

Article

# Measuring NHS experience and satisfaction across the UK

A summary of the cross-UK comparability of NHS experience and satisfaction data.

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# 1 . Main points

- The devolved nature of UK healthcare policy means that data on healthcare services, including official data on patient experience, are measured and recorded differently between England, Scotland, Wales, and Northern Ireland.
- Patient experience measures can provide cross-UK comparisons on some health themes, but are limited by differences in survey content, methods, and frequency.
- The percentage of respondents reporting positive overall experience of general practices (part of NHS primary care) showed a statistically significant decline in 2022 compared with previously published data in England (2021) and Scotland (2020); however, in Wales the percentage stayed relatively stable.
- Cancer patient experience data, on overall care, administration of care and information provided to family, show similar levels of reported patient experiences across the UK; however, data were collected at different time points across the UK.

## Collaboration

This article has been written by the [Office for National Statistics \(ONS\)](#) with the [Care Quality Commission \(CQC\)](#), [NHS England](#), the [Department of Health and Social Care \(DHSC\)](#), the [Scottish Government](#), the [Welsh Government](#), and the [Department of Health Northern Ireland \(DoH, NI\)](#).

This article is part of a cross-government approach to improve the coherence of NHS experience and satisfaction data. A joined-up statistical picture across the UK allows for deeper and wider insight, which helps users and policy makers in their decision making.

We are partnering with health bodies to advance improvements in statistical coherence of health data as outlined in our [Creating a coherent picture of health in the UK blog post](#). This article is part of a series of articles on health statistics. This partnership has already produced a [summary of ambulance response time data in the UK](#) (published on the Government Analysis Function website), and cross-UK explainer articles exploring [Accident and Emergency wait times across the UK](#) and [the healthcare workforce across the UK](#), published on the ONS website.

## 2 . How patient experience and satisfaction statistics are produced

Official statistics about NHS experience are collected and produced by [NHS England](#), [the Care Quality Commission \(CQC\)](#), [Public Health Scotland](#), [the Scottish Government](#), [the Welsh Government](#), [NHS Wales](#), [the Department of Health, Northern Ireland](#) and [Northern Ireland Public Health Agency](#).

NHS satisfaction statistics are produced by [The King's Fund](#) and [The Health Foundation](#).

The devolved nature of health policy and legislation in the UK leads to different approaches to healthcare across the four countries. Official data are collected to assess the services provided, based on the operational targets and priorities of the individual countries. This results in differences in the collection and production of health data and statistics.

There is strong support from health bodies across the UK to improve coherence of NHS experience statistics. Official data producers are working collaboratively to identify areas where it is feasible, and appropriate, to improve the comparability of patient experience statistics through a newly formed NHS experience theme group, which meets quarterly.

The group provides opportunities to review questions and plan schedules with other producers of NHS experience statistics, from across the UK. More information about this theme group and other health data theme groups is available on the [UK Health Statistics Steering Group \(UKHSSG\) page](#) of the Government Analysis Function website.

This article explores the published official statistics on NHS patient experience of primary care (GP patient experience) and one area of secondary care (cancer patient experience), which is the only secondary area with broadly comparable measures. The experience data produced by the four countries reflect patients' lived experiences of specific health services. It also discusses the availability and value of NHS satisfaction statistics, which reflect overall perceptions of the NHS. The information has been brought together to support users of these statistics.

### NHS experience statistics

Measuring patient experience allows data to be used to promote and improve patient-centred care by informing policy and practice development at both a national and local level.

These data measure patients' (and sometimes parents', families' and carers') experiences of the NHS services, healthcare professionals, and facilities they encounter during their care. They measure aspects of care received, communication, waiting times, treatment effectiveness, and interactions with staff.

GP experience and cancer patient experience data are explored in [Section 3: General Practitioner patient experience statistics](#), including the availability of data across the UK and an assessment of cross-UK comparability. Other patient experience data collected by each country can be found in [Section 9: Data sources and quality](#).

### 3 . General Practitioner patient experience statistics

Data are collected through surveys measuring a patient's experience with their General Practitioner (GP), including the care they receive, availability of appointments and levels of communication.

In England, the [GP Patient Survey \(GPPS\)](#) collects information on patients' experiences with GP practices, pharmacies and dental practices. This survey has been conducted annually since 2007. It was redesigned in 2018 and 2023 and these changes have an impact on the ability to make comparisons over time for some questions. For example, 2023 mode of appointment data cannot be compared with previous outputs.

In Scotland, the [Health and Care Experience \(HACE\) Survey](#) has collected data about experiences with GP practices every two years since 2009. This was previously known as the Scottish GP Patient Experience Survey.

In Wales, GP experience questions have been asked in the [National Survey for Wales](#). These questions were included on the first annual survey wave from 2012 to 2013, but GP experience questions are not asked every year.

In Northern Ireland, there have been no dedicated surveys measuring patients' experiences with primary care since a survey conducted in 2010 to 2011. However, questions asking about respondents' experience with GP services were included within the 2016 to 2017 and the 2023 to 2024 Health Surveys.

There are differences between the surveys in:

- question wording
- context and sequencing of the questions within surveys
- data collection methods
- respondents selected
- frequency of surveys

More details are provided in [Section 6: Survey and question design](#).

Despite these differences, data producers agree that there is value in making comparisons from a group of questions detailed in the following bullet-pointed paragraph. However, it is important to understand the differences outlined and consider whether these affect the suitability of data in specific user defined circumstances. Therefore, comparisons should be made cautiously and with these data collection differences in mind. In some situations, it will not be appropriate to compare between countries within specific demographic groups. For example, Scotland's sample includes those aged 17 years plus, compared with samples in England and Wales that include adults over the age of 16 years.

