

Developing Indicators of Change in NHS Equity Performance

# Citizens' Panel Questionnaire

**Thank you for taking the time to  
complete this questionnaire**

**Your Name:** \_\_\_\_\_

*Your responses will be treated anonymously and your anonymity carefully protected*



## Part A - YOUR GENERAL VIEWS ON FAIRNESS

1. Suppose the government had to choose between the three options below. Which do you think it should choose?

PLEASE TICK ONE BOX

Reduce taxes and spend **less** on health, education and social benefits

Keep taxes and spending on these services at the **same** level as now

Increase taxes and spend **more** on health, education and social benefits

Don't know

2. It has been suggested the National Health Service should be available only to those with lower incomes. This would mean that contributions and taxes could be lower and most people would then take out private medical insurance or pay out of their own pocket for health care. Do you support or oppose this idea?

PLEASE TICK ONE BOX

Support this idea a lot

Support this idea a little

Oppose this idea a little

Oppose this idea a lot

Don't know

3. How much do you agree or disagree with this statement:

**The Government is doing enough to reduce differences in health between those on high incomes and those on low incomes**

PLEASE TICK ONE BOX

Agree strongly

Agree

Neither agree nor disagree

Disagree

Disagree strongly

Can't choose

#### 4. How much do you agree or disagree with these statements?

PLEASE TICK ONE BOX FOR EACH STATEMENT

	<i>Agree Strongly</i>	<i>Agree</i>	<i>Neither Agree Nor Disagree</i>	<i>Disagree</i>	<i>Disagree Strongly</i>
The creation of the welfare state is one of Britain's proudest achievements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think that richer patients generally receive higher quality NHS healthcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think that NHS staff sometimes intentionally give better treatment to richer patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS should try harder to reduce health inequalities between rich and poor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS should not try to reduce inequalities in healthcare outcomes caused by unhealthy lifestyles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS should try to reduce inequalities in healthcare outcomes caused by people not seeking care on time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS should invest more resources to ensure that the poor are as likely as the rich to use screening, vaccination and other preventative services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Government should redistribute income from the better-off to those who are less well off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Agree Strongly</i>	<i>Agree</i>	<i>Neither Agree Nor Disagree</i>	<i>Disagree</i>	<i>Disagree Strongly</i>

Please feel free to comment here to explain the reasons for your choices

**5. For each type of inequality, please indicate how unfair you think it is on a scale of 1 to 10, where 1 is not at all unfair and 10 is extremely unfair.**

*1 = not at all unfair*

*10 = extremely unfair*

- A. The richest fifth of people in England are more likely than the poorest fifth to have a healthy diet and a healthy level of physical exercise
- B. The richest fifth of people in England are served by more GPs than the poorest fifth
- C. The richest fifth of people in England are more likely than the poorest fifth to receive routine screening tests (e.g. for bowel cancer)
- D. The richest fifth of people in England are more likely than the poorest fifth to see a medical specialist when they are ill
- E. The richest fifth of people in England wait less time for NHS surgery than the poorest fifth
- F. The richest fifth of people in England are less likely than the poorest fifth to die after high-risk surgery (e.g. heart or cancer surgery)
- G. The richest fifth of people in England are less likely than the poorest fifth to have an emergency hospitalisation preventable by good quality healthcare
- H. The richest fifth of people in England are less likely than the poorest fifth to die from conditions preventable by good quality healthcare

*1 = not at all unfair*

*10 = extremely unfair*

Looking at the 8 statements A to H above, which type of inequality is the most unfair?  
Please enter the corresponding letter (A to H) in the right hand side box

Which type of inequality is the least unfair?  
Please enter the corresponding letter (A to H) in the right hand side box

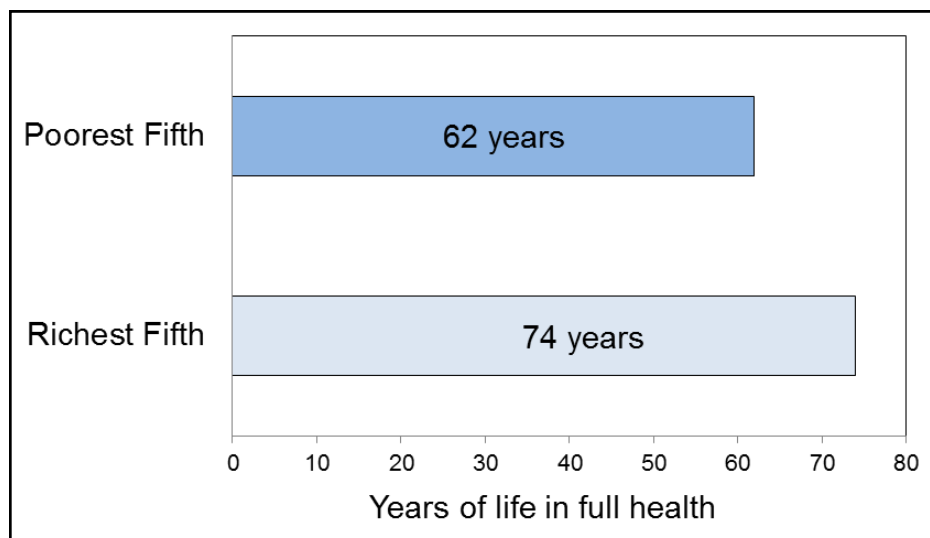
**Please feel free to use this space to make any comments.**

