
Monitoring Fairness in the NHS



MONITORING FAIRNESS IN THE NHS

Welcome to our on-line survey in which we are seeking your views on fairness in the NHS. The survey should take about 10-15 minutes, and we hope you will find the questions interesting.

Your responses will be kept strictly anonymous and used only for research purposes.

Anyone can take part in the survey, whether or not you can join our Citizens' Panel event.

If you have any questions about completing the survey, or would like further details about how the information you provide will be used, please do not hesitate to e-mail Ruth Helstrip at ruth.helstrip@york.ac.uk.

Please click on the NEXT button below to start the survey.

You can navigate backwards and forwards within the survey and change your original responses at any time before pressing the final 'SUBMIT' button at the end.

PART A - YOUR GENERAL VIEWS ON FAIRNESS

These four questions are optional, but providing this information will help us to understand whether people of different ages, gender, geographical location and walks of life have different views.

Your responses will be kept strictly anonymous and used only for research purposes.

YOUR AGE

- Under 18
 18-34
 35-49
 50-64
 65+

YOUR GENDER

- Male
 Female

YOUR POSTCODE

YOUR OCCUPATION

PART A - YOUR GENERAL VIEWS ON FAIRNESS

PART A1 - YOUR GENERAL VIEWS ON FAIRNESS

How much do you agree or disagree with these statements?

	Agree Strongly	Agree	Neither Agree Nor Disagree	Disagree	Disagree Strongly
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"/>

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

PART A - YOUR GENERAL VIEWS ON FAIRNESS

PART A2 - YOUR GENERAL VIEWS ON FAIRNESS

Imagine the following types of inequality all involve a 20% difference 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). These two groups are equal in size.

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 20% more likely than the poorest fifth to have a healthy diet and a healthy level of physical exercise | <input type="text"/> |
| B. The richest fifth of people in England are served by 20% more GPs than the poorest fifth | <input type="text"/> |
| C. The richest fifth of people in England are 20% more likely than the poorest fifth to receive routine screening tests (e.g. for bowel cancer) | <input type="text"/> |
| D. The richest fifth of people in England are 20% more likely than the poorest fifth to see a medical specialist when they are ill | <input type="text"/> |
| E. The richest fifth of people in England wait 20% less time for NHS surgery than the poorest fifth | <input type="text"/> |
| F. The richest fifth of people in England are 20% less likely than the poorest fifth to die after high-risk surgery (e.g. heart or cancer surgery) | <input type="text"/> |
| G. The richest fifth of people in England are 20% less likely than the poorest fifth to have an emergency hospitalisation preventable by good quality healthcare | <input type="text"/> |
| H. The richest fifth of people in England are 20% less likely than the poorest fifth to die from conditions preventable by good quality healthcare | <input type="text"/> |

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)

Which type of inequality is the least unfair?

Please enter the corresponding letter (A to H)

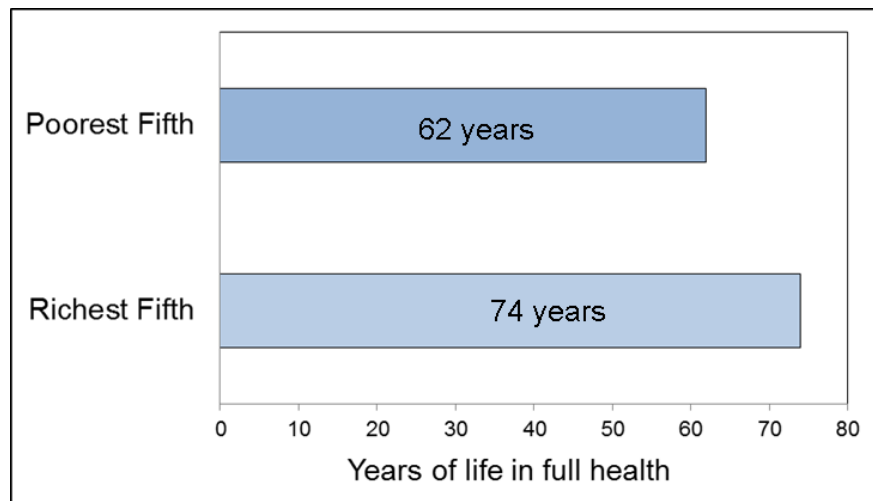
INTRODUCTION TO THE TRADE OFF QUESTIONS

PART B - TRADE OFF QUESTIONS

PLEASE READ THROUGH THIS INFORMATION SCREEN 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, 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 QUESTION 1