A review of questions asked across UK surveys identified questions which cover similar themes, and have the same or similar wording, these are:

- “overall experience” questions use similar wording across the UK
- “mode of appointment” questions use the same wording across GB (but is not asked in Northern Ireland)
- if the patient thought they had been “given enough time” and felt “they were listened to” questions use similar wording between England, Scotland and Northern Ireland (it is not asked in Wales)

For more information, [Section 6: Survey and question design](#) includes detailed question wording in each country. We have jointly assessed that there is value in comparisons of the data in the areas presented. The data is broadly comparable between countries. However, caution is advisable when making comparisons, as there are wider differences in the context of surveys, such as different data collection methodology.

## Overall experience with GP practices in the UK

England and Scotland data show a statistically significant drop in the percentage of respondents reporting positive ratings for overall GP experience in 2022, compared with their previously published data (England 2021 and Scotland 2020) (Figure 1).

In England, the percentage of patients reporting a positive overall experience of GP practices was stable, ranging from 82% to 84% between 2018 and 2021. However, the number of patients reporting a positive experience of GP practices show statistically significant decreases from 83% in 2021 to 72% in 2022.

In Scotland, a gradual decline in positive overall experiences of GP practices is shown between 2010 (90%) and 2020 (79%), with a statistically significant drop between the 2020 and the 2022 survey, to 67%.

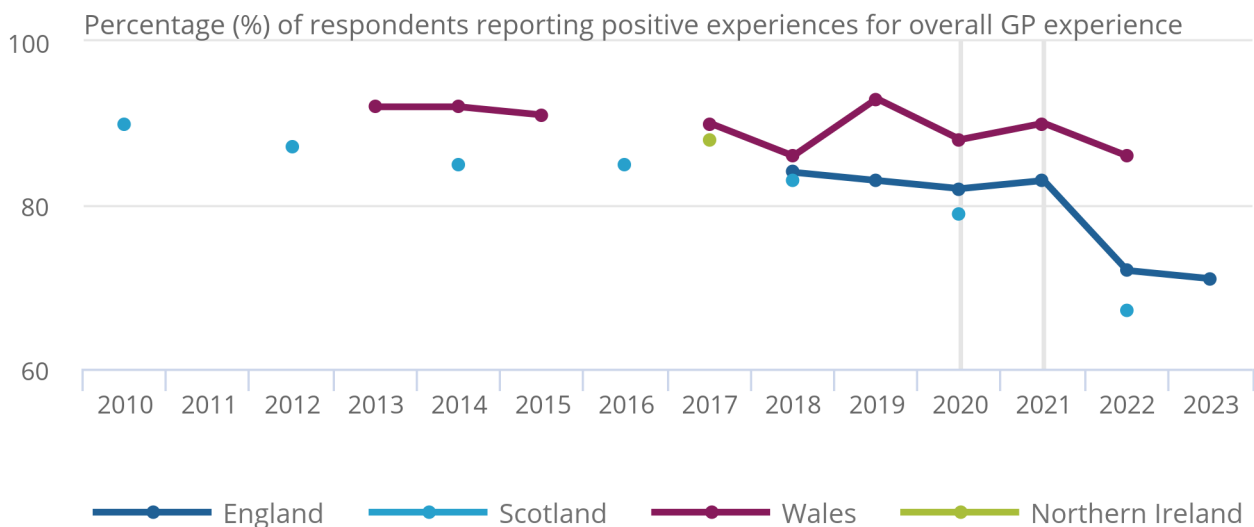
In Wales, the percentages reporting positive experiences were relatively stable between 2010 and 2020, ranging from 86% to 93%.

**Figure 1: The percentage of respondents reporting positive experiences for overall GP experience declined in England and Scotland in 2022**

Percentage of respondents reporting positive overall experience of GP services in the UK, 2010 to 2023

Figure 1: The percentage of respondents reporting positive experiences for overall GP experience declined in England and Scotland in 2022

Percentage of respondents reporting positive overall experience of GP services in the UK, 2010 to 2023



Source: GP Patient Survey from NHS England, HACE survey from the Scottish Government, National Survey from Wales and Health Survey from Northern Ireland

Notes:

1. Positive responses are classified as those in the top-two categories, for example, "very good" and "fairly good".
2. Where data reference periods span calendar years, such as 2019 to 2020, they are listed on the graph as the latter date (for example 2020 in the case of 2019 to 2020).
3. England: respondents were asked "Overall, how would you describe your experience of your GP practice?" The response options were: "very good", "fairly good", "neither good nor poor", "fairly poor" and "very poor".
4. Scotland: respondents were asked "Overall, how would you rate the care provided by your GP practice?" The response options were: "excellent", "good", "fair", "poor" and "very poor".
5. Wales: respondents were asked "Overall, how satisfied or dissatisfied were you with the care you received from your GP practice?" The response options were: "very satisfied", "fairly satisfied", "neither satisfied nor dissatisfied", "fairly dissatisfied" and "very dissatisfied".
6. Northern Ireland: respondents were asked "In general, how satisfied are you with the care you get at your GP surgery or health centre?" The response options were: "very satisfied", "fairly satisfied", "neither satisfied nor dissatisfied", "fairly dissatisfied" and "very dissatisfied".
7. There is only one data point for Northern Ireland for 2016 to 2017. GP services data for 2023 to 2024 will be released winter 2024.
8. Trend lines are only connected when the surveys are run on consecutive years.
9. The percentage of respondents reporting positive experiences for overall GP experience declined in England and Scotland in 2022 compared with previous published data, (Scotland 2020, England 2021)

## Mode of appointment

Mode of appointment statistics measure the type of interaction between a patient and GP and help us understand the patient's experience further. They are broadly similar across GB countries, but are not available for Northern Ireland.

The available data do not tell us about an individual's satisfaction with their mode of appointment.

There has been a change in the type of appointment, fewer have been conducted face-to-face since 2019 to 2020, since the onset of the coronavirus (COVID-19) pandemic:

- in England 85% of people had face-to-face appointments in 2020, compared with 48% in 2021
- in Scotland 87% of people had face-to-face appointments in 2019 to 2020, compared with 37% in 2021 to 2022
- in Wales 67% of people had face-to-face appointments in 2020 to 2021, compared with 50% in 2021 to 2022

## Assessing how good the healthcare professional was at listening and giving enough time

Broadly comparable statistics are published by England, Scotland and Northern Ireland on whether patients' healthcare professionals were good at listening and whether they gave enough time during GP appointments. The question is not asked in Wales. There are variations in survey frequencies and question wording (more information can be found in [Section 6: Survey and question design](#)) but comparisons of trends over time are possible.