# INTRODUCTION TO THE TRADE OFF QUESTIONS

## PLEASE READ THROUGH THIS INFORMATION PAGE BEFORE COMPLETING THE QUESTIONS

There are differences between the richest fifth of people in England (e.g. doctors, lawyers, accountants and their families) and the poorest fifth of people in England (e.g. cleaners, shop assistants, the unemployed and their families) in terms of their length of life, income, health and access to healthcare. These two groups are equal in size.

Whilst actual length of life and health vary between individuals, on average, people in the richest fifth experience 74 years of life in full health and the poorest fifth experience 62 years of life in full health. Someone who has 74 years in full health might for example live to 80 years old, but in less than full health towards the end of their life.



**These are averages across the whole population of England. Each individual's actual length of life and health can of course vary considerably from these averages.**

# PART B - HEALTH INEQUALITY TRADE OFF 1 OF 4

Imagine that you are asked to choose between **two large government programmes** which will improve population health. Both programmes cost exactly the same.

## Who Benefits?

Programme	Population Group	Average lifetime gain per person
Programme A	Richest Fifth	+7 years per person
	Poorest Fifth	+3 years per person
Programme B	Richest Fifth	+3 years per person
	Poorest Fifth	+7 years per person

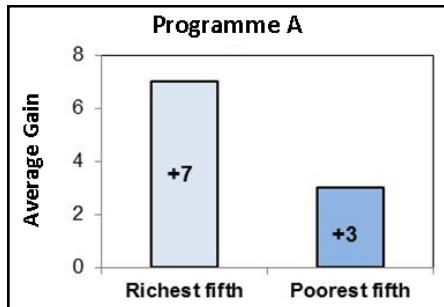
**These are gains in years of life in full health over the average person's lifetime. Some people will gain more than this, and some will gain less.**

When making a decision, it is important to remember the following:

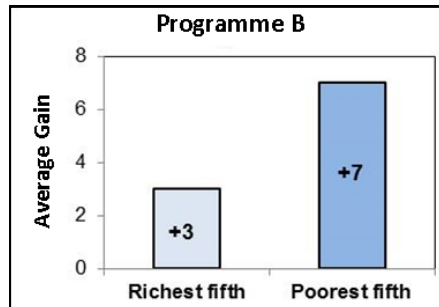
- ◆ We cannot pay for both programmes - a choice must be made
- ◆ "Equally good" means you don't mind which one is chosen
- ◆ Both programmes cost exactly the same
- ◆ The only difference between the programmes is the gain to the poorest and richest fifth
- ◆ The middle three fifths of the population are not affected

## Which programme should the government choose?

Average gain in years of life in full health  
(With resulting levels below)



Result: 81 years 65 years



Result: 77 years 69 years

Programme A

Programme A and B  
are equally good

Programme B

Please feel free to comment here to explain the reasons for your choices



Now imagine it is more difficult than we thought to benefit the poorest fifth.  
 For each of the following four comparisons please tick ONE box per comparison.

Average gain in years of life in full health

1.

Programme	Richest fifth	Poorest fifth
Programme A	+7	+3
Programme B	+3	+6

Result:        Result:

Programme A   
 Programme A and B are equally good   
 Programme B

2.

Programme	Richest fifth	Poorest fifth
Programme A	+7	+3
Programme B	+3	+5

Result:        Result:

Programme A   
 Programme A and B are equally good   
 Programme B

3.

Programme	Richest fifth	Poorest fifth
Programme A	+7	+3
Programme B	+3	+4

Result:        Result:

Programme A   
 Programme A and B are equally good   
 Programme B

4.

Programme	Richest fifth	Poorest fifth
Programme A	+7	+3
Programme B	+3	+3

Result:        Result:

Programme A   
 Programme A and B are equally good   
 Programme B

Please feel free to comment here to explain the reasons for your choices

# PART B - HEALTH INEQUALITY TRADE OFF 2 OF 4

Imagine that you are asked to choose between **two small NHS programmes** which will improve population health. Both programmes cost exactly the same.

