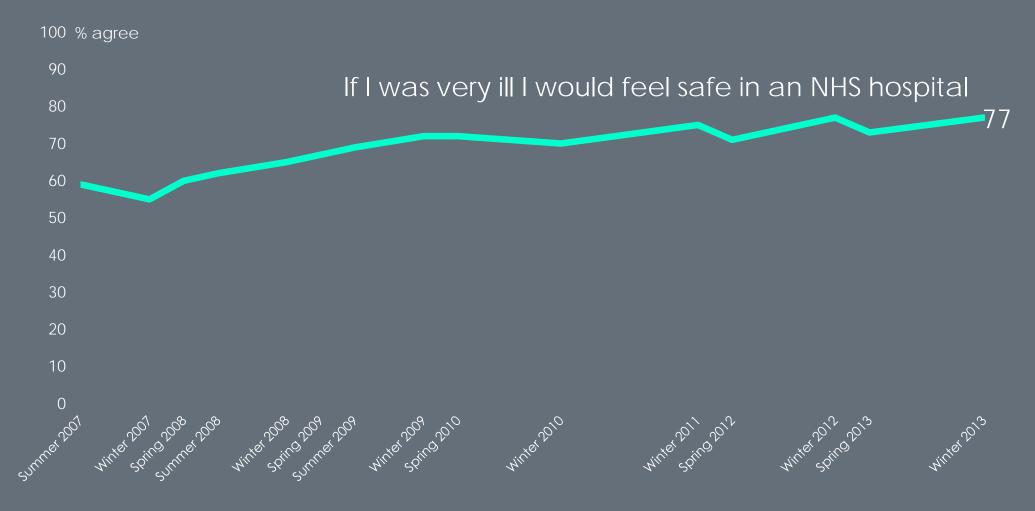
Please tell me whether on the whole you agree or disagree with each of the following statements...

Pride is higher among those who support the government's policies for the NHS than among those who don't

85% 67% of those who of those who agree the disagree the government government has the right has the right policies for the NHS policies for the NHS

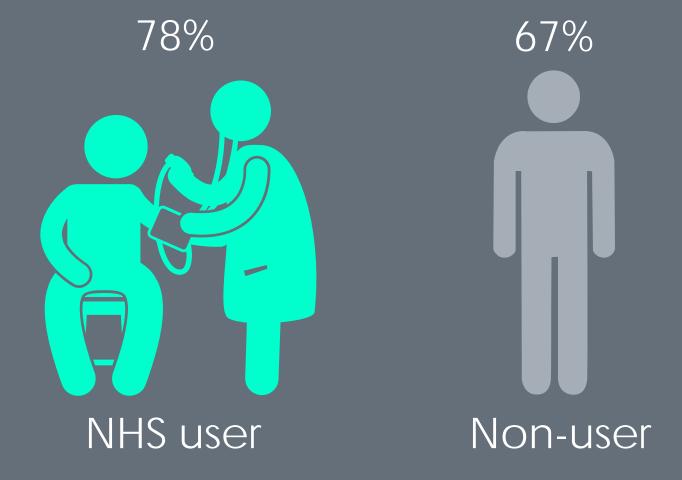
Please tell me whether on the whole you agree or disagree with each of the following statements... Britain's National Health Service is one of the best in the world (% agree)

## Confidence about safety in NHS hospitals is as high as it has ever been



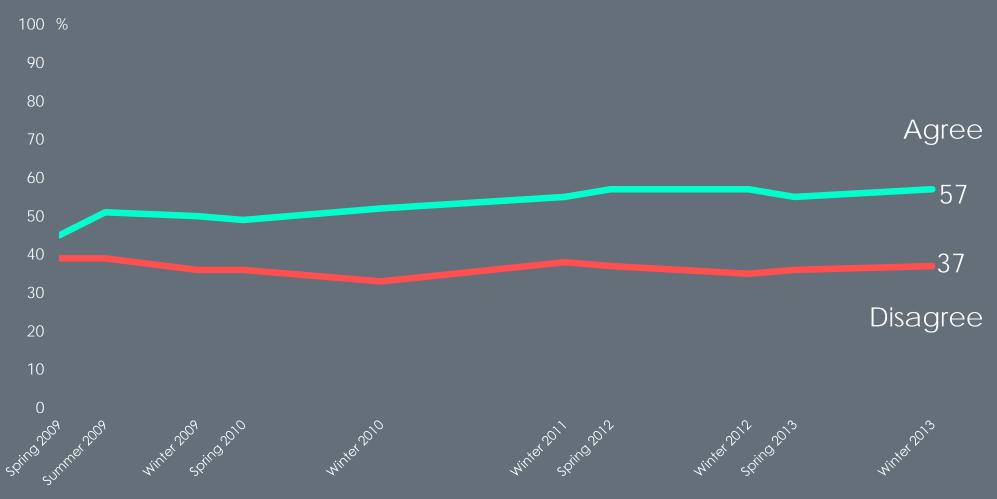
Please tell me whether on the whole you agree or disagree with each of the following statements...

...and strongest among those who have used NHS services recently



Please tell me whether on the whole you agree or disagree with each of the following statements... If I was very ill I would feel safe in an NHS hospital (% agree)

## Over half of the public thinks the NHS puts quality at the heart of all it does



Please tell me whether on the whole you agree or disagree with each of the following statements... The NHS puts quality at the heart of all it does

Base: Adults aged 16+ in England (c. 1000 per wave)

### ...and the youngest are most likely to think this



Please tell me whether on the whole you agree or disagree with each of the following statements... The NHS puts quality at the heart of all it does (% agree)

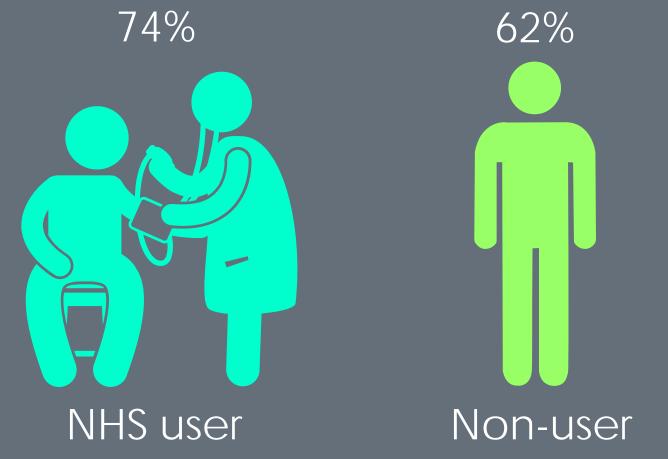
Base: Adults aged 16+ in England, Winter 2013: 16 - 24 (139); 25 - 34 (169); 35 - 54 (335); 55 - 64 (155); 65 - 74 (119); 75 and over (99\*)

Belief that people are treated with dignity and respect when using NHS services continues to rise



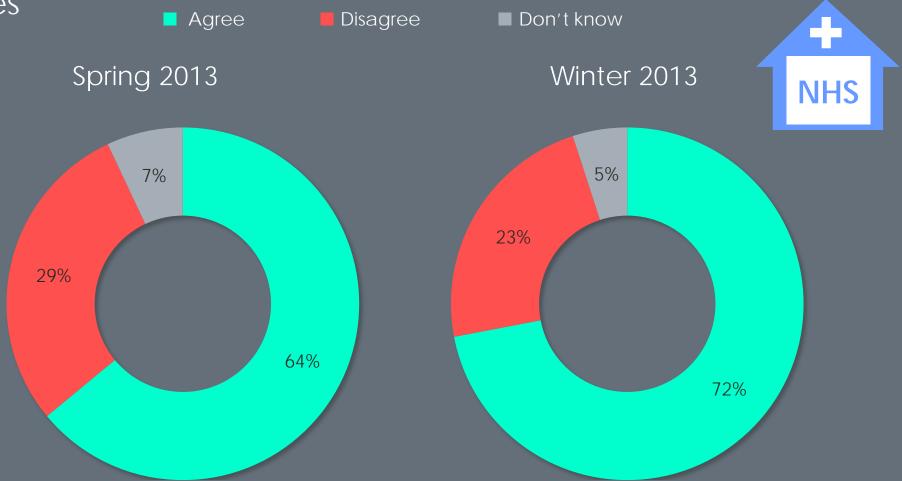
Please tell me whether on the whole you agree or disagree with each of the following statements... People are treated with dignity and respect when they use NHS services

...and those with recent experience of using services are more likely to agree with this



Please tell me whether on the whole you agree or disagree with each of the following statements... People are treated with dignity and respect when they use NHS services(% agree)