PART B - HEALTH INEQUALITY TRADE OFF QUESTION 1 OF 3

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

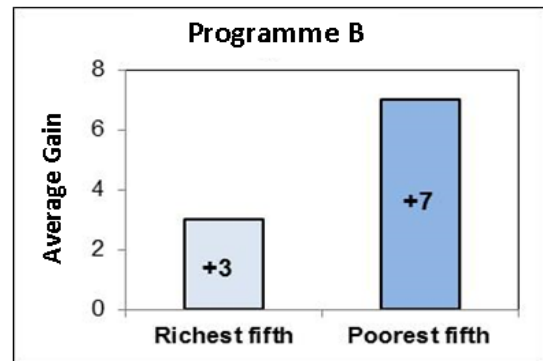
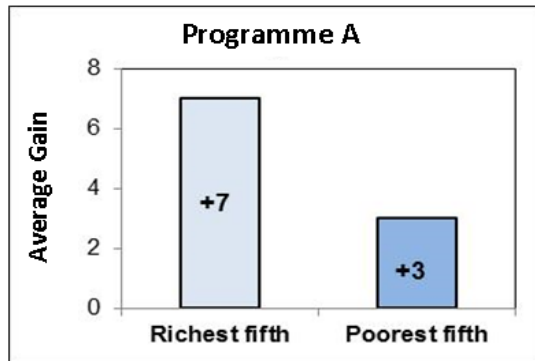
These are gains in years of life in full health over the average person's lifetime. Some people will gain more than this, and some will gain less.

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:

Result:

- Programme A
- Programme A and B are equally good
- Programme B

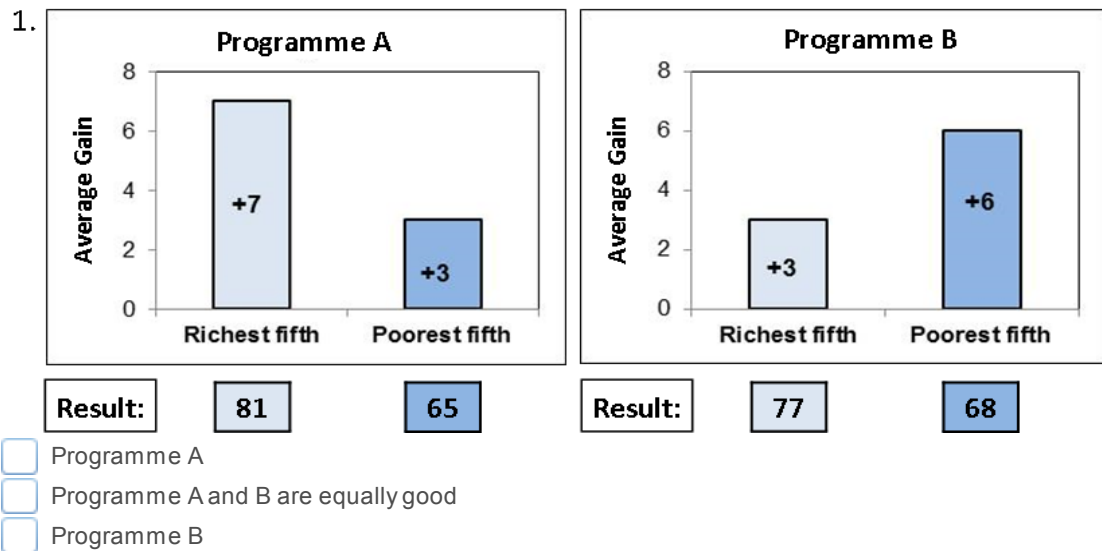
Please click ONE of the above options

Please feel free to comment below to explain the reasons for your choice

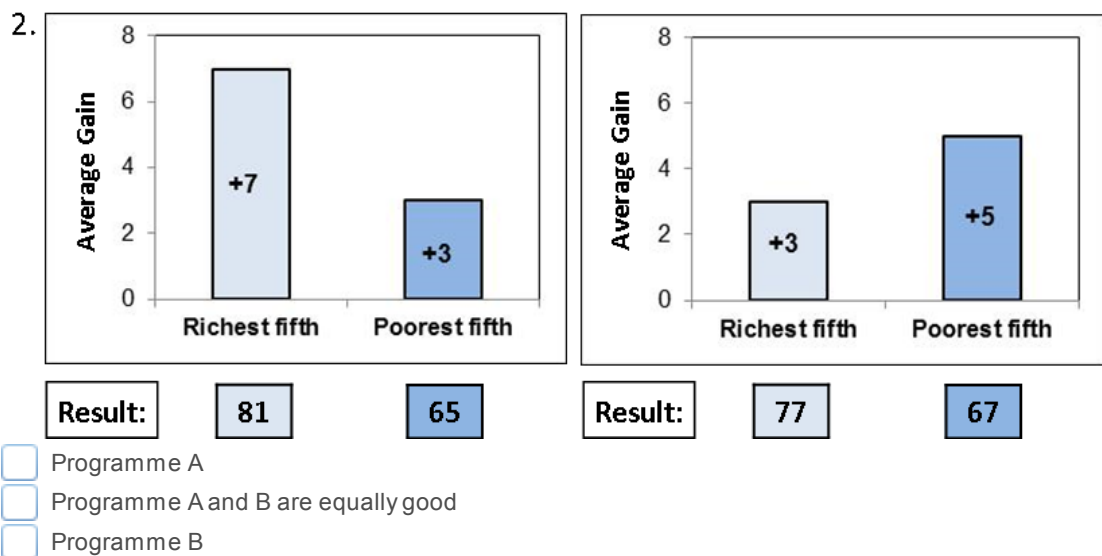
PART B - HEALTH INEQUALITY TRADE OFF QUESTION 1 OF 3

Now imagine it is more difficult than we thought to benefit the poorest fifth. For each of the following four comparisons please select your preferred option.

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

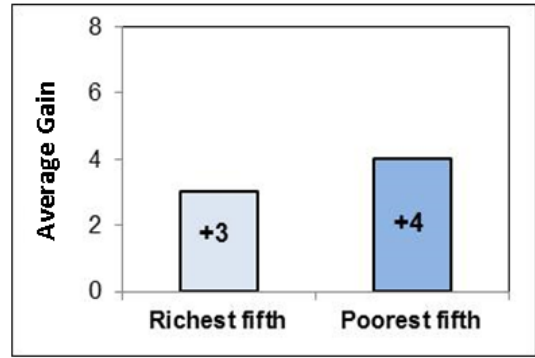
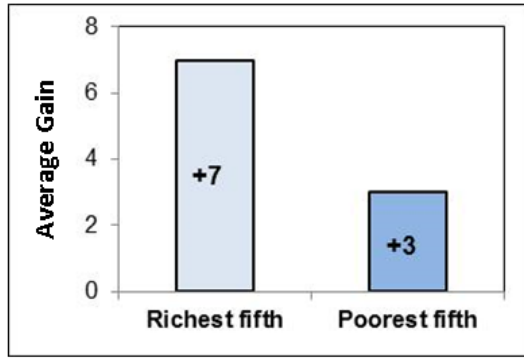


Average gain in years of life in full health (With resulting levels below)



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

3.