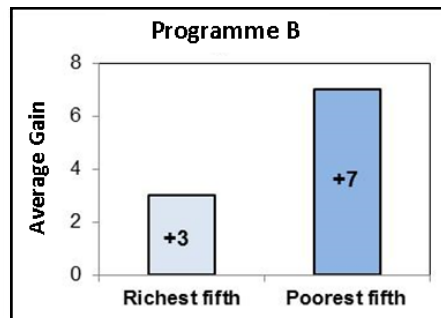
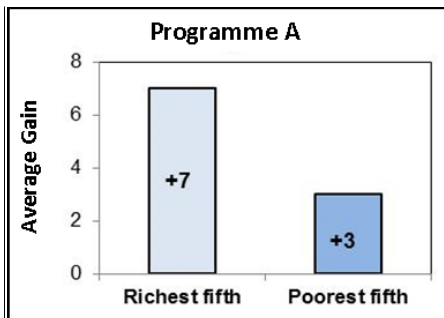
## Who Benefits?

Programme	Population Group	Average lifetime gain per person
Programme A	Richest Fifth	+7 hours per person
	Poorest Fifth	+3 hours per person
Programme B	Richest Fifth	+3 hours per person
	Poorest Fifth	+7 hours per person

These are gains in hours of life in full health over the average person's lifetime. These are average gains across a large population. Most people will gain nothing, but a few people will gain many years of life in full health.

## Which programme should the NHS choose?

Average gain in hours of life in full health



Programme A

Programme A and B  
are equally good

Programme B

Please feel free to comment here to explain the reasons for your choices

Now imagine it is more difficult than we thought to benefit the poorest fifth.  
 For each of the following four comparisons please tick ONE box per comparison.

Average gain in hours of life in full health

1.

**Programme A**

Group	Average Gain
Richest fifth	+7
Poorest fifth	+3

**Programme B**

Group	Average Gain
Richest fifth	+3
Poorest fifth	+6

Programme A

Programme A and B are equally good

Programme B

Average gain in hours of life in full health

2.

**Programme A**

Group	Average Gain
Richest fifth	+7
Poorest fifth	+3

**Programme B**

Group	Average Gain
Richest fifth	+3
Poorest fifth	+5

Programme A

Programme A and B are equally good

Programme B

Average gain in hours of life in full health

3.

**Programme A**

Group	Average Gain
Richest fifth	+7
Poorest fifth	+3

**Programme B**

Group	Average Gain
Richest fifth	+3
Poorest fifth	+4

Programme A

Programme A and B are equally good

Programme B

Average gain in hours of life in full health

4.

**Programme A**

Group	Average Gain
Richest fifth	+7
Poorest fifth	+3

**Programme B**

Group	Average Gain
Richest fifth	+3
Poorest fifth	+3

Programme A

Programme A and B are equally good

Programme B

Please feel free to comment here to explain the reasons for your choices

# PART B - HEALTH INEQUALITY TRADE OFF 3 OF 4

Imagine that you are asked to choose between **two small NHS programmes** which will improve population health. Both programmes cost exactly the same.

In this question we are looking at the benefit to large population groups as opposed to individuals. The two population groups are equal in size, with approximately 10 million people in the richest fifth group and 10 million people in the poorest fifth group.

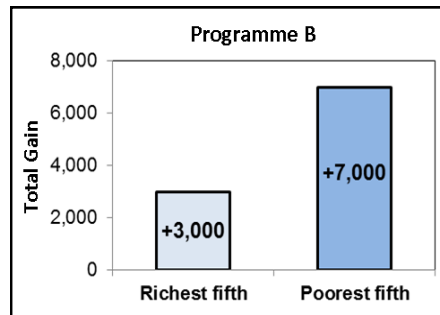
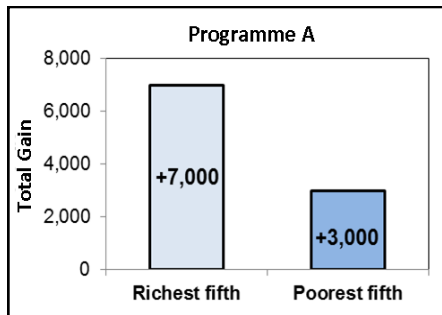
## Who Benefits?

Programme	Population Group	Total population gain
Programme A	Richest Fifth	+7,000 years for this group
	Poorest Fifth	+3,000 years for this group
Programme B	Richest Fifth	+3,000 years for this group
	Poorest Fifth	+7,000 years for this group

These are total gains in years of life in full health across a large population. Most people will gain nothing, but a few people will gain many years of life in full health.

## Which programme should the NHS choose?

Total population gain in years of life in full health



Programme A

Programme A and B are equally good

Programme B

Please feel free to comment here to explain the reasons for your choices

Now imagine it is more difficult than we thought to benefit the poorest fifth.  
 For each of the following four comparisons please tick ONE box per comparison.

Total population gain in years of life in full health

1.

**Programme A**

Group	Total Gain
Richest fifth	+7,000
Poorest fifth	+3,000

**Programme B**

Group	Total Gain
Richest fifth	+3,000
Poorest fifth	+6,000

Programme A

Programme A and B are equally good

Programme B

Total population gain in years of life in full health

2.

**Programme A**

Group	Total Gain
Richest fifth	+7,000
Poorest fifth	+3,000

**Programme B**

Group	Total Gain
Richest fifth	+3,000
Poorest fifth	+5,000

Programme A

Programme A and B are equally good

Programme B

Total population gain in years of life in full health

3.

**Programme A**

Group	Total Gain
Richest fifth	+7,000
Poorest fifth	+3,000

**Programme B**

Group	Total Gain
Richest fifth	+3,000
Poorest fifth	+4,000

Programme A

Programme A and B are equally good

Programme B

Total population gain in years of life in full health

4.

**Programme A**

Group	Total Gain
Richest fifth	+7,000
Poorest fifth	+3,000

**Programme B**

Group	Total Gain
Richest fifth	+3,000
Poorest fifth	+3,000

Programme A

Programme A and B are equally good

Programme B

Please feel free to comment here to explain the reasons for your choices

## PART B - HEALTH INEQUALITY TRADE OFF 4 OF 4

Imagine that you are asked to choose between **two small NHS programmes** which will encourage more people in their 60s to participate in the NHS bowel cancer screening programme. Programme A will send a standard reminder letter to everyone in their 60s. Programme B will send a special GP endorsed reminder letter just to the poorest fifth of people in their 60s who are least likely to participate. Both programmes cost exactly the same.

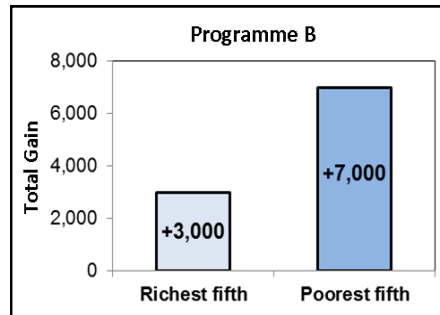
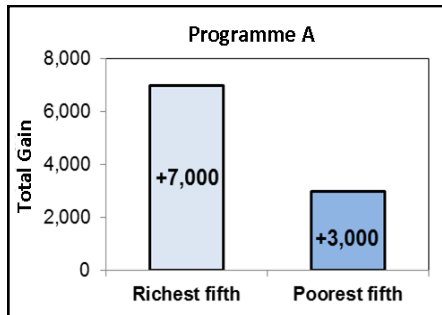
In this question we are looking at the benefit to large population groups as opposed to individuals. The two population groups are equal in size, with approximately 10 million people in the richest fifth group and 10 million people in the poorest fifth group.

Programme	Population Group	Total population gain
Programme A	Richest Fifth	+7,000 years for this group
	Poorest Fifth	+3,000 years for this group
Programme B	Richest Fifth	+3,000 years for this group
	Poorest Fifth	+7,000 years for this group

These are total gains in years of life in full health across a large population. Most people will gain nothing, but a few people will gain many years of life in full health. The people who gain many years of life in good health are those who have their bowel cancer detected earlier.

Which programme should the NHS choose?

Total population gain in years of life in full health



Programme A

Programme A and B are equally good

Programme B

Please feel free to comment here to explain the reasons for your choices

Now imagine it is more difficult than we thought to benefit the poorest fifth.  
 For each of the following four comparisons please tick ONE box per comparison.

1. **Total population gain in years of life in full health**

**Programme A**

Group	Total Gain
Richest fifth	+7,000
Poorest fifth	+3,000

**Programme B**

Group	Total Gain
Richest fifth	+3,000
Poorest fifth	+6,000

*Programme A*

*Programme A and B are equally good*

*Programme B*

2. **Total population gain in years of life in full health**

**Programme A**

Group	Total Gain
Richest fifth	+7,000
Poorest fifth	+3,000

**Programme B**

Group	Total Gain
Richest fifth	+3,000
Poorest fifth	+5,000

*Programme A*

*Programme A and B are equally good*

*Programme B*

3. **Total population gain in years of life in full health**

**Programme A**

Group	Total Gain
Richest fifth	+7,000
Poorest fifth	+3,000

**Programme B**

Group	Total Gain
Richest fifth	+3,000
Poorest fifth	+4,000

*Programme A*

*Programme A and B are equally good*

*Programme B*

4. **Total population gain in years of life in full health**

**Programme A**

Group	Total Gain
Richest fifth	+7,000
Poorest fifth	+3,000

**Programme B**

Group	Total Gain
Richest fifth	+3,000
Poorest fifth	+3,000

*Programme A*

*Programme A and B are equally good*

*Programme B*

Please feel free to comment here to explain the reasons for your choices