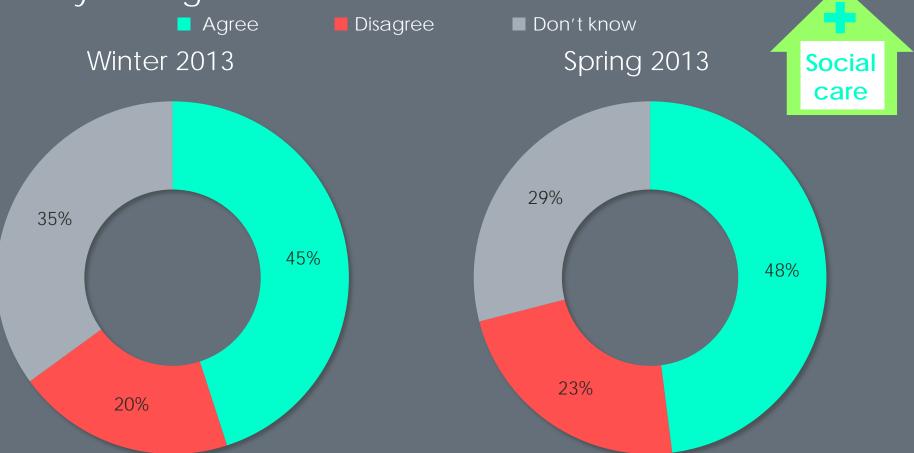
There has also been an increase in agreement that people are treated with compassion when using NHS services



Please tell me whether on the whole you agree or disagree with each of the following statements... People are treated with compassion when they use NHS services

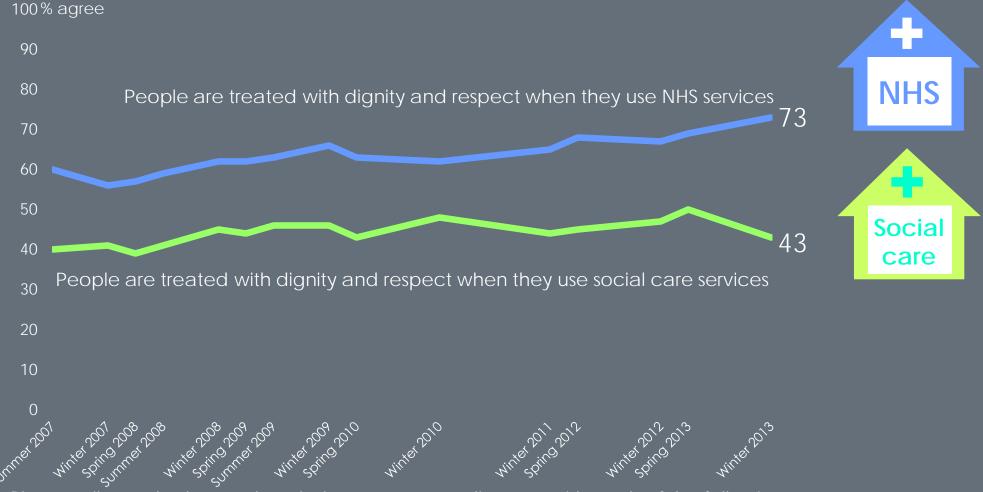
Base: Adults aged 16+ in England, Winter 2013 (1016); Spring 2013 (1005). Question first asked in Spring 2013.

...while the proportion thinking people are treated with compassion when using social care services has not significantly changed



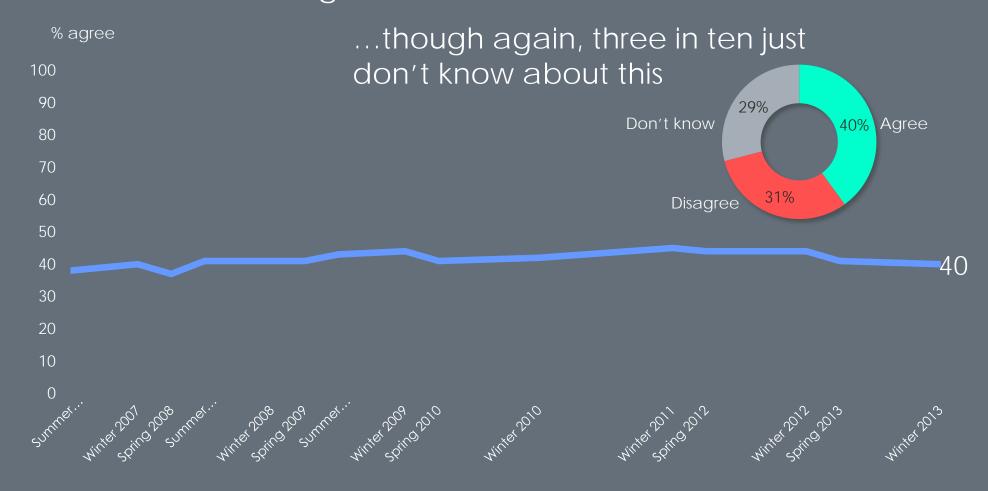
Please tell me whether on the whole you agree or disagree with each of the following statements... People are treated with compassion when they use social care services

...and whilst increasing proportions of people think people are treated with dignity and respect by NHS services, this is not the case for social care services



Please tell me whether on the whole you agree or disagree with each of the following statements...

Fewer than half of the public think NHS and social care services work well together...



Please tell me whether on the whole you agree or disagree with each of the following statements...

NHS and social care services work well together to give people coordinated care

Since 2010, there has been a decrease in the proportion of people thinking NHS waiting times for non-emergency treatment are getting shorter



Please tell me whether on the whole you agree or disagree with each of the following statements...

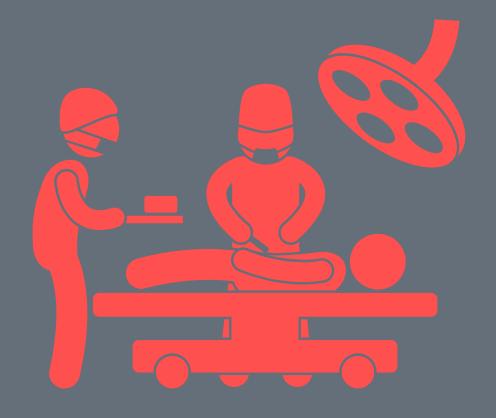
NHS waiting times for non-emergency treatment and care are getting shorter

Base: Adults aged 16+ in England (c. 1000 per wave)

Six in ten of those who have visited hospital in the last year disagree waiting times are getting shorter

58%

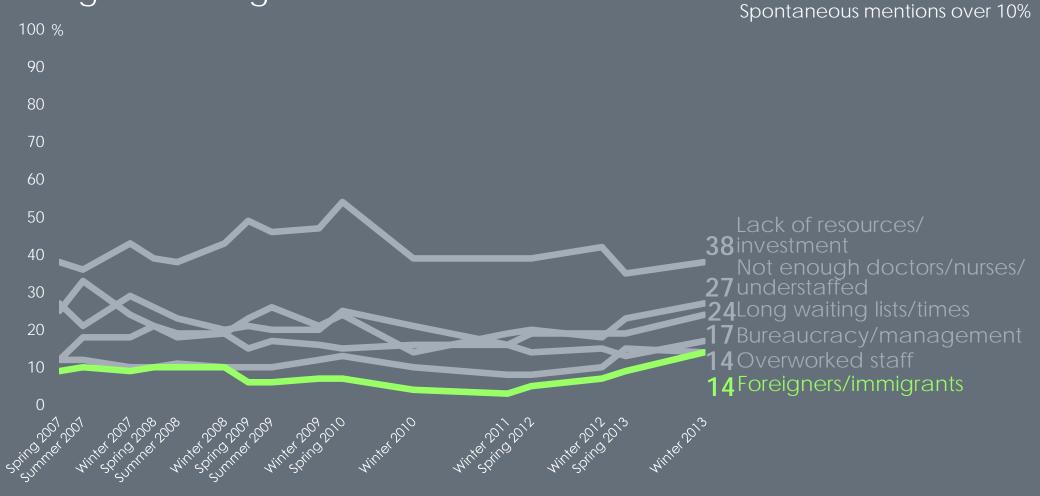
### of hospital users disagree



Please tell me whether on the whole you agree or disagree with each of the following statements... NHS waiting times for non-emergency treatment and care are getting shorter (% disagree)

Base: Adults aged 16+ in England, Winter 2013: Hospital user (602)
Hospital users are those who have been personally been an inpatient, outpatient, A&E patient, or visited a minor injuries unit within the last year

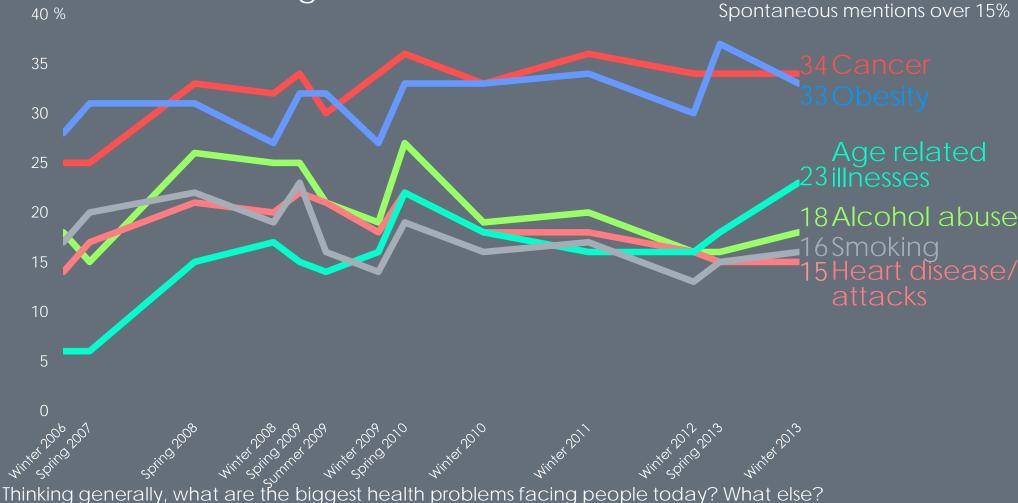
Although not seen as the biggest problem facing the NHS, there has been an increase in concern about foreigners/immigrants



Overall, what do you see as the biggest problems facing the NHS?