Result:

81

65

Result:

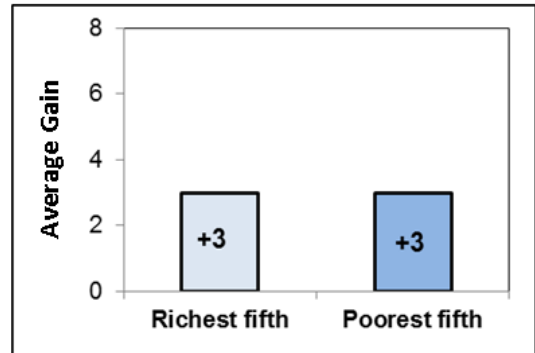
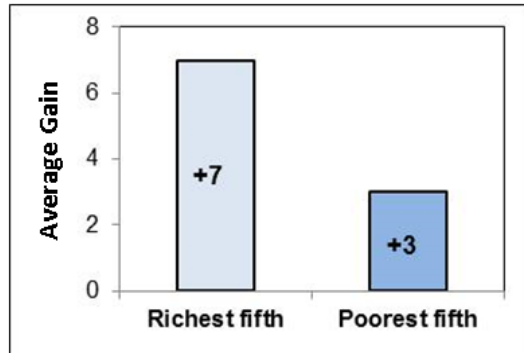
77

66

- Programme A
- Programme A and B are equally good
- Programme B

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

4.



Result:

81

65

Result:

77

65

- Programme A
- Programme A and B are equally good
- Programme B

If you like you can go back to the previous screen to remind yourself about the information.

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

PART B - HEALTH INEQUALITY TRADE OFF QUESTION 2 of 3

PART B - HEALTH INEQUALITY TRADE OFF QUESTION 2 OF 3

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

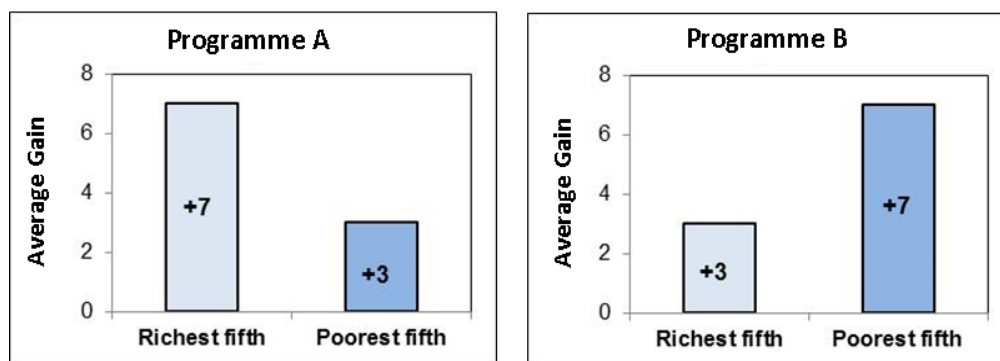
Who Benefits?

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 click **ONE** of the above options

Please feel free to comment below to explain the reasons for your choice

PART B - HEALTH INEQUALITY TRADE OFF 2 of 3

Now imagine it is more difficult than we thought to benefit the poorest fifth. For each of the following four comparisons please select your preferred option.

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

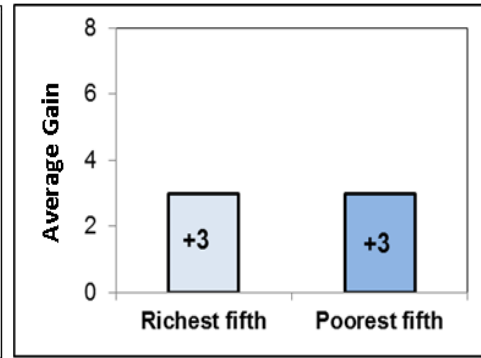
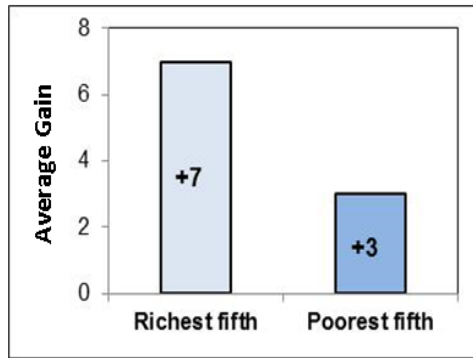
Programme B

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
 Programme A and B are equally good
 Programme B

If you like you can go back to the previous screen to remind yourself about the information.

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

PART B - HEALTH INEQUALITY TRADE OFF 3 of 3

PART B - HEALTH INEQUALITY TRADE OFF QUESTION 3 of 3

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.