For Scotland, prior to 2018 these data were collected but they were broken down by healthcare professional type. However, from 2018, the statistics refer to the last healthcare professional the patient saw, regardless of type. Therefore, they are not comparable with data prior to 2018.

Data are available for England between 2018 and 2023 (Figure 2), for Scotland between 2018 and 2022 and Northern Ireland for a single period in 2016 to 2017. Caution should be used when comparing data between countries, because of different data collection schedules. However, there is value in comparison of the trends over time. Over this period the percentage of patients reporting that they "felt listened to" was:

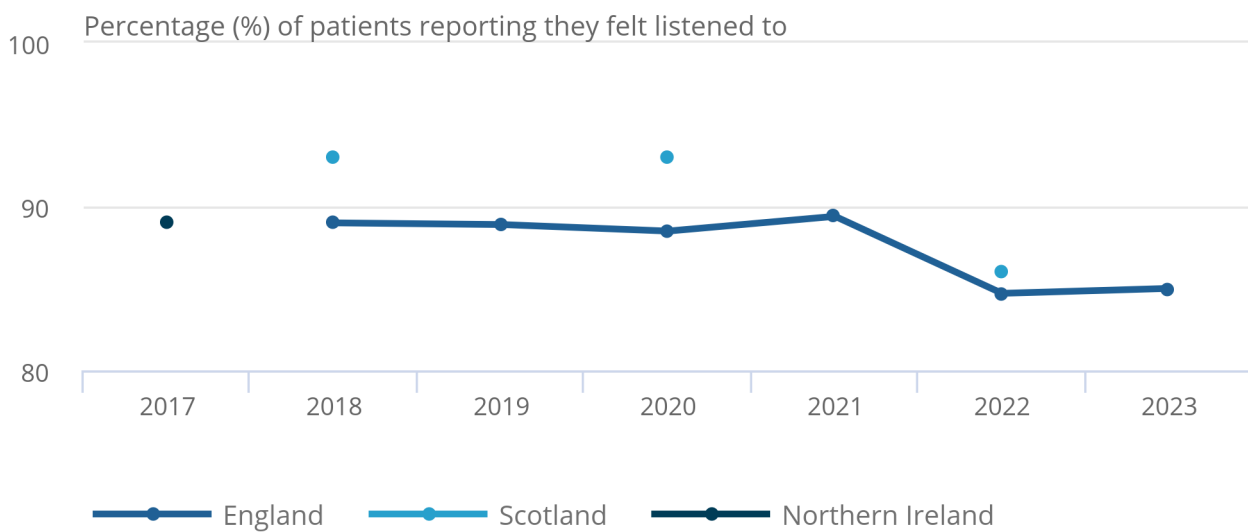
- between 85% and 89% in England
- between 86% and 93% in Scotland
- 89% in Northern Ireland

**Figure 2: In England and Scotland the percentage of patients reporting that they felt listened to remained stable between 2018 and 2022**

Percentage of patients reporting they felt listened to in England (2018 to 2023), Scotland (2018 to 2022) and Northern Ireland (2016 to 2017)

Figure 2: In England and Scotland the percentage of patients reporting that they felt listened to remained stable between 2018 and 2022

Percentage of patients reporting they felt listened to in England (2018 to 2023), Scotland (2018 to 2022) and Northern Ireland (2016 to 2017)



**Source: GP Patient Survey from NHS England, HACE survey from the Scottish Government and Health Survey from Northern Ireland**

**Notes:**

1. Where data reference periods span calendar years, such as 2019 to 2020, they are listed on the graph as the latter date (for example 2020 in the case of 2019 to 2020).
2. The chart includes the percentage of patients that gave a top-two box rating (for example very good and fairly good), against whether they were listened to in their last general practice appointment.
3. There is only one data point for Northern Ireland for 2016 to 2017. GP services data for 2023 2024 will be released in winter 2024.
4. Trend lines are only connected when the surveys are run on consecutive years.

The percentage of people reporting they felt they were "given enough time" in England, Scotland and Northern Ireland remained above 80%, across the same timeseries (Figure 3):





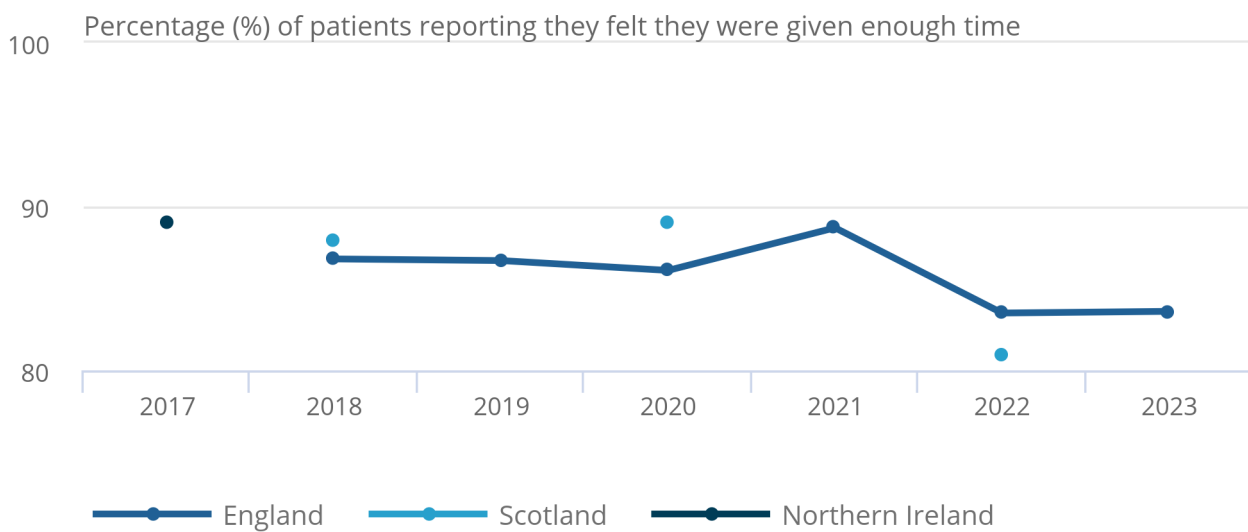
- in England between 83.5% and 88.7% felt they had enough time
- in Scotland between 81% and 89% felt they had enough time
- in Northern Ireland, 89% felt they had enough time

**Figure 3: In England, Scotland and Northern Ireland, the percentage of patients reporting they felt they were given enough time remained above 80%**

Percentage of patients reporting they felt they were given enough time in England (2018 to 2023), Scotland (2018 to 2022) and Northern Ireland (2016 to 2017)

Figure 3: In England, Scotland and Northern Ireland, the percentage of patients reporting they felt they were given enough time remained above 80%

Percentage of patients reporting they felt they were given enough time in England (2018 to 2023), Scotland (2018 to 2022) and Northern Ireland (2016 to 2017)



Source: GP Patient Survey from NHS England, HACE survey from the Scottish Government and Health Survey from Northern Ireland

**Notes:**

1. Where data reference periods span calendar years, such as 2019 to 2020, they are listed on the graph as the latter date (for example 2020 in the case of 2019 to 2020).
2. A positive response would be classified as a response of one of the top-two categories on the satisfaction scale. For example, in England, a positive response would be a response of either "very good" or "good".
3. For Scotland, prior to 2018 these data were collected but were broken down by healthcare professional type. From 2018, data refers to the last healthcare professional the patient saw, regardless of type. Therefore, it is not comparable with data prior to 2018.
4. There is only one data point for Northern Ireland for 2016 to 2017. GP services data for 2023 to 2024 will be released in winter 2024.
5. Trend lines are only connected when the surveys are run on consecutive years.

It is possible that future changes to these surveys will affect comparability.

## Opinions and Lifestyle Survey

The [Opinions and Lifestyle Survey \(OPN\)](#) has collected data on people's experiences of GP practice access since May 2023, from respondents across GB. Questions asked include "method of contact" and the "ease of making contact" with a GP practice. An OPN dataset, covering October 2023 to March 2024, has been published alongside this release. The specific questions that are included have varied (full details can be found in [Section 6: Survey and question design](#)).

Estimates for the period 18 October 2023 to 24 March 2024 show that across GB as a whole, 43% of those who tried to make contact with their GP practice in the past month for themselves, or others, found it was "very easy" or "easy" to make contact.

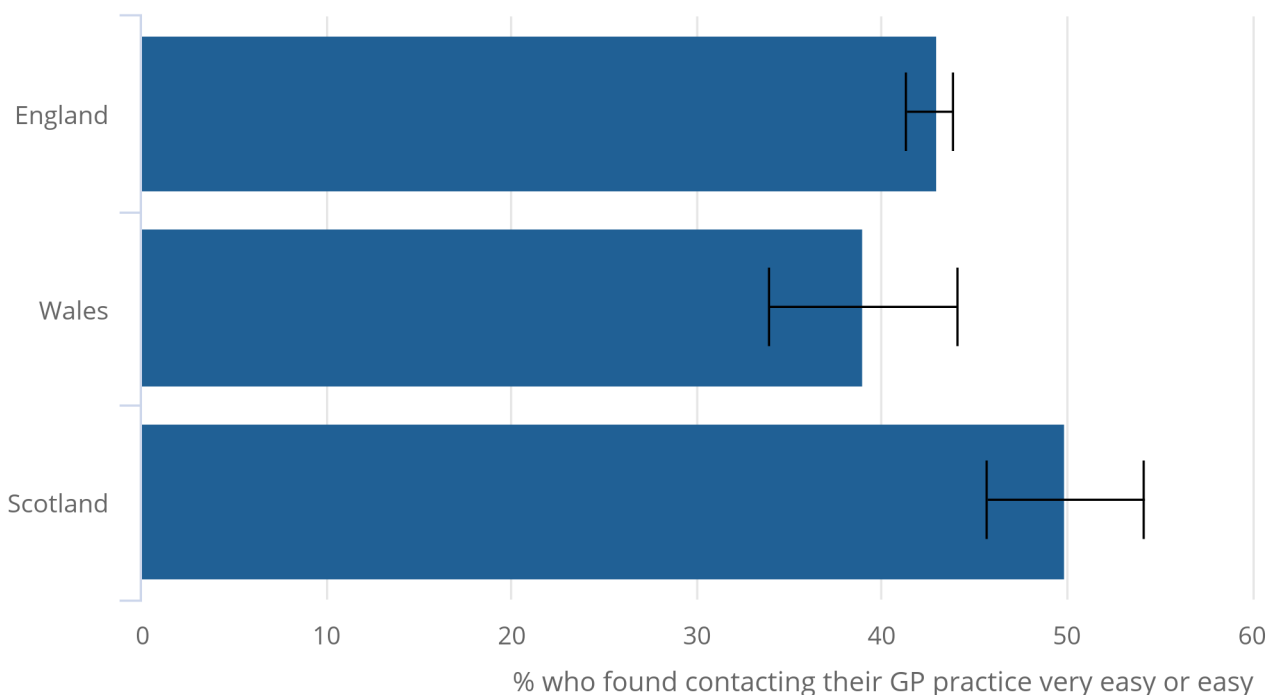
Of those who tried to make contact with their GP, statistically significantly more people in Scotland (50%) reported finding it "easy" or "very easy" to access their GP practice, than in England (43%) or Wales (39%). There was no significant difference between the proportion reporting this in England (43%) and Wales (39%) (Figure 4).

**Figure 4: More people in Scotland (50%) found it “very easy” or “easy” to contact their GP practice, than in England (43%) and Wales (39%)**

Percentage among adults who tried to contact their GP practice, who stated they found this “very easy” or “easy”, by country, October 2023 to March 2024

Figure 4: More people in Scotland (50%) found it “very easy” or “easy” to contact their GP practice, than in England (43%) and Wales (39%)

Percentage among adults who tried to contact their GP practice, who stated they found this “very easy” or “easy”, by country, October 2023 to March 2024



Source: Opinions and Lifestyle Survey from the Office for National Statistics

Notes:

1. Question: "How easy or difficult was it to make contact with the GP practice?"
2. Base: Among those who tried to contact a GP practice in the past month for themselves or someone else.
3. Each estimate has a lower and upper 95% confidence interval. These measure the statistical precision of an estimate and shows the range of uncertainty around the calculated estimate.

Where comparisons between OPN survey based estimates are made, associated [confidence intervals](#) have been used to assess the [statistical significance](#) of any differences between estimates. Confidence intervals and sample sizes are provided for all OPN estimates in the dataset provided with this release.

Estimates by country for the period 18 October 2023 to 1 January 2024 are also available in our [The impact of winter pressures on different population groups in Great Britain: GP practice access dataset](#). Estimates based on each individual fortnightly OPN collection are available at a GB level only in our [Public opinions and social trends, Great Britain: GP practice access dataset](#).

The content of the OPN changes over time to reflect emerging priorities, and as a result questions about respondents' GP experience may not feature in future waves.

## 4 . Cancer Patient Experience Surveys

Official statistics on cancer patient experience are published by [NHS England](#), [NHS Wales](#), [Northern Ireland Cancer Network](#) and the Scottish Government (links to the data for Scotland can be found in [Section 9: Data sources and quality](#)). Data are collected from surveys which are individually run by each country. These surveys have been designed to measure and understand patient experience of cancer care and treatment, to enable local monitoring leading to improvements.

While the methods used to collect data are similar across the UK, different schedules and the content of the surveys limit the ability to make direct comparisons between the countries. Therefore, only a subset of questions are broadly comparable and will be explored in this section.

### Cancer experience statistics

Dashboards that display cancer experience statistics are available for [England](#), [Wales](#), and Scotland (links to the data for Scotland can be found in [Section 9: Data sources and quality](#)). Statistics for Northern Ireland can be found on the [Northern Ireland Public Health Agency website](#).

Cancer experience statistics are broadly compared for three questions measuring overall care, administration of care, and information provided to family or friends during care.

## Overall care

All UK countries' cancer experience surveys include a question asking patients to rate the overall cancer care received out of 10 (full details can be found in [Section 6: Survey and question design](#)).

The different survey schedules across the UK and the format of reported data in Scotland, limit the ability to make comparisons across UK countries.

In England, the average ratings out of 10 for overall care remained relatively consistent between 2021 and 2022, at 8.9 in both years.

In Wales, the ratings also remained relatively consistent between 2016 and 2021, ranging from 8.9 to 8.7.

In Northern Ireland, this question was only included in the 2018 survey, with an average reported score of 8.8 (Table 1).

For Scotland, the same scale is used (0 to 10), but data are reported as the percentage of respondents scoring the most favourable responses (7 to 10). Scores remained relatively consistent with 94% of people answering with the most favourable response in 2015 and 95% in 2018.

Table 1: Reported cancer care experience ratings were within the range of eight and nine in England, Wales and Northern Ireland  
Average score, out of 10, for overall cancer care experience in England, Wales and Northern Ireland, 2016 to 2022

	2016	2018	2021	2022
<b>England</b>	[x]	[x]	8.9	8.9
<b>Wales</b>	8.9	[*]	8.7	[*]
<b>Northern Ireland</b>	[*]	8.8	[*]	[*]

Source: Cancer Patient Experience Surveys

### Notes

1. [\*] denotes no data available because the survey was not run that year.
2. [X] for England, in 2021 the cancer experience questionnaire underwent redevelopment, so it is not appropriate to present any trend comparisons between the 2021 to 2022 survey and prior years. This means the data is not comparable to earlier years.
3. For England, Wales, and Northern Ireland this is scored on a scale of 0 (very poor) to 10 (very good) and the average score is reported.

## Administration of care

Administration of care relates to aspects of patient experience such as receiving letters at the right time, doctors accessing the right notes and test results. One question that asked respondents to rate administration of care, was asked across the UK.

The available data show that, in all four UK countries, over 85% of respondents scored the most favourable responses ("very good" or "good"). Scores have been relatively stable over time for the countries collecting data over more than one year (Table 2).

Table 2: In the UK, the percentage of patients scoring "very good" or "good" for administration of care is above 85% in all countries

The percentage of patients scoring "very good" or "good" for administration of care in the UK, 2015 to 2022

	2015	2016	2018	2021	2022
<b>England</b>	[x]	[x]	[x]	88	87
<b>Scotland</b>	90	[*]	91	[*]	[*]
<b>Wales</b>	[*]	90	[*]	88	[*]
<b>Northern Ireland</b>	[*]	[*]	93	[*]	[*]

Source: Cancer Patient Experience Survey

### Notes

1. [\*] denotes no data available because the survey was not run that year.
2. [X] for England, in 2021 the cancer experience questionnaire underwent redevelopment, so it is not appropriate to present any trend comparisons between the 2021 to 2022 survey and prior years. This means the data is not comparable to earlier years.
3. Data for this question are presented as the percentage of respondents scoring "very good" or "good".



## Information given to the family, or someone close to the patient, to help provide care at home

Cancer experience surveys across the countries asked a question relating to the information given to the family or someone close to the respondent, to help them provide care at home. There were very slight differences in this question between the countries which are detailed in [Section 6: Survey and question design](#).

Across all four UK countries, the scores for these questions are consistently lower than ratings for overall care and administration of care (Table 3).

Table 3: The percentage of patients scoring the most favourable responses for information provided to family or someone close to help provide care at home varies, and is lower than ratings for overall care and administration of care

The percentage of patients scoring the most favourable responses for information provided to family or someone close to patient to help provide care at home, 2015 to 2022

	2015	2018	2021	2022
<b>England</b>	[X]	[X]	55	58
<b>Wales</b>	[*]	[*]	45	[*]
<b>Scotland</b>	57	52	[*]	[*]
<b>Northern Ireland</b>	66	65	[*]	[*]

Source: Cancer Patient Experience Survey

### Notes

1. [\*] denotes no data available because the survey was not run that year.
2. [X] for England, in 2021 the cancer experience questionnaire underwent redevelopment, so it is not appropriate to present any trend comparisons between the 2021 to 2022 survey and prior years. This means the data is not comparable to earlier years.
3. In Scotland, Wales and Northern Ireland, data for this question are presented as the percentage of respondents responding, "Yes, definitely." ,In England, data for this question are presented as the percentage of respondents responding, "Yes, they were given all the information they needed."

## 5 . Measures of NHS satisfaction

Some surveys collect information about people's overall satisfaction with the NHS. These questions differ from the patient experience sources described above, as they do not refer to specific NHS services. NHS satisfaction data may be influenced by respondents' direct experience of the NHS, but potentially also by broader perceptions.

### Official sources of NHS satisfaction statistics

There is not a single UK wide survey that produces official statistics on overall satisfaction with the NHS. The [Scottish Government](#), the [Welsh Government](#) and [Department of Health Northern Ireland](#) ask satisfaction questions on some versions of their national surveys. These can be used to look at trends over time within a country, however the questions are different and resulting statistics are not comparable.

Survey questions are laid out in [Section 6: Survey and question design](#).

## Other sources of NHS satisfaction statistics

The [Public Perceptions in Health and Social Care Survey](#) and the [British Social Attitudes Survey \(BSA\)](#) provide alternative sources of information about citizens' views on health services in general. These statistics are from non-official sources and are not required to be produced in line with the [Code of Practice for Statistics](#). More information on how they are produced can be found in [Section 6: Survey and question design](#) and [Section 9: Data sources and quality](#).

While these surveys provide either GB or UK wide estimates, at a country level (Scotland, Wales and Northern Ireland) there is greater uncertainty around the estimates. More information on uncertainty can be found in our [Uncertainty and how we measure it for surveys methodology](#).

## 6 . Survey and question design

### GP patient surveys

General Practitioner (GP) patient experience statistics are gathered through surveys in UK countries. The question wording for each country is outlined below, followed by details and methods of surveys for each country.

#### Overall GP experience

Data are broadly comparable across the UK for overall GP experience.

The wording of the question for England is:

"Overall, how would you describe your experience of your GP practice?"

The response options are:

- very good
- fairly good
- neither good nor poor
- fairly poor
- very poor

The wording of the question for Scotland is:

"Overall, how would you rate the care provided by your GP practice?"

The response options are:

- excellent
- good
- fair
- poor
- very poor

The wording of the question for Wales is:

"Overall, how satisfied or dissatisfied were you with the care you received from your GP practice?"

The response options are:

- very satisfied
- fairly satisfied
- neither satisfied nor dissatisfied
- fairly dissatisfied
- very dissatisfied

The wording of the question for Northern Ireland is:

"In general, how satisfied are you with the care you get at your GP surgery or health centre?"

The response options are:

- very satisfied
- fairly satisfied
- neither satisfied nor dissatisfied
- fairly dissatisfied
- very dissatisfied

## **Mode of appointment**

Some data are broadly comparable across GB for mode of appointment.

The wording of the question for England is:

"What type of appointment did you get?"

The response options are:

- speak to someone on the phone
- see someone at my GP practice
- see someone at another GP location
- speak to someone on a video call
- for a home visit
- message someone online or by text message

The wording of the question for Scotland is:

"The last time you needed an appointment at your GP practice, what type of appointment did you get?"

The response options are:

- face-to-face at general practice
- phone call
- home visit
- a video call
- email or instant message
- other
- I was not offered an appointment

The wording of the question for Wales is:

"For this appointment, did you go to the practice in person or was the appointment by telephone or video call?"

The response options are:

- face-to-face
- telephone
- video call
- don't know

This question is not asked in Northern Ireland.

### **Whether the patient felt listened to and given enough time**

Data are broadly comparable in England, Scotland and Northern Ireland for questions about whether the patient felt listened to and if they were given enough time.

The wording of the question for England is:

"Last time you had a general practice appointment, how good was the healthcare professional":

- at listening to you
- at giving you enough time

The response options are:

- very good
- good
- neither good nor poor
- poor
- very poor

The wording of the question for Scotland is:

"Thinking about that healthcare professional, how much do you agree or disagree with the following statements?":

- I was listened to
- I was given enough time

The response options are:

- strongly agree
- agree
- neither agree nor disagree
- disagree
- strongly disagree

The wording of the question for Northern Ireland is:

"Last time you saw a healthcare professional at your GP surgery or health centre, how good were they at each of the following?":

- listening to you
- giving you enough time

The response options are:

- very good
- good
- neither good nor poor
- poor
- very poor

This question is not asked in Wales.

## **The GP Patient Survey, England**

NHS England produce and publish official statistics from the [GP Patient Survey \(GPPS\)](#), on an annual basis. For each publication year, data collection occurs between January and March and outputs are published in July.

Adults registered with a GP, aged 16 years and over, are selected to take part. Until 2022, data collection was through a postal or online survey. From 2023, participants were contacted by letter, with data collection initially online. Respondents are asked to complete a paper survey if they have not responded to the first two requests to take part.

## **The Health and Care Experience Survey, Scotland**

The [Health and Care Experience Survey \(HACE\)](#) is produced and published by the Scottish Government in partnership with Public Health Scotland every two years. Data collection typically occurs from October to December and statistics are published in May. The sample is selected from those aged 17 years and over, living in a Scottish postcode, and registered with a GP.

Potential respondents are asked to complete an online survey in a letter received by post, a paper questionnaire is included in the reminder letter. The survey can also be completed by telephone, or through a language line, which provides interpretation and translation services.

## **The National Survey for Wales**

The [National Survey](#) is conducted by the Welsh Government annually, and covers a wide range of topics including NHS experience. Data are collected continuously between April and March, with a yearly output published in July. A household sample is selected from the [Royal Mail Postcode Address File](#), and one adult aged over 16 years completes the survey.

Data are collected in two-stages. The first stage of the survey is conducted by telephone or in person. Participants are then asked to complete an online survey.

The National Survey for Wales also collects data related to NHS satisfaction.

## **The Health Survey, Northern Ireland**

A GP patient survey is not currently produced for Northern Ireland. However, a GP module was included in 2016 to 2017 and 2023 to 2024 within the [Health Survey](#).

## Opinion and Lifestyles Survey

The [Opinions and Lifestyle Survey \(OPN\)](#) is a fortnightly survey that collects data from individuals (aged 16 years or older) in GB. It has collected data on GP experience access since May 2023, including GP contact methods and ease of making contact with a GP. The questions included vary but have included:

"In the past month, have you tried to contact a GP practice for yourself or someone else?"

"How easy or difficult was it to contact the GP practice?"

"Thinking of the last time you tried to contact a GP practice, did you manage to make contact with them?"

"Thinking of the last time you contacted a GP practice, how did you make contact?"

"Thinking of the last time you made contact with a GP practice, what did you understand the next step was?"

## Cancer Patient Experience Surveys

The Cancer Patient Experience Surveys (CPES) are conducted across all UK countries. Data are broadly comparable for England, Wales, and Northern Ireland.

The CPES are administered in similar ways for England, Wales, Scotland and Northern Ireland, using a quantitative postal questionnaire, with an option to complete the questionnaire online. Despite similarities, there are minor differences across all countries in the timing of when people are asked to participate in the surveys, question inclusion, question wording and the sample definitions, when comparing Scotland and the other UK countries.

Broadly comparable UK data are available from three questions:

"Overall, how would you rate your care?"

"Overall, how would you rate the administration of your care (getting letters at the right time, doctors having the right notes and test results)?"

The wording varies slightly for the third question. In England, the wording is:

"Did the team looking after you give your family, or someone close to you, all the information needed to help care for you at home?"

In Wales and Scotland the wording is:

"Did the healthcare professionals give your family or someone close to you, all the information needed to help care for you at home?"

In Northern Ireland the wording is:

"Did the doctors or nurses give your family or someone close to you all the information needed to help care for you at home?"

## National Cancer Patient Experience Survey, England

NHS England produce and publish data from the [National Cancer Patient Experience Survey](#) annually. Data are collected from adults aged 16 years and over, with a confirmed primary diagnosis of cancer. They must have been discharged from an NHS trust after an inpatient episode of day case attendance for cancer related treatment during the sampling months. NHS England also conduct an [Under 16s Cancer Experience Survey](#).

## Scottish Cancer Patient Experience Survey, Scotland

The Scottish Government [produced and published cancer patient experience data](#) in 2015 and 2018, and data collection is in progress for 2024. The survey is run in partnership with Public Health Scotland and Macmillan Cancer Support.

The survey respondents are adults who had an inpatient hospital mention of cancer (not specifically a primary diagnosis) over a nine-month period (January to September), and a confirmed cancer diagnosis over a different nine-month period (July to March). This sample criteria are different for England, Wales and Northern Ireland.

## Wales Cancer Patient Experience Survey

The Welsh Cancer network (part of the NHS Executive for Wales) working with Macmillan Cancer Support has commissioned the [Wales Cancer Patient Survey](#) in 2013, 2016 and 2021.

The survey selects adults over 16 years of age, with a confirmed primary diagnosis of cancer that have attended hospital as an inpatient or outpatient.

## Northern Ireland Cancer Patient Experience Survey

The [Northern Ireland Cancer Patient Experience Survey \(NICPES\)](#) was developed in partnership by Macmillan Cancer Support, the Public Health Agency (PHA), the Health and Social Care Board and all five Health and Social Care Trusts. It was conducted NICPES in 2015 and 2018.

The survey selects adults over 16 years of age, with a confirmed primary diagnosis of cancer that have attended hospital as an inpatient or outpatient.

## NHS satisfaction statistics

### National Survey for Wales

The [National Survey for Wales](#) is conducted by the Welsh Government annually and covers a wide range of topics, including NHS satisfaction and GP Patient Experience (see [Section 3: GP patient experience statistics](#) and more details in [Section 9: Data source and quality](#)). NHS satisfaction with health services was last asked in 2020 to 2021.

The question wording for Wales is:

"Please say what you think overall about the state of health services in Wales nowadays?"

The results are presented as an average response on a scale of 1 to 10.

### Scottish Household Survey, Scotland

The [Scottish Household Survey \(SHS\)](#) is conducted by the Scottish Government annually and provides data on the composition, characteristics, attitudes and behaviour of private households and individuals. Satisfaction with local health services was last asked in [the survey in 2022](#).

The question wording for Scotland is:

"Overall, how satisfied or dissatisfied are you with each of these services? Local Health Services."

Data for Scotland are presented as the percentage of respondents indicating they are "very satisfied" or "satisfied".

### Northern Ireland Health Survey

The [Northern Ireland Health Survey](#) is conducted by the Department of Health, Northern Ireland annually. It provides data on a range of health topics, including overall satisfaction with the Health and Social Care (HSC), the Northern Ireland equivalent of the NHS. HSC satisfaction was last asked in 2023 to 2024.

The question wording for Northern Ireland is:

"Thinking about the wider Health and Social Care system, how satisfied or dissatisfied were you with the overall experience you received during the last year?"

The data for Northern Ireland are presented as the percentage of respondents indicating they are "very satisfied" or "satisfied".



## British Social Attitudes Survey

The [British Social Attitudes Survey \(BSA\)](#) asks a representative sample of the population in GB what it is like to live in Britain and what they think about how Britain is run.

From 1983 until 2019 the survey was conducted via face-to-face interviews. Since 2020, it has taken place primarily online with a telephone option available.

The King's Fund and the Nuffield Trust jointly sponsored the 2023 BSA.

## Public Perceptions in Health and Social Care Survey

The [Public Perceptions in Health and Social Care Survey](#) asks a representative sample of the UK, selected using Ipsos' random probability online panel every six months. All responses are gathered online.

There have been four waves: November to December 2021, May to June 2022, November 2022 and May 2023.

# 7 . Measuring NHS experience and satisfaction across the UK data

[The impact of winter pressures on different population groups in Great Britain: GP practice access, 18 October 2023 to 21 March 2024](#)

Dataset | Released 30 May 2024

Indicators from the Winter Survey related to GP practice access, with breakdowns by different population groups.

## 8 . Glossary

### NHS experience statistics

NHS experience statistics reflect patients' lived experiences of specific health services. They are published and managed separately across the devolved administrations and health bodies. As a result, each country publishes different statistics based on their own priorities. For a list of the main outputs for each country, please see [Section 9: Data sources and quality](#).

### NHS satisfaction statistics

NHS satisfaction statistics are collected about people's overall satisfaction with the NHS. These questions differ from the patient experience sources, as they do not refer to specific NHS services. NHS satisfaction data may be influenced by respondents' direct experience of the NHS, but potentially also by broader perceptions. For a list of the main outputs for each country, please see [Section 9: Data sources and quality](#).

## 9 . Data sources and quality

### Official statistics on NHS experience

- England's [GP Patient Survey \(GPPS\)](#) features official statistics published annually by NHS England.
- Scotland's [Health and Care Experience Survey \(HACE\)](#) is produced and published every two years by the Scottish Government in partnership with Public Health Scotland.
- The [National Survey for Wales](#) is conducted by the Welsh government annually.
- In Northern Ireland there is currently no GP patient survey, but a GP module featured in their Health Survey in 2016 to 2017 and 2023 to 2024
- The [Opinion and Lifestyles Survey \(OPN\)](#) has collected data on GP practice access for GB since May 2023

## Cancer Patient Experience Surveys

- England's [National Cancer Patient Experience Survey](#) is produced by NHS England annually
- Scotland's [Scottish Cancer Patient Experience Survey](#) was produced and published by the Scottish Government, Public Health Scotland and Macmillan Cancer Support in 2015 and 2018, and data collection is in progress for 2024
- Dashboards are available which include: the [Overall Cancer Patient Experience Survey, response rates and demographic information, summary statistics, positive, negative and neutral highlights, comparisons of positive results](#) and [movement of patients receiving care](#)
- The [Wales Cancer Patient Experience Survey](#) is commissioned by the Welsh Cancer network (part of the NHS Executive for Wales) and Macmillan Cancer Support
- The [Northern Ireland Cancer Patient Experience Survey \(NICPES\)](#) was developed in partnership by Macmillan Cancer Support, the Public Health Agency (PHA), the Health and Social Care Board and all five Health and Social Care Trusts

## NHS satisfaction surveys

- The [National Survey for Wales](#) is conducted by the Welsh Government annually
- The [Scottish Household Survey \(SHS\)](#) is conducted by the Scottish Government annually
- The [Health Survey Northern Ireland](#) is conducted by the Department of Health, Northern Ireland annually
- The [British Social Attitudes Survey \(BSA\)](#) is jointly sponsored by The King's Fund and Nuffield Trust
- The [Public Perceptions in Health and Social Care Survey](#) is conducted by Ipsos' random probability online panel

## NHS experience statistics

The main outputs for England are:

- the [GP Patient Survey \(GPPS\)](#) (NHS England)
- the [Cancer Patient Experience Survey \(CPES\)](#) (NHS England)
- the [U16 Cancer Experience Survey \(NHS England\)](#)
- the [Adult Inpatient Survey](#) (CQC)
- the [Child and Young People's Patient Survey](#) (CQC)
- the [Community Mental Health Survey](#) (CQC)
- the [Urgent and Emergency Care Survey](#) (CQC)
- the [Maternity Survey](#) (CQC)
- the [National Diabetes Experience Survey \(NHS England\)](#)

The main outputs for Scotland are:

- the [Health and Care Survey \(HACE\)](#)
- the [Cancer Patient Experience Survey \(CPES\)](#)
- the [Inpatient Experience Survey \(IPES\)](#)
- the [Maternity Care Survey \(MCS\)](#)

The main outputs for Wales are:

- the [National Survey for Wales](#) (which encompasses GP services, Ambulance Services, Hospital Services, Social Services, Dental Services and other, non-GP primary services)
- the [Cancer Patient Experience Survey \(CPES\)](#)
- the [Time to Talk Public Health](#)
- the [Maternity Care Survey](#)

The main outputs for Northern Ireland are:

- the [Cancer Patient Experience Survey \(CPES\)](#)
- the [Northern Ireland Health Survey](#) which encompasses a wide range of health-related topics and services

More information on [uncertainty](#) and [significance testing](#) and how we measure it is available in our website.

## 10 . Related links

### [Bringing together statistics from across the UK](#)

Methodology | Last updated 2024

Publications and guidance about bringing together comparable statistics on a range of topic areas.

### [Health and care statistics](#)

Web page | Last updated May 2023

This Government Statistical Service web page sets out information and signposts to resources for users on health and care statistics in the UK.

### [The United Kingdom Health Statistics theme groups](#)

Web page | Last updated 2024

This Government Statistical Service web page includes information on the United Kingdom Health Statistics Steering Group (UKHSSG) theme groups including NHS Experience theme group.

### [Care Quality Commission surveys](#)

Web page | Last updated April 2024

This web page provides regular updates on the surveys published by the Care Quality Commission (CQC) as part of the NHS patient survey programme.

### [GP access during COVID-19](#)

Web page | Last updated 2021

This page details Healthwatch's report on how the coronavirus (COVID-19) pandemic changed the way people access their GP and how it affected people's experience of care.

## 11 . Cite this article

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