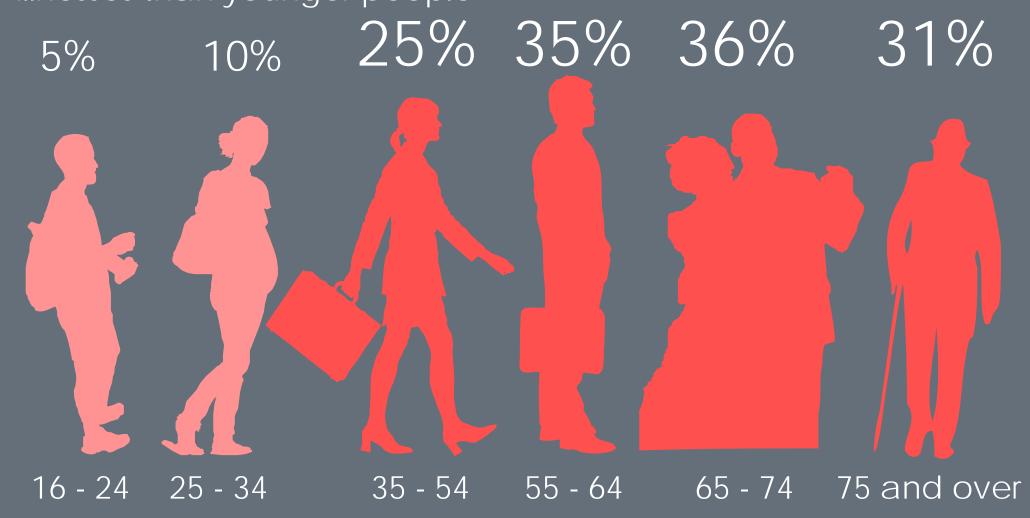
Base: Adults aged 16+ in England (c. 1000 per wave)

Cancer and obesity are considered our biggest health problems once more, though there has been an increase in concern about age related illnesses



Respondents are able to give more than one answer at this question. Base: Adults aged 16+ in England (c. 1000 per wave)

...with older people more worried about age related illnesses than younger people



Thinking generally, what are the biggest health problems facing people today? What else? (% age related illnesses)

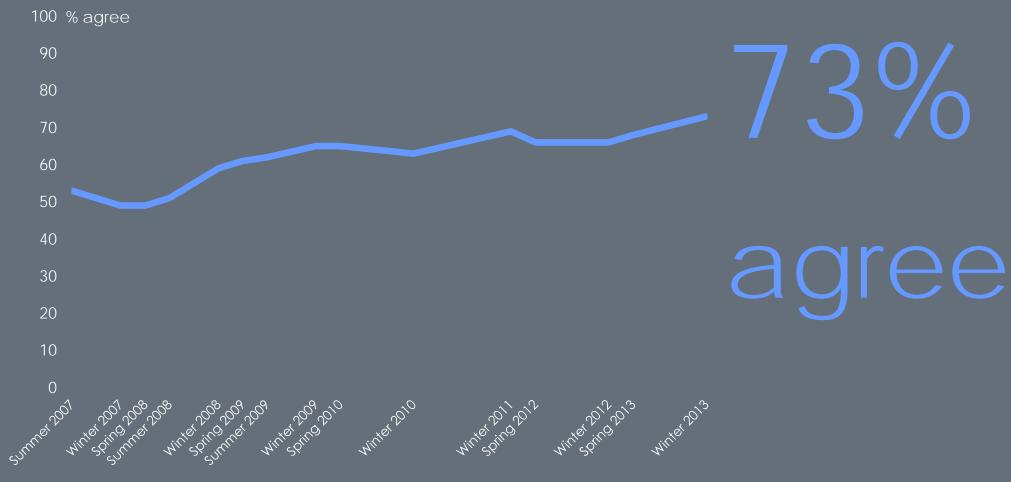
Base: Adults aged 16+ in England, Winter 2013: 16 - 24 (139); 25 - 34 (169); 35 - 54 (335); 55 - 64 (155); 65 - 74 (119); 75 and over (99\*)

## Key points

- o People continue to be extremely proud of the NHS and positive about certain aspects of it. Most people think Britain's National Health Service is one of the best in the world and confidence in hospital safety is as high as it has ever been. Perceptions of quality are stable.
- o The proportion who think people are treated with dignity and respect when using social care services has fallen, and fewer think people are treated with dignity and respect, or compassion when using social care services than when using NHS services. However, fewer people also feel able to give an opinion about social care services than the NHS. As we know from other waves of this research, people are much less likely to have had direct experience of it.
- o Concerns are rising about age-related illnesses and the impact of foreigners/immigrants on the NHS, and there has been a fall in the perception that waiting times are getting shorter. It will be important to monitor how these perceptions develop during the next months and years.

# 5. Funding

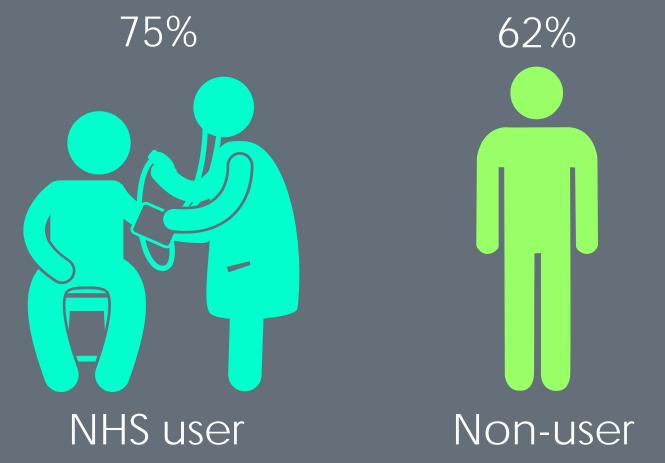
## More people than ever before think the NHS provides good value for money to taxpayers



Please tell me whether on the whole you agree or disagree with each of the following statements... The NHS provides good value for money to taxpayers

Base: Adults aged 16+ in England (c. 1000 per wave)

...particularly those who have used it recently

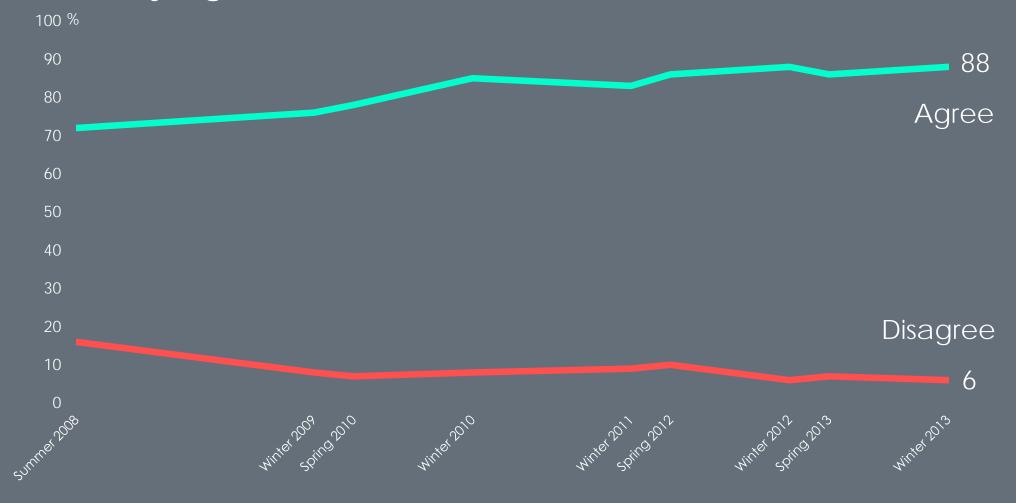


Please tell me whether on the whole you agree or disagree with each of the following statements... The NHS provides good value for money to taxpayers (% agree)

Base: Adults aged 16+ in England, Winter 2013: NHS users (904); Non-users (112)

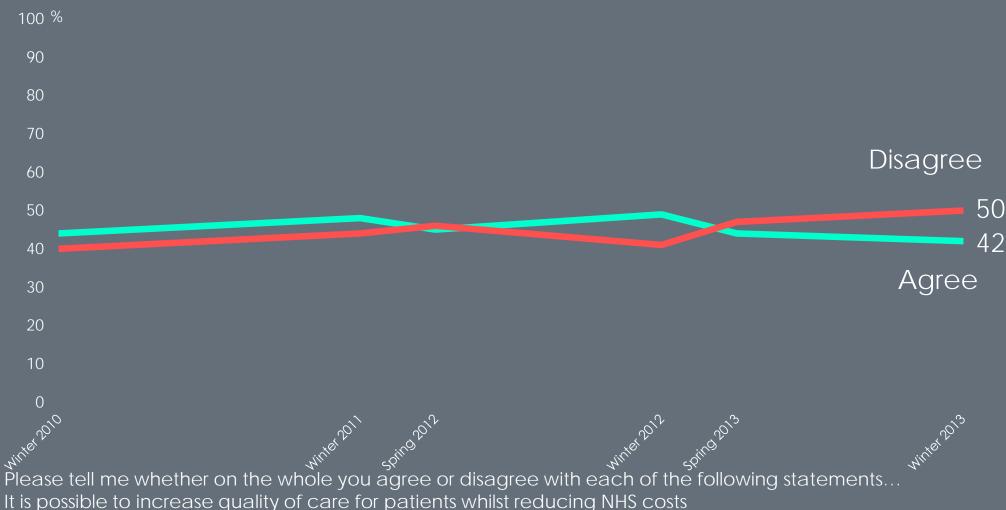
NHS users are those who have been personally been an inpatient, outpatient, A&E patient, used a walk-in clinic, or visited a minor injuries unit or an NHS GP within the last year

## Despite this, concern about future funding remains extremely high



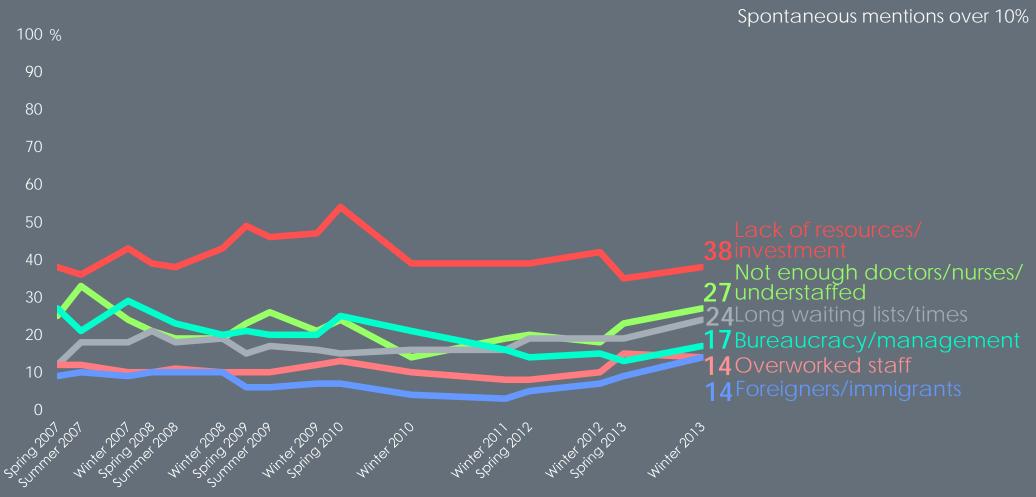
Please tell me whether on the whole you agree or disagree with each of the following statements... The NHS will face a severe funding problem in the future

...and fewer people think it is possible to increase the quality of patient care while reducing costs compared with a year ago



Base: Adults aged 16+ in England (c. 1000 per wave)

## ...and lack of resources is still considered the biggest problem facing the NHS

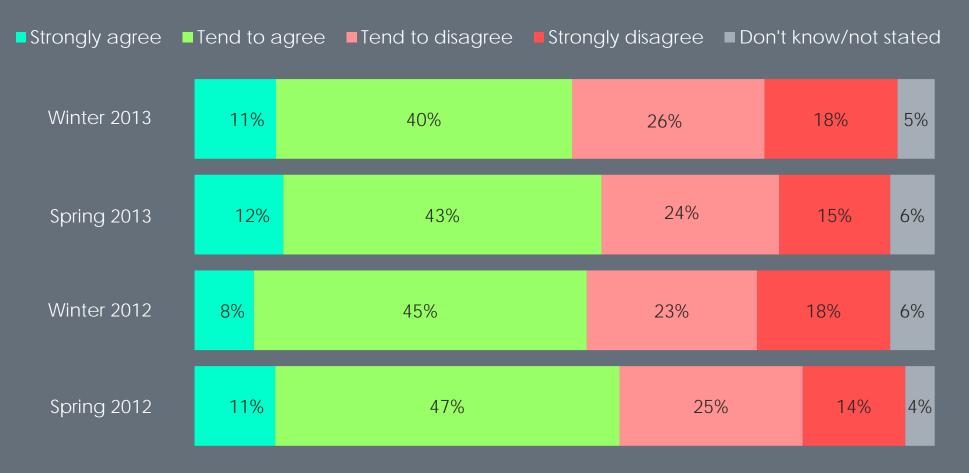


Overall, what do you see as the biggest problems facing the NHS?

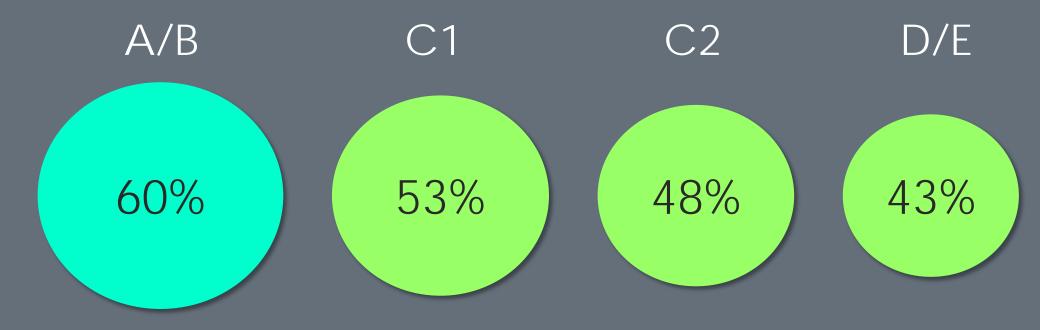
Respondents are able to give more than one answer at this question.

Base: Adults aged 16+ in England (c. 1000 per wave)

## Yet, the public are divided about whether there should always be limits on what is spent on the NHS

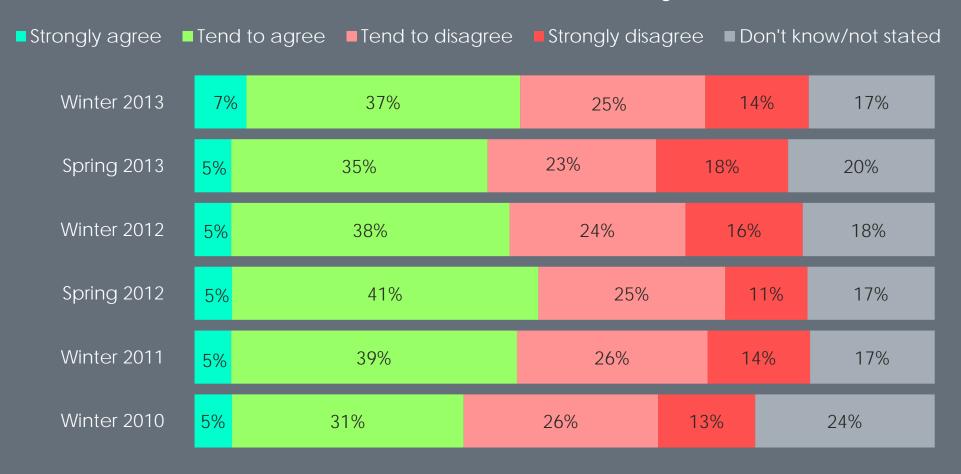


Please tell me whether on the whole you agree or disagree with each of the following statements... There should always be limits on what is spent on the NHS ...though those in social grades A/B are more likely to think there should



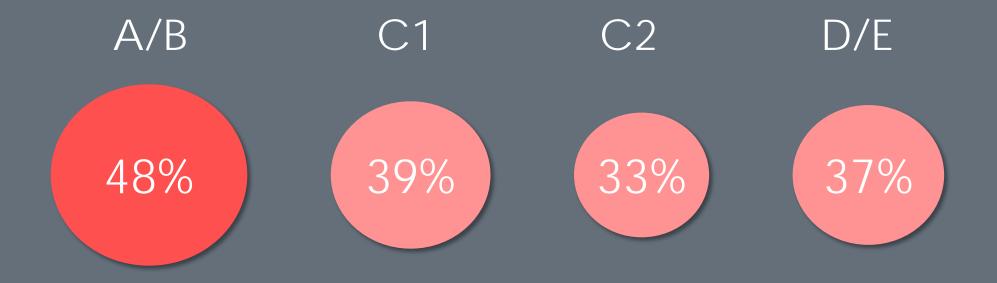
Please tell me whether on the whole you agree or disagree with each of the following statements... There should always be limits on what is spent on the NHS (%agree)

## People are also divided about whether the NHS is doing all it can to reduce waste and inefficiency



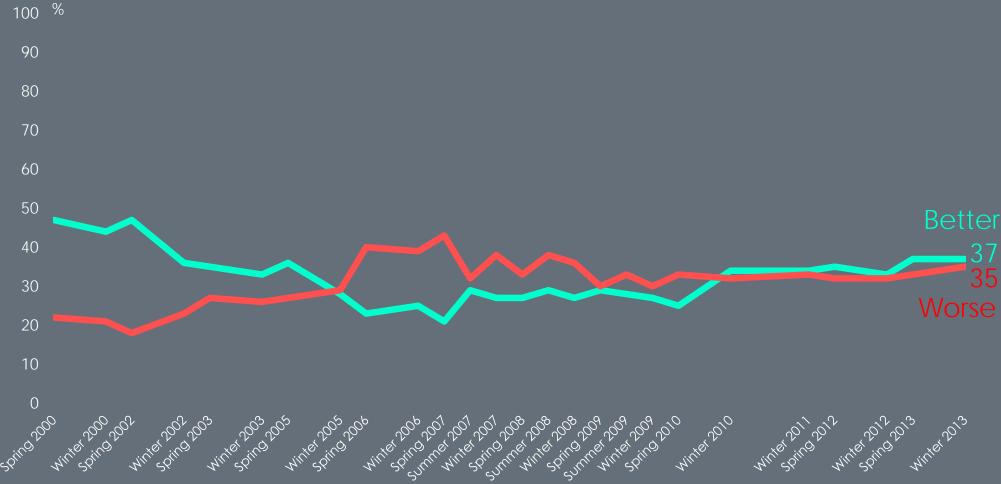
Please tell me whether on the whole you agree or disagree with each of the following statements... The NHS is doing everything it can to reduce waste and inefficiency

...with those in social grades A/B more likely to think the NHS could be doing more



Please tell me whether on the whole you agree or disagree with each of the following statements... The NHS is doing everything it can to reduce waste and inefficiency (%disagree)

In this context, it is perhaps unsurprising that similar proportions think the NHS will get better over the next few years as think it will get worse



Thinking about the NHS over the next few years do you expect it to get better or worse?

#### Key points

- o Echoing the positive views of aspects of the NHS discussed in the previous chapter, perceptions that the NHS provides good value for money are stronger than ever before.
- o Despite this, concerns about the future remain heightened. A large majority think the NHS will face a severe funding problem in the future, and people are divided about whether it is possible to increase quality of care while cutting costs.
- o Around half of the public think there should always be limits on what is spent on the NHS. At a time when the public are worried about future funding of the NHS, it will be interesting to watch how this issue develops and whether the proportion thinking there should be limited funding grows or diminishes (especially as there has not been a clear trend either way during the past 18 months).
- o In this context, it is perhaps unsurprising that views about the future of the NHS are divided, with almost equal numbers thinking it is going to get better over the next few years as think it is going to get worse.

# 6. Changes to the NHS

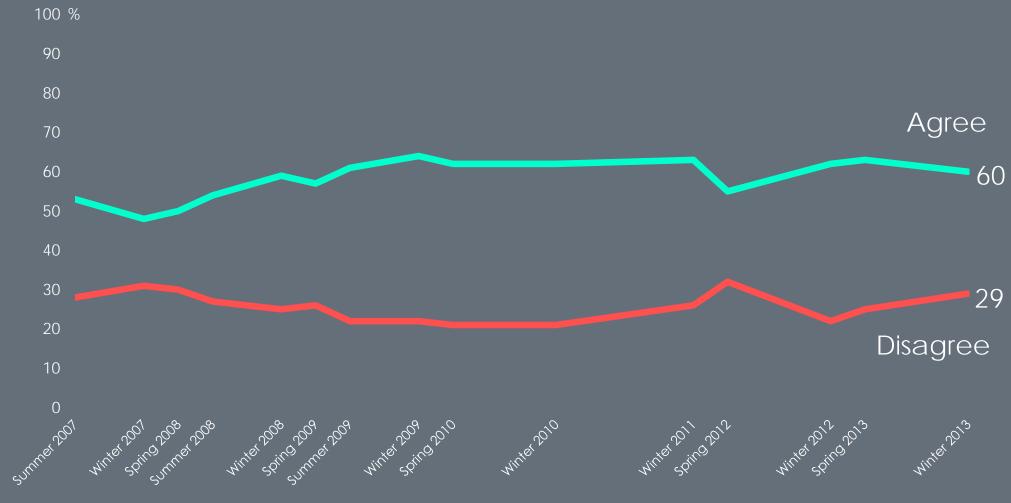
More people than six months ago think the NHS is changing to provide the service we will need in the future



Please tell me whether on the whole you agree or disagree with each of the following statements... The NHS is changing so it can provide the service we need for years to come

Base: Adults aged 16+ in England (c. 1000 per wave)

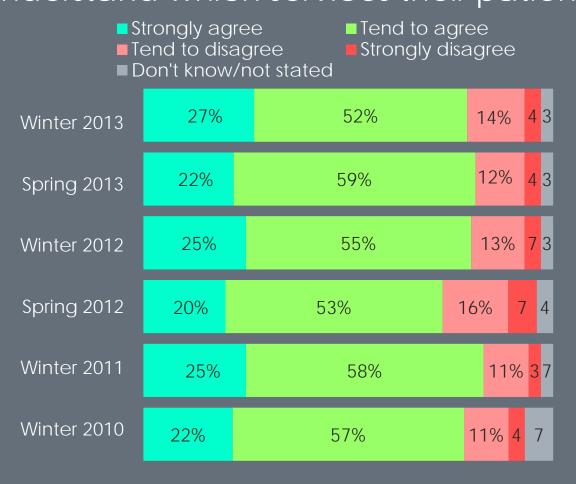
## Three-fifths agree people have increasing choice about their treatment and care

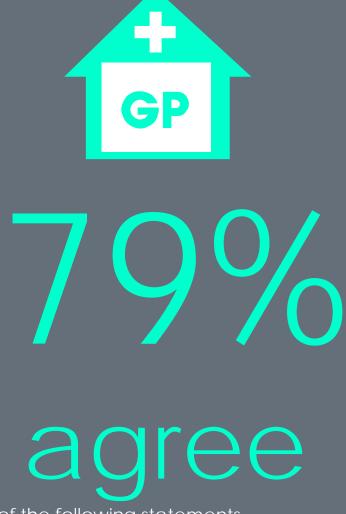


Please tell me whether on the whole you agree or disagree with each of the following statements... People have increasing choice about their treatment and care

Base: Adults aged 16+ in England (c. 1000 per wave)

Eight in ten people believe GPs are best placed to understand which services their patients need

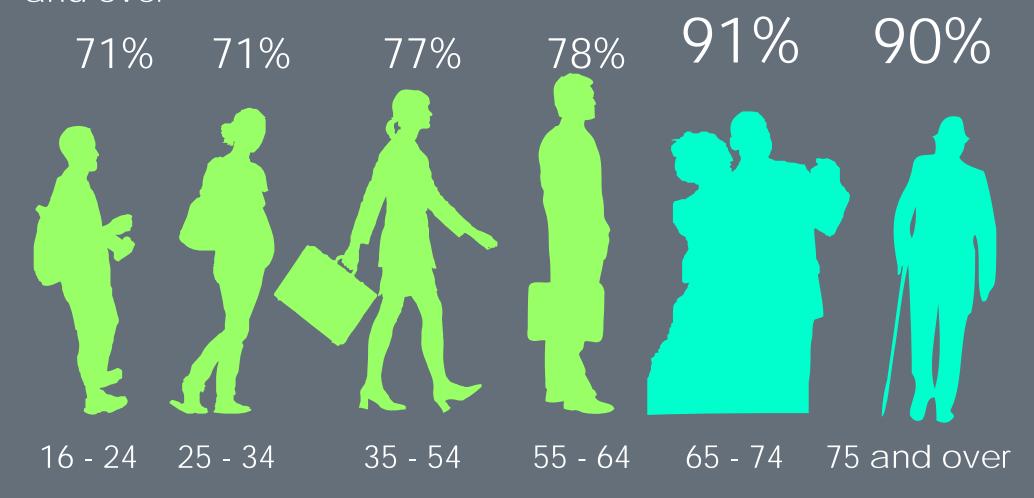




Please tell me whether on the whole you agree or disagree with each of the following statements... GPs are best placed to understand which services their patients need

Base: Adults aged 16+ in England (c. 1000 per wave)

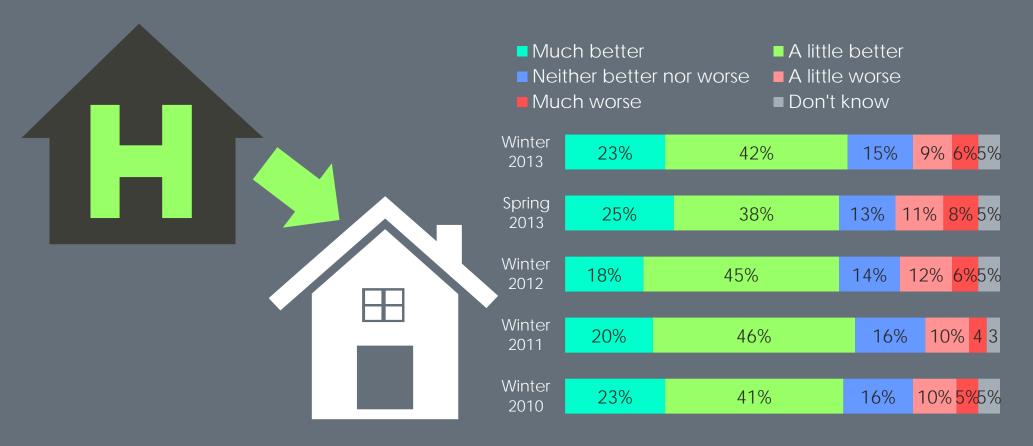
...with this rising to nine in ten among people aged 65 and over



Please tell me whether on the whole you agree or disagree with each of the following statements... GPs are best placed to understand which services their patients need (% agree)

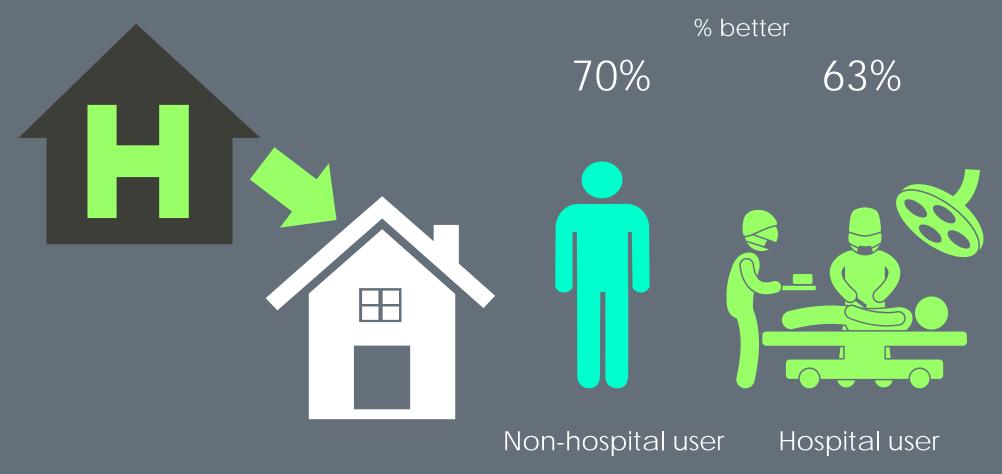
Base: Adults aged 16+ in England, Winter 2013: 16 - 24 (139); 25 - 34 (169); 35 - 54 (335); 55 - 64 (155); 65 - 74 (119); 75 and over (99\*)

## Most people are positive about moving services from hospitals into the community



The NHS may move more services which have traditionally been provided in hospitals out into the community. This will mean more services are provided through GP practices or clinics or by NHS staff delivering them in patients' homes. How much better or worse do you think this will make services for patients?

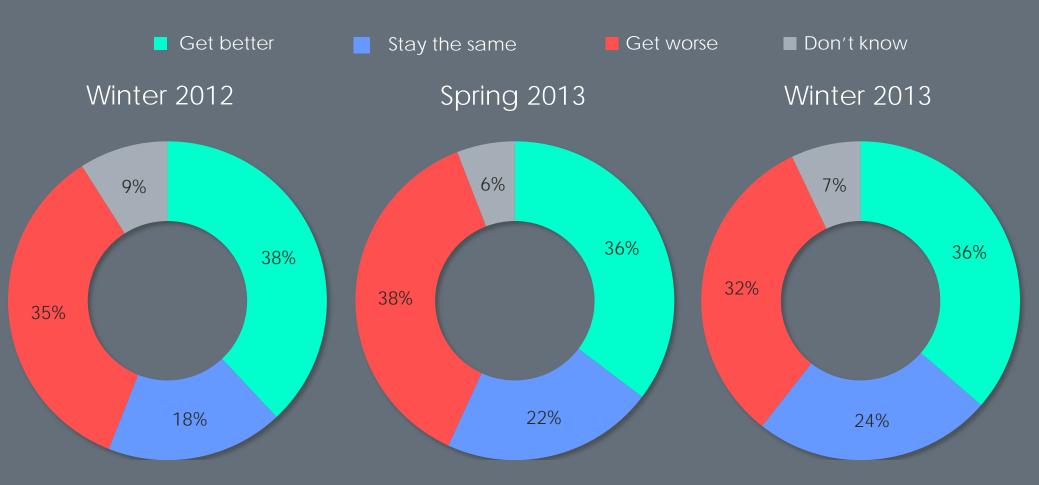
...though people who have visited hospital recently are less happy about this



The NHS may move more services which have traditionally been provided in hospitals out into the community. This will mean more services are provided through GP practices or clinics or by NHS staff delivering them in patients' homes. How much better or worse do you think this will make services for patients?

Base: Adults aged 16+ in England, Winter 2013: Hospital user (602); Non-hospital user (414)
Hospital users are those who have been personally been an inpatient, outpatient, A&E patient, or visited a minor injuries unit within the last year

## Opinion remains divided about whether private sector involvement in the provision of care is a good thing



NHS services and care, whilst still free, will be provided by a wider range of organisations in future. This will include the private sector. To what extent do you think this will make the NHS better or worse over the next few years, or will it stay the same?\*

Base: Adults aged 16+ in England, Winter 2013 (1016); Spring 2013 (1005); Winter 2012 (1004)

...though it is the youngest who are most positive about it



NHS services and care, whilst still free, will be provided by a wider range of organisations in future. This will include the private sector. To what extent do you think this will make the NHS better or worse over the next few years, or will it stay the same?\* (% get better)

Base: Adults aged 16+ in England, Winter 2013: 16 - 24 (139); 25 - 34 (169); 35 - 54 (335); 55 - 64 (155); 65 - 74 (119); 75 and over (99\*)

Source: Ipsos MORI/DH Perceptions of the NHS Tracker

In the winter 2012 wave, half of the sample were asked the question: 'NHS services and care, whilst still free, will be provided by a wider range of organisations in future. This will include the private sector. To what extent do you think this will make the NHS better or worse over the next few years, or will it stay the same?' and half the sample were asked the question 'The private sector will also be involved in the provision of NHS services and care in future. To what extent do you think this will make the NHS better or worse over the next few years, or will it stay the same?'

## Key points

- o Despite the concerns discussed in earlier chapters, people remain relatively positive about aspects of NHS reform:
  - o They continue to believe GPs are best placed to understand which services their patients need. This is important considering the new NHS architecture GPs are working within, where they are more responsible than before for commissioning secondary health care services.



- Most agree that people have increasing choice about their treatment and care.
- They remain positive about moving services from hospitals into the community, though those who have used hospitals recently are less optimistic about this.
- However, the public are divided about whether private sector involvement in the provision of NHS services is a good thing.
- o In this context, it is understandable that half of the public think the NHS is changing to provide the services needed for the future, while a third do not.

# 7. Communication channels and technology

The public are divided about whether it is easy to give feedback about the NHS 13% 41% Winter 2013 Spring 2013 16% 41% 43%

Please tell me whether on the whole you agree or disagree with each of the following statements... It is easy for people to feed back on the service they receive from the NHS

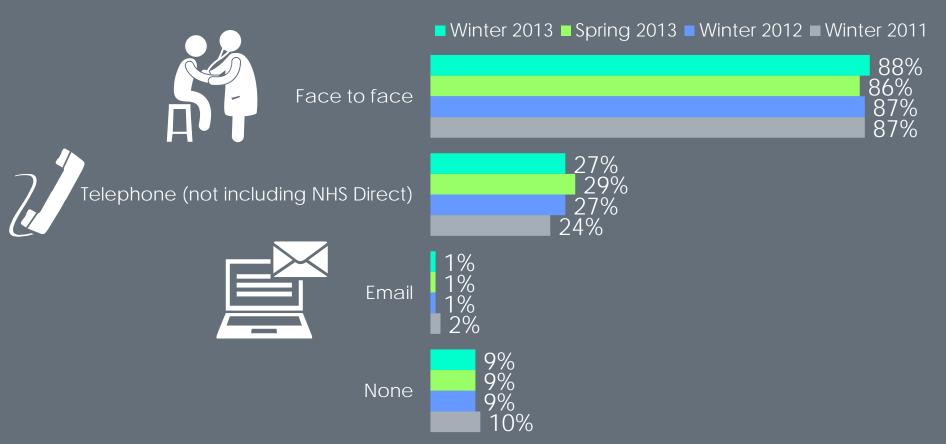
Don't know

Agree

Disagree

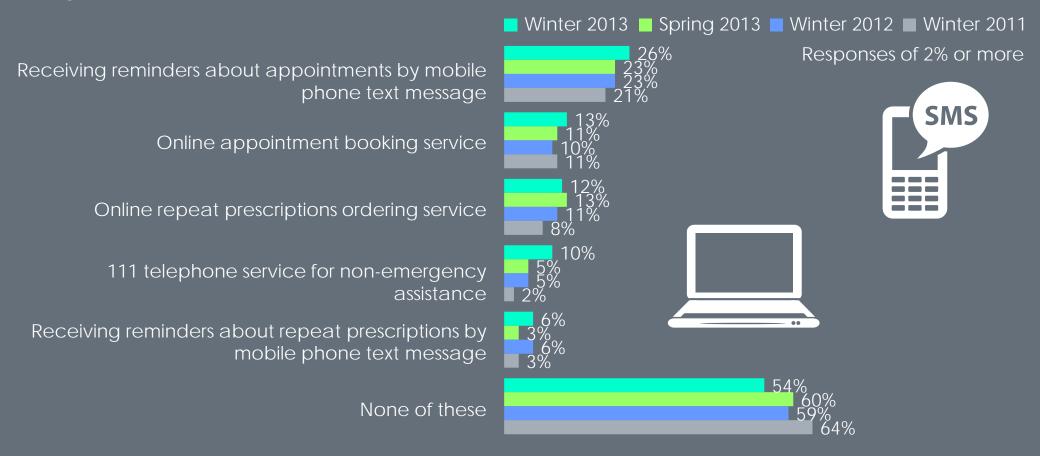
## Face-to-face continues to be the most common way of people consulting their GP





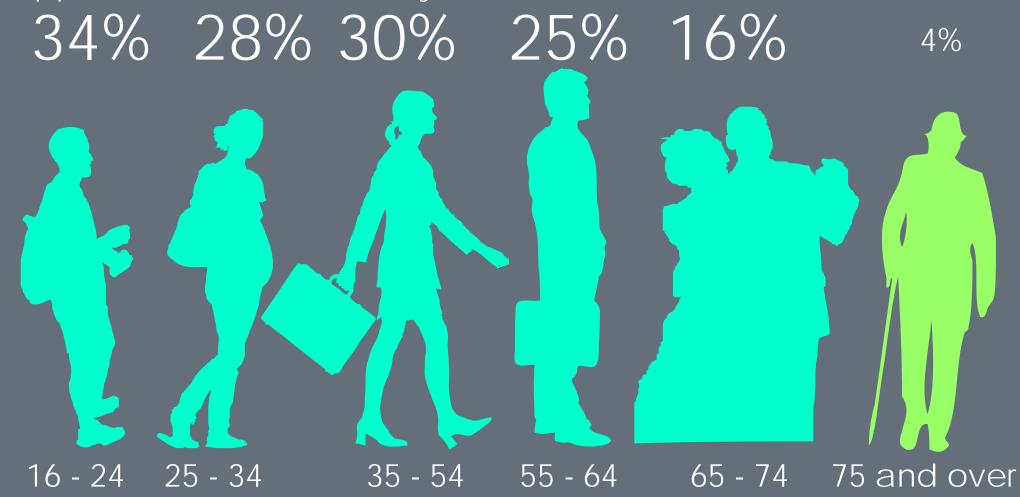
In which, if any, of the following ways have you consulted your GP in the last year? By consulted your GP, I mean sought advice from them about a health related matter.

During the last two years there has been a slow but steady increase in people contacting NHS services in new ways, and a rapid increase in use of the 111 service



Some people are starting to have contact with NHS services in a number of new ways. In which, if any, of the following ways have you had contact with an NHS service (such as your GP surgery, local hospital, dentist or pharmacy) in the last year?

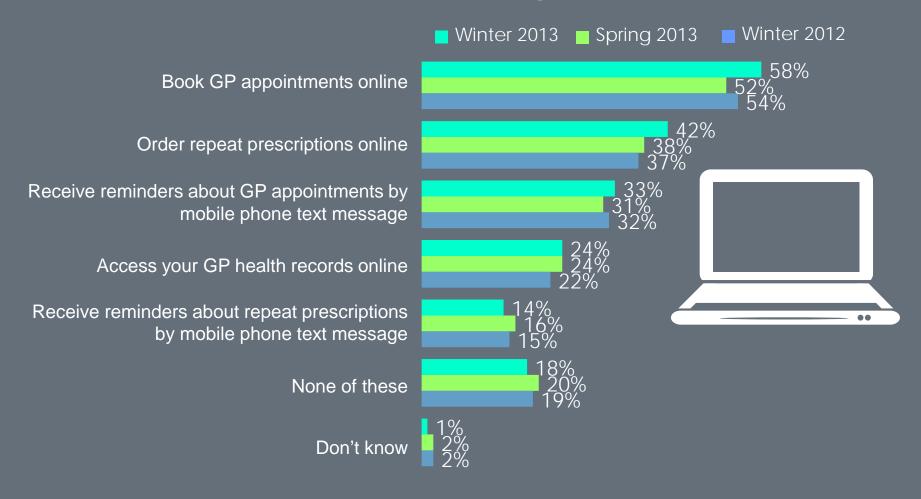
Those aged under 55 are more likely to have received appointments reminders by text



Some people are starting to have contact with NHS services in a number of new ways. In which, if any, of the following ways have you had contact with an NHS service (such as your GP surgery, local hospital, dentist or pharmacy) in the last year? (% Receiving reminders about appointments by mobile phone text message)

Base: Adults aged 16+ in England, Winter 2013: 16 - 24 (139); 25 - 34 (169); 35 - 54 (335); 55 - 64 (155); 65 - 74 (119); 75 and over (99\*)

## The most sought after innovation, however, continues to be online GP appointment booking

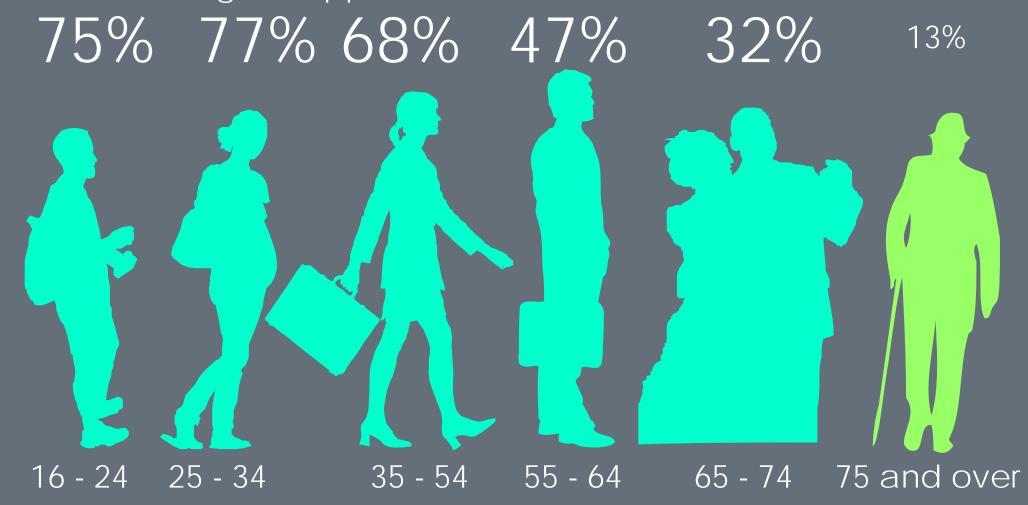


Which two or three of these, if any, would you find most useful to be able to do?

This was a closed question, with respondents allowed to give up to three answers from the given options indicated

Base: Adults aged 16+ in England (c. 1000 per wave)

...and again, there is more appetite among those under 55 for booking GP appointments online



Which two or three of these, if any, would you find most useful to be able to do?

% Book GP appointments online

Base: Adults aged 16+ in England, Winter 2013: 16 - 24 (139); 25 - 34 (169); 35 - 54 (335); 55 - 64 (155); 65 - 74 (119); 75 and over (99\*)

## Key points

- o Most people continue to use traditional methods of communication to consult their GP, with the majority consulting their GP face-to-face.
- o However, there has been a slow but steady increase in people contacting NHS services in new ways during the last two years. In particular, increasing numbers of people, especially younger ones, have received text reminders about appointments. There has also been a sharp increase in the proportion of people using the NHS 111 service.
- o The appetite to use such new methods is also slowly increasing. Around three quarters of people aged 16 to 34 would be keen to book GP appointments online.
- o The public are split as to the ease of providing feedback to the NHS.

# 8. Appendices

## Appendix A. Methodology

Ipsos MORI carried out 1,016 interviews among a representative sample of adults aged 16 and over living in 84 output areas (OAs) across the 9 Government Office Regions (GORs) of England.

The OAs were selected systematically from an ordered list. OAs were given a measure of size equal to the number of adults aged 16 and over present in the OA. The selection OAs was then made using probability of selection proportional to the OA's size and selected systematically "1 in N", with a random start location. All OAs within each GOR were sorted by ward and by demographic type (i.e. the percentage of people who were social grade A/B), with individual sampling points then selected at random.

Within each OA, quotas were set using the Office of National Statistics mid-year estimates for 2010 to reflect the profile of the areas in terms of age, sex, and work status.

At the analysis stage, data were weighted to the population profile in terms of age, sex, working status and GOR according to the ONS mid-year estimates for 2008.

All interviews were conducted face-to face and in-home, between 18 November and 16 December 2013.

Interviews were conducted using CAPI (computer-assisted personal interviewing), as were interviews in the spring 2013, winter 2012, spring 2012, winter 2011 and winter 2010 waves of this research. Interviews carried out in waves prior to winter 2010 were conducted using interviewer administered pen-and-paper interviewing.

#### Appendix B. Presentation and interpretation of the data

Where this report refers to figures for those "satisfied", this is an aggregate sum of those who say they are "very satisfied" and those who say they are "fairly satisfied". In turn, "dissatisfied" figures refer to an aggregate sum of those who say they are "very dissatisfied" and those who say they are "fairly dissatisfied".

References are also to "net" figures in this volume. This represents the balance of opinion on attitudinal questions, and provides a particularly useful means of comparing the results for a number of variables. In the case of a "net satisfaction" figure, this signifies the proportion of people satisfied about a particular issue minus the proportion of people who are dissatisfied. For example, if a question recorded results of 40% of people saying they are satisfied and 25% saying they are dissatisfied, the "net satisfaction" score would be +15 points.

Where percentages do not sum to 100, this may be due to computer rounding, the exclusion of "don't know" categories, or respondents being able to give multiple answers to the same question. Throughout the volume an asterisk (\*) denotes any value of less than half of one per cent but greater than zero.

It is worth bearing in mind that this survey deals with public perceptions at the time of the survey rather than facts; in particular, these perceptions may or may not accurately reflect levels and quality of service actually being delivered by the NHS.

#### Appendix C. Guide to statistical reliability

#### 1. How accurately does the survey reflect the views of the English population?

It should be remembered that a sample and not the entire population of adults living in the 9 GORs of England has been interviewed. In consequence, all results are subject to sampling tolerances, which means that not all differences between results are statistically significant. For example, for a question where 50% of the people in a weighted sample of 1016 respond with a particular answer, the chances are 95 in 100 that this result would not vary more than plus or minus three percentage points from the result that would have been obtained from a census of the entire population (using the same procedures). Indications of approximate sampling tolerances for this survey, and for surveys of smaller groups of respondents, are provided in the table below. As shown, sampling tolerances vary with the size of the sample and the size of the percentage results. This survey used a quota sampling approach. Strictly speaking the tolerances applied here apply only to random samples with an equivalent design effect. In practice, good quality quota sampling has been found to be as accurate.

Approximate sampling tolerances applicable to percentages at or near these levels					
	10% or 90%	30% or 70%	50%		
Size of sample on which survey result is based	±	±	±		
100 interviews	6	9	10		
200 interviews	4	6	7		
300 interviews	3	5	6		
400 interviews	3	5	5		
500 interviews	3	4	4		
600 interviews	2	4	4		
700 interviews	2	3	4		
800 interviews	2	3	4		
900 interviews	2	3	3		
1,016 interviews	2	3	3		

## Appendix C. Guide to statistical reliability (continued)

#### 2. Comparing the views of different groups within the sample surveyed

Different groups within a sample (e.g. men and women) may have different results for the same question. A difference has to be of a certain size in order to be statistically significant though. To test if a difference in results between two sub-groups within a sample is statistically significant one, at the 95% confidence interval, the differences between the two results must be greater than the values provided in the table below. Again, strictly speaking the sampling tolerances shown here apply only to random samples with an equivalent design effect. In practice, good quality quota sampling has been found to be as accurate.

Differences required for significance at or near these percentages				
	10% or 90%	30% or 70%	50%	
Size of sample on which survey result is based	±	±	±	
100 and 100	8	13	14	
100 and 200	7	11	12	
100 and 300	7	10	11	
100 and 400	7	10	11	
100 and 500	7	10	11	
200 and 200	7	10	11	
200 and 300	5	8	9	
200 and 400	5	8	9	
200 and 500	5	8	8	
300 and 300	5	7	8	
300 and 400	5	7	8	
300 and 500	4	7	7	
400 and 400	4	6	7	
400 and 500	4	6	7	
500 and 500	4	6	6	

#### Appendix C. Guide to statistical reliability (continued)

#### 3. Comparing the results from different waves of the survey

When looking at results to the same question from different waves of the survey, again, a difference has to be of a certain size in order to be statistically significant though. To test if a difference in results between two waves of the survey is statistically significant one, at the 95% confidence interval, the differences between the two results must be greater than the values provided in the table below. Again, strictly speaking the sampling tolerances shown here apply only to random samples with an equivalent design effect. In practice, good quality quota sampling has been found to be as accurate.

Differences required for significance at or near these percentages				
	10% or 90%	30% or 70%	50%	
Size of sample on which survey result is based	±	±	±	
1005 and 1016 (Spring 2013 and winter 2013 surveys)	3	4	4	

#### Appendix D. Guide to social classification

The following table contains a brief list of social grade definitions as used by the Institute of Practitioners in Advertising. These groups are standard on all surveys carried out by Ipsos MORI.

Social grade	Social class	Occupation of Chief Income Earner
А	Upper Middle Class	Higher managerial, administrative or professional
В	Middle Class	Intermediate managerial, administrative or professional
C1	Lower Middle Class	Supervisor or clerical and junior managerial, administrative or professional
C2	Skilled Working Class	Skilled manual workers
D	Working Class	Semi and unskilled manual workers
Е	Those at the lowest levels of subsistence	State pensioners, etc, with no other earnings

Appendix E. Sample profile: demographic details of respondents winter 2013

		Unweighted		Weighted	
Total		n 1016	% 100	n 1016	% 100
Gender	Male	523	52%	496	49%
	Female	493	49%	520	51%
Age	16-24	139	14%	151	15%
	25-34	169	17%	163	16%
	35-54	335	33%	353	35%
	55-64	155	15%	148	15%
	65+	218	22%	201	20%
Social class	AB	253	25%	258	25%
	C1	290	29%	293	29%
	C2	221	22%	228	22%
	DE	252	25%	237	23%
Work Status	Full-time	417	41%	438	43%
	Not full-time	599	59%	578	57%
Ethnicity	White	867	85%	883	87%
Black African/	'Caribbean/Black British	37	4%	33	3%
	Asian/Asian British	96	9%	84	8%
Mixed/multi	ple ethnic groups	9	1%	9	1%

#### Appendix F. Referenced reports

Where relevant, this report draws on research and data from other publications and this is clearly referenced. Here is a summary of these publications:

o Issues Index, Ipsos MORI

A representative sample of c.1,000 British adults age 18+ each month, interviewed face-to-face in home.

http://www.ipsos-mori.com/researchpublications/researcharchive/3316/EconomistIpsos-MORI-December-2013-Issues-Index.aspx

http://www.ipsos-mori.com/researchpublications/researcharchive/3337/Economistlpsos-MORI-January-2014-Issues-Index.aspx

In addition, where appropriate, this report compares results from this wave of the Public Perceptions of the NHS and Social Care Tracking survey with those obtained in previous waves of this survey. Key details of all previous waves of the survey are listed below.

- o Spring 2000: results are based on 1,046 interviews in 104 enumeration districts between 14 April and 7 May 2000.
- o Winter 2001: results are based on 1,021 interviews in 104 enumeration districts between 21 November and 10 December 2001.
- o Spring 2002: results are based on 1,041 interviews in 108 enumeration districts between 4 May and 5 June 2002.
- o Winter 2002: results are based on 1,002 interviews in 108 enumeration districts between 21 November and 24 December 2002.
- o Spring 2003: results are based on 1,000 interviews in 108 enumeration districts between 12 May and 8 June 2003.
- Winter 2003: results are based on 1,039 interviews in 104 enumeration districts between 18 November 2003 and 18 January 2004
- o Spring 2004: results are based on 1,031 interviews in 104 enumeration districts between 4 June and 6 July 2004.
- o Winter 2004: results are based on 994 interviews in 102 output areas between 13 November and 12 December 2004.
- o Spring 2005: results are based on 1,002 interviews in 101 output areas between 1 June and 7 July 2005.
- o Winter 2005: results are based on 1,041 interviews in 104 output areas between 12 November and 13 December 2005.
- o Spring 2006: results are based on 1,009 interviews in 129 output areas between 13 June and 9 July 2006.
- o Winter 2006: results are based on 1,011 interviews in 86 output areas between 10 November and 3 December 2006.
- o Spring 2007: results are based on 1,013 interviews in 87 output areas between 3 March and 2 April 2007.
- o Summer 2007: results are based on 1,026 interviews in 113 output areas between 22 June and 20 July 2007.

#### Appendix F. Referenced reports (continued)

- o Winter 2007: results are based on 1,011 interviews in 88 output areas between 12 November and 15 December 2007.
- Spring 2008: results are based on 1,036 interviews in 88 output areas between 10 March and 6 April 2008.
- o Summer 2008: results are based on 1,003 interviews in 88 output areas between 27 May and 23 June 2008.
- o Winter 2008: results are based on 1,003 interviews in 104 output areas between 17 November and 15 December 2008.
- o Spring 2009: results are based on 1,015 interviews in 104 output areas between 9 March and 5 April 2009.
- o Summer 2009: results are based on 1,039 interviews in 104 output areas between 25 May and 26 June 2009.
- Winter 2009: results are based on 1,008 interviews in 104 output areas between 12 November and 10 December 2009.
- Spring 2010: results are based on 1,006 interviews in 104 output areas between 22 February and 22 March 2010.
- Winter 2010: results are based on 1,011 interviews in 104 output areas between 22 November and 23 December 2010.
- o Winter 2011: results are based on 1,001 interviews in 104 output areas between 14 November and 9 December 2011.
- o Spring 2012: results are based on 1,015 interviews in 84 output areas between 4 and 31 May 2012.
- Winter 2012: results are based on 1,004 interviews in 134 output areas between 5 November and 16 December 2012.
- o Spring 2013: results are based on 1,005 interviews in 134 output areas between 20 May and 26 June 2013.



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