



**Knowledge of the Choose and Book Programme
Amongst GPs in England**

**A Survey of GPs' Opinions for the
National Audit Office**

Table of Contents

1	SUMMARY OF FINDINGS	3
2	INTRODUCTION	5
3	RESEARCH OBJECTIVES	5
4	RESULTS.....	7
4.1	SAMPLE DEMOGRAPHICS	7
4.2	THE DEGREE OF UNDERSTANDING OF CHOOSE AND BOOK	8
4.2.1	Knowledge of Choose and Book	8
4.2.2	Benefits of Choose and Book	10
4.2.3	Requirements	11
4.2.4	Opportunities Offered by Choose and Book	12
4.3	THE CONSULTATION PROCESS FOR CHOOSE AND BOOK	13
4.3.1	The opportunity to feed into the consultation process	13
4.3.2	Adequacy and timeliness of the consultation on the functionality.....	14
4.3.3	Adequacy of the consultation on the implementation timetable	15
4.3.4	Suitable approaches for consulting with GPs and clinicians	16
4.4	REQUIREMENTS NECESSARY TO IMPLEMENT CHOOSE AND BOOK	18
4.4.1	Training.....	18
4.4.2	Information required by patients and clinicians	19
4.5	IMPACT OF CHOOSE AND BOOK ON PATIENTS	22
4.5.1	Patients' experience of healthcare	22
4.5.2	Considerations for ethnic minorities and disadvantaged groups	24
4.6	IMPACT ON GPs	27
4.6.1	Capacity.....	27
4.6.2	Work patterns	28
4.6.3	Lengthen of consultations	29
4.6.4	Overall workload.....	30
4.7	OVERALL OPINION OF CHOOSE AND BOOK	31
5	APPENDIX I : QUESTIONNAIRE	34

List of Figures

Figure 1 : Distribution of the Sample by English Regions	7
Figure 2 : Distribution of the Sample by Year of Qualification	7
Figure 3 : Analysis of Respondents by Region and Year of Qualification	8
Figure 4 : Degree of Knowledge of Choose and Book Amongst the Sample	8
Figure 5 : Analysis of Degree of Knowledge of Choose and Book by Region	9
Figure 6 : Analysis of Degree of Knowledge by Year of Qualification	9
Figure 7 : Do you understand the expected benefits and purpose of Choose and Book?	10
Figure 8 : Analysis of Doctors' Understanding of the Benefit of Choose and Book and their Degree of Knowledge of the Programme.....	10
Figure 9 : Are you aware of the need to offer patients four or five choices?	11
Figure 10 : Awareness of the number of choices analysed by degree of knowledge.....	11
Figure 11: Awareness of the number of choices analysed by year of qualification	12
Figure 12 : What Opportunities do you think Choose and Book Offers?.....	12
Figure 13 : Have you had the opportunity to feed into any consultations for Choose and Book?	13
Figure 14 : Involvement in Consultation analysed by degree of knowledge	14
Figure 15 : Adequate?	14
Figure 16 : Timely?.....	15
Figure 17 : Has NPfIT consulted adequately on the implementation timetable for Choose and Book?	15
Figure 18 : What should NPfIT do to consult and inform GPs and other clinicians?	16
Figure 19 : Types of consultation activities analysed by region	16
Figure 20 : Consultation activities analysed by year of qualification.....	17
Figure 21 : Are you aware of any training you will require in order to implement Choose and Book?	18
Figure 22 : Do you know who will be organising and paying for that training?	18
Figure 23 : Awareness of training analysed by degree of knowledge	19
Figure 24 : What information will be required for patients to choose from a range of providers?.....	20
Figure 25 : Information required by patients analysed by degree of knowledge of Choose and Book	20
Figure 26 : What information will you want in order to refer your patients to a wider range of providers?....	21
Figure 27 : What effect do you think that Choose and Book will have on patients' experience of healthcare?.....	22
Figure 28 : Patients' experience of healthcare analysed by region	23
Figure 29 : Patients' experience of healthcare analysed by year of qualification	23
Figure 30 : Patients' experience of healthcare analysed by knowledge of Choose and Book.....	23
Figure 31 : Impact of Choose and Book on Health Inequalities.....	24
Figure 32 : Impact on Health inequalities analysed by region	25
Figure 33 : Impact on health inequalities analysed by knowledge of Choose and Book.....	25
Figure 34 : Will Choose and Book require more or fewer resources for ethnic minority or disadvantaged groups?.....	26
Figure 35 : Impact on resources required for ethic minorities/disadvantaged groups analysed by knowledge of Choose and Book	26
Figure 36 : Do you think your practice has the capacity to implement Choose and Book?	27
Figure 37 : Capacity to Implement Choose and Book analysed by region.....	27
Figure 38 : Capacity to Implement Choose and Book analysed by year of qualification.....	27
Figure 39 : Capacity to Implement Choose and Book analysed by degree of knowledge of Choose and Book	28
Figure 40 : Do you think offering Choose and Book will require you or your practice to work differently?.....	28
Figure 41 : What impact do you expect Choose and Book to have on the length of your consultations?.....	29
Figure 42 : What impact do you think Choose and Book will have on your overall workload?.....	30
Figure 43 : Impact of Choose and Book on your overall workload analysed by knowledge of Choose and Book	30
Figure 44 : Impact of Choose and Book on your overall workload analysed year of qualification	31
Figure 45 : Overall, how do you feel about the prospect of Choose and Book?.....	31
Figure 46 : Attitude to the prospect of Choose and Book analysed by region	32
Figure 47 : Attitude to the prospect of Choose and Book analysed by year of qualification.....	32
Figure 48 : Attitude to the prospect of Choose and Book analysed by degree of knowledge of Choose and Book	33

1 Summary of Findings

The analysis of responses from 1500 GPs who practise in England revealed the following knowledge, understanding, attitudes and opinions regarding the Choose and Book programme.

- The majority of respondents classified themselves as knowing either a little or very little about Choose and Book.
- Approximately half of the sample believe they understand the potential benefits and the purpose of Choose and Book.
- Approximately half of the sample are aware of the requirement to offer four of five choices for elective surgery.
- The opportunities presented by Choose and Book most often selected by the sample were:
 - Greater convenience for patients;
 - Greater patient involvement in treatment decisions;
 - Reduction in Do Not Attends.
- 92% of GPs have not had the opportunity to feed into consultations for Choose and Book.
- Consultation on the functionality was thought to be neither adequate nor timely by over 50% of the sample in each case.
- 97% of GPs believe that the National Programme for Information Technology have not communicated adequately on the timetable for implementation of Choose and Book.
- The most popular methods for involving GPs in consultation were mail shots (66% of respondents), conducting learning events in different areas (54% of respondents) and features in academic journals (53% of respondents). Other ideas proposed by respondents include the use of email, discussions with individual doctors and use of on-line networks such as Doctors.net.uk.
- Nearly three quarters of GPs were not aware of the training requirements for Choose and Book, and of those who were aware of these, 92% did not know who would be organising and paying for the training.
- 70% of the sample selected the following as information which patients will require:
 - Waiting times for first outpatient appointment;
 - Waiting times to start treatment or inpatient appointments;
 - Local access issues;
 - Reputation of the providers.
- Similar results were obtained for the information which GPs would require, expect that local access issues were chosen less often.
- GPs are anticipating that Choose and Book will:
 - Not influence patients' experience of healthcare adversely;
 - Increase health inequalities for ethnic minorities and disadvantaged groups;

- Require greater resources to implement for ethnic minorities and disadvantaged groups;
- 51% of GPs think their practice does not have the capacity to implement Choose and Book
- 84% of GPs believe they will have to work differently as a result of the implementation of Choose and Book.
- 91% of GPs believe that consultations will be longer, either a lot longer (61%) or a little longer (30%).
- 90% of GPs believe their overall workload will increase as a result of the implementation of Choose and Book.
- 61% of GPs feel either very negative or a little negative about the prospect of Choose and Book. Only 3% are very positive and 15% a little positive.
- Analysis by region and year of qualification revealed a number of differences from the national picture but no radical variations from the pattern of the total sample.
- Analysis by the respondent's degree of understanding about Choose and Book demonstrated clear differences between those who rated themselves as knowing a lot about it compared to those who knew little. However, the more knowledgeable respondents were still negative about the consultation process and their overall feelings about the prospect of Choose and Book.

2 Introduction

The National Audit Office (NAO) has a statutory responsibility to report to Parliament on whether the Department of Health is discharging its responsibilities in an economic, efficient and effective way. The NAO have commissioned a study on the Department's preparations for the introduction of patient choice at the point of referral, an initiative which must be in place by December 2005. The Department has chosen to link choice at referral with the e-booking project (part of the NHS National Programme for Information Technology) and the combined policy is now known as 'Choose and Book.' For the purposes of the survey, the phrase 'Choose and Book' is also used.

Doctors.net.uk has been commissioned to conduct the study using on-line methodology with members of Doctors.net.uk who are GPs practising in England. All Doctors.net.uk members are GMC registered medical practitioners and have access to the Doctors.net.uk website through a user name and password. Doctors.net.uk have been contracted to conduct the fieldwork, collect all responses, analyse the information and prepare a summary report of the findings.

3 Research Objectives

The survey is focused around the question of GP knowledge of the Choose and Book programme. It is intended to provide all parties with an understanding of the overall principles for effective delivery and operation of the contract for Choose and Book.

This survey is designed to find out how much GPs about this area and their views on it. Respondents have been categorised by their year of qualification and the English region in which they practice.

The themes covered by the survey are:

- The degree of understanding of Choose and Book
 - Its benefits
 - Requirements
 - Opportunities it offers
- The process of consultation about Choose and Book
 - The opportunity to feed into the consultation process

- Opinion of the consultation process undertaken by National Programme for Information Technology (NPfIT), including consultation on the functionality
 - Suitable approaches for consulting with GPs and clinicians
- Requirements to implement Choose and Book
 - Training
 - Information required by patients and clinicians
- Impact on Patients
 - Patients' experience of healthcare
 - Considerations for ethnic minorities and disadvantaged groups
- Impact on GPs
 - Capacity
 - Work patterns
 - Lengthen of consultations
 - Overall workload
- Overall opinion of Choose and Book

The questionnaire, including the definitions of the English regions, is provided in Appendix I.

The results were analysed by three parameters:

- Region;
- Year of Qualification;
- Degree of Knowledge of Choose and Book.

4 Results

The complete results are provided in the associated Excel workbook named NAO SURVEY 281004.xls.

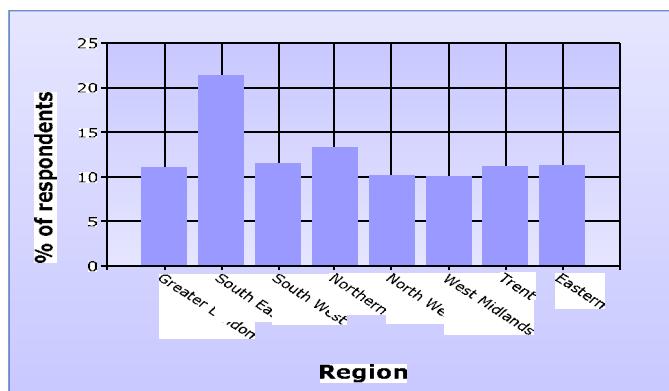
Key findings and comparisons across regions, year of qualification and degree of knowledge of the Choose and Book programme are provided in this section.

4.1 Sample Demographics

1500 GPs who practise in England completed the survey between 12th and 19th October 2004.

Figure 1 demonstrates the distribution of the sample across the regions. One third of the sample practices in Greater London and the South East, and the remainder are spread amongst the other regions with a range of between 10% and 13%.

Figure 1 : Distribution of the Sample by English Regions



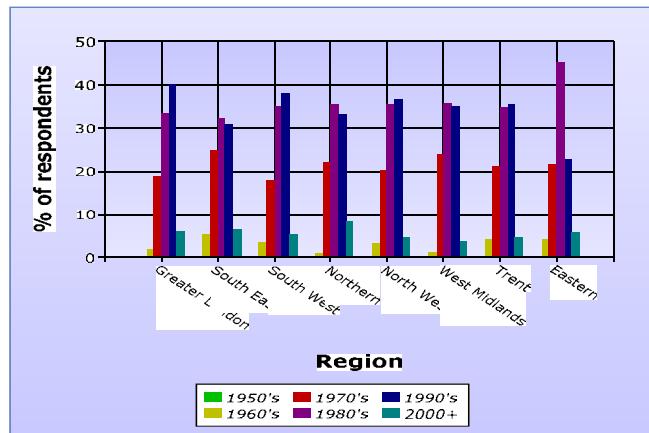
The 92% of the sample qualified between 1970 and 1999, as illustrated by Figure 2, which shows the distribution of the year of qualification in decades.

Figure 2 : Distribution of the Sample by Year of Qualification



Analysis of the sample by location and year of qualification of the respondent indicates that the sample is broadly representative as all regions have a similar ‘age’ profile. The two exceptions are a slightly higher proportion of doctors who qualified in the 1990’s in Greater London and a significantly higher proportion of doctors who qualified in the 1980’s in Trent.

Figure 3 : Analysis of Respondents by Region and Year of Qualification

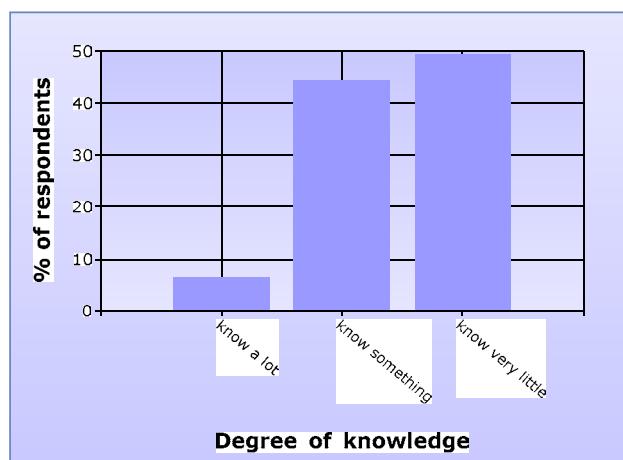


4.2 The Degree of Understanding of Choose and Book

4.2.1 Knowledge of Choose and Book

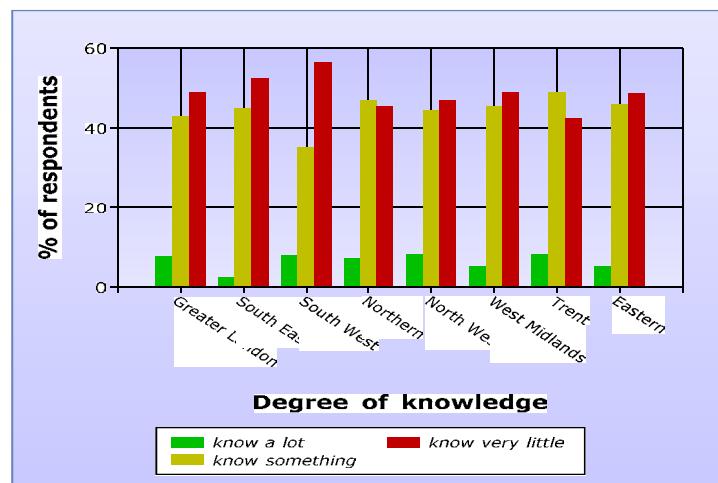
The level of knowledge of Choose and Book within the sample is relatively low. 49% of the sample know very little about it, compared with 6% of GPs say they know at lot about it and 45% know a little.

Figure 4 : Degree of Knowledge of Choose and Book Amongst the Sample



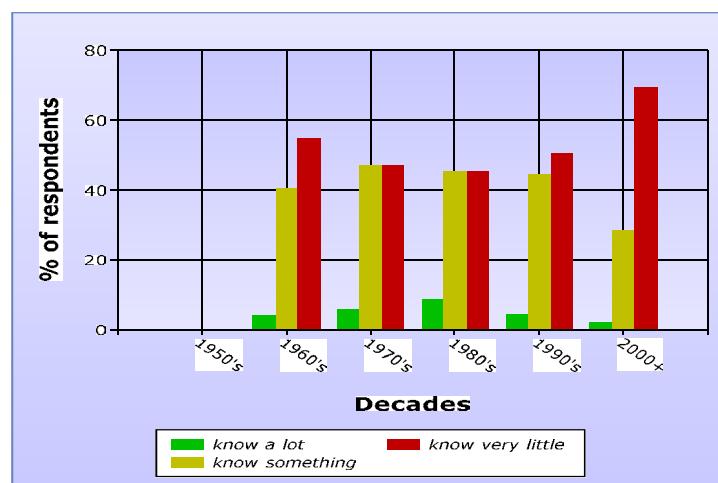
Analysis by region indicates the South East has fewer doctors who know a lot about Choose and Book and the South West has the highest proportion of doctors who know very little.

Figure 5 : Analysis of Degree of Knowledge of Choose and Book by Region



Analysis by year of qualification demonstrates that the degree of knowledge is similar across all decades except for the most recently qualified doctors. The proportion of doctors who qualified in 2000 or later who know very little about Choose and Book is 69%, the highest in the sample.

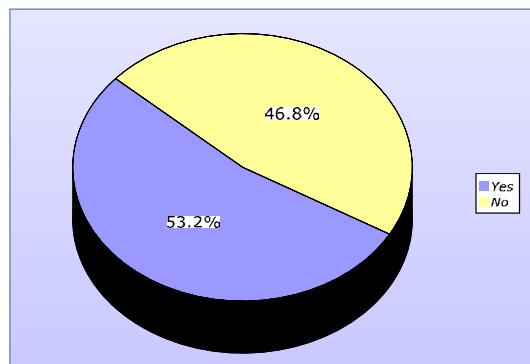
Figure 6 : Analysis of Degree of Knowledge by Year of Qualification



4.2.2 Benefits of Choose and Book

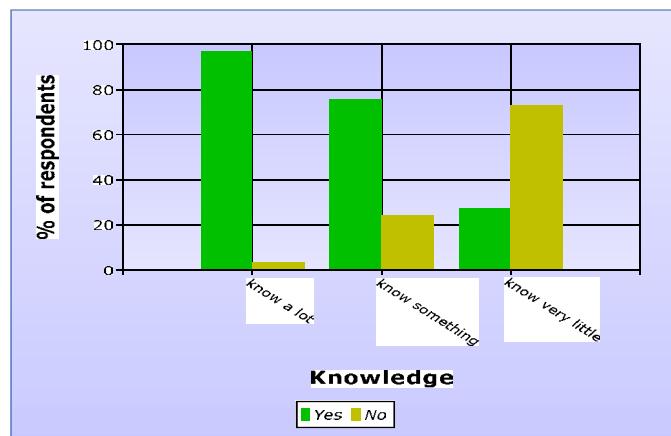
The sample was fairly evenly divided with regard to understanding the benefits and purpose of Choose and Book. 53% of the sample understands these, whereas 47% do not.

Figure 7 : Do you understand the expected benefits and purpose of Choose and Book?



97% doctors who know a lot about Choose and Book understand the benefits and purpose of the programme and, as might be expected the proportion decreases as the degree of knowledge declines.

Figure 8 : Analysis of Doctors' Understanding of the Benefit of Choose and Book and their Degree of Knowledge of the Programme