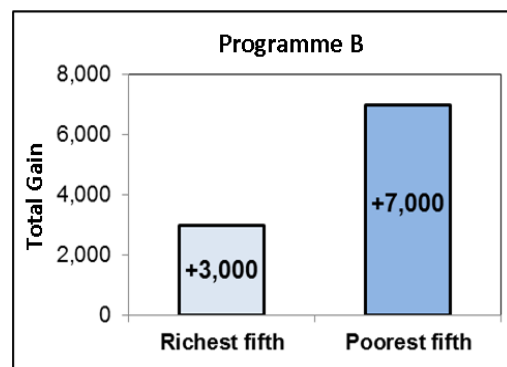
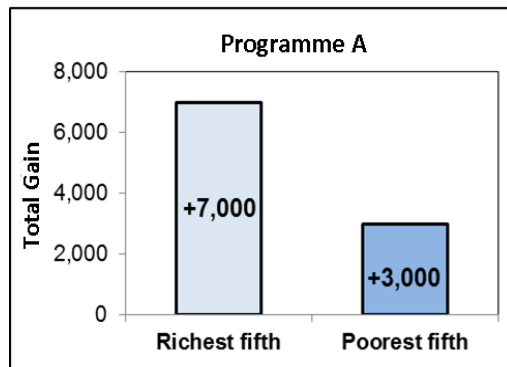
Who Benefits?

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 gain in years of life in full health



- Programme A
 Programme A and B are equally good
 Programme B

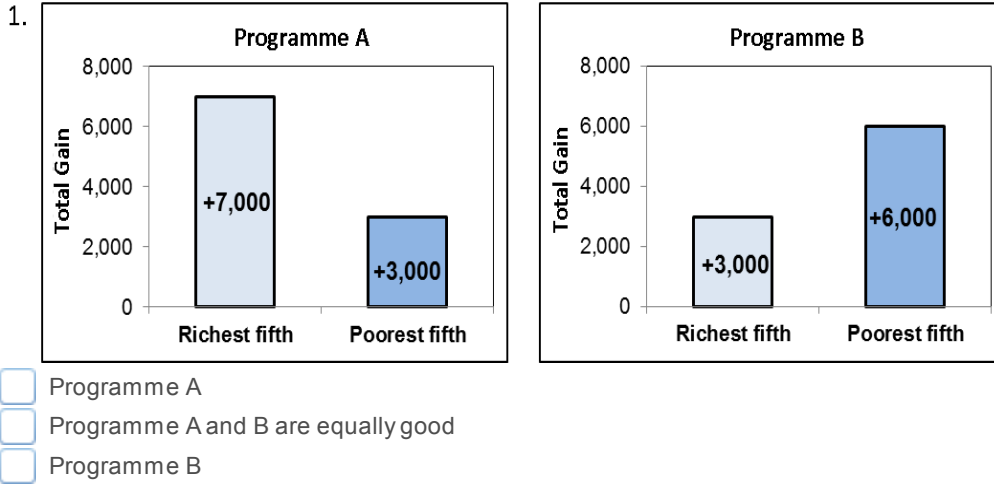
Please click **ONE** of the above options

Please feel free to comment below to explain the reasons for your choice

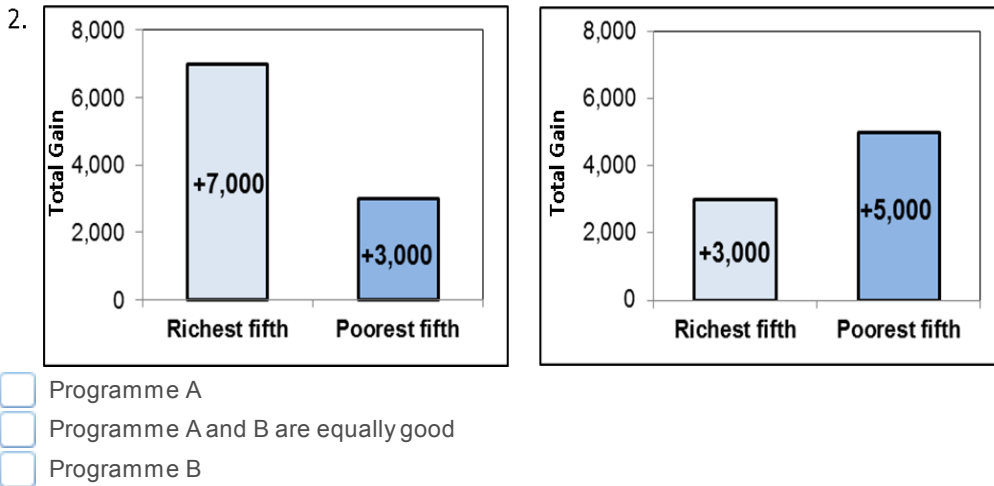
PART C - HEALTH INEQUALITY TRADE OFF 3 of 3

Now imagine it is more difficult than we thought to benefit the poorest fifth. For each of the following four comparisons please select your preferred option.

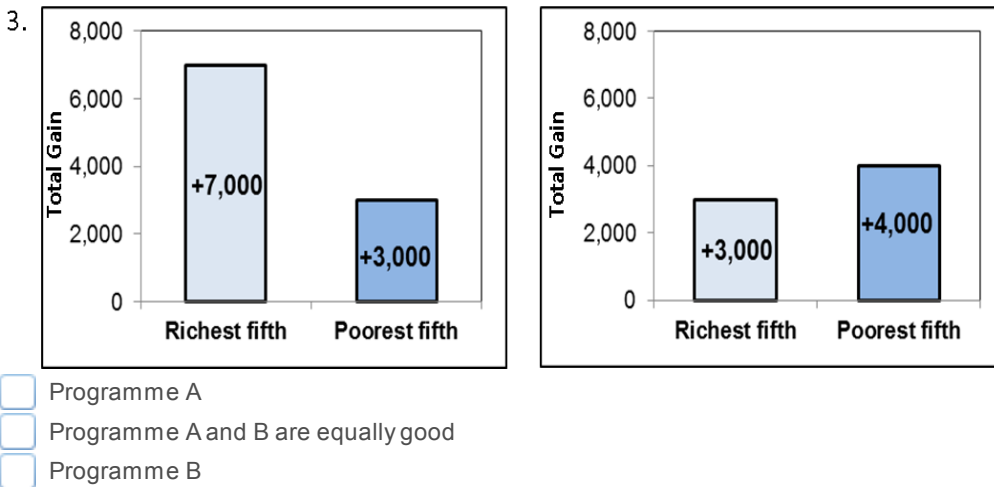
Total gain in years of life in full health



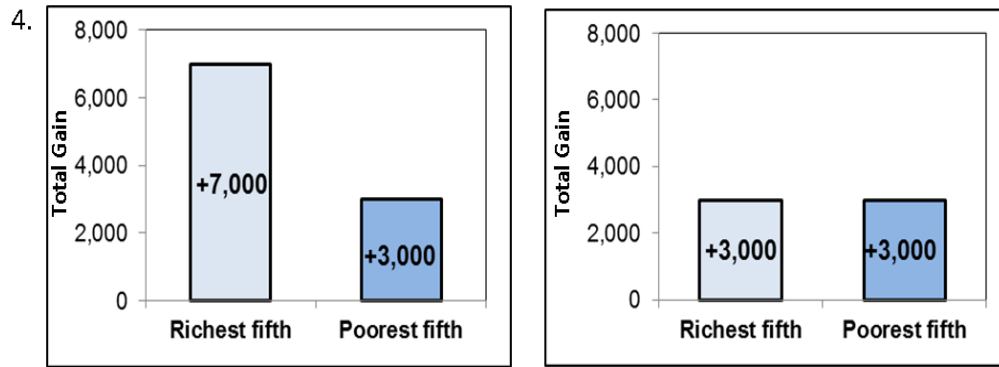
Total gain in years of life in full health



Total gain in years of life in full health



Total gain in years of life in full health



- Programme A
- Programme A and B are equally good
- Programme B

If you like you can go back to the previous screen to remind yourself about the information.

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

Please use this space to make any final comments

If you would like to receive a copy of the results, please leave your name and e-mail address below.

Name:

E-mail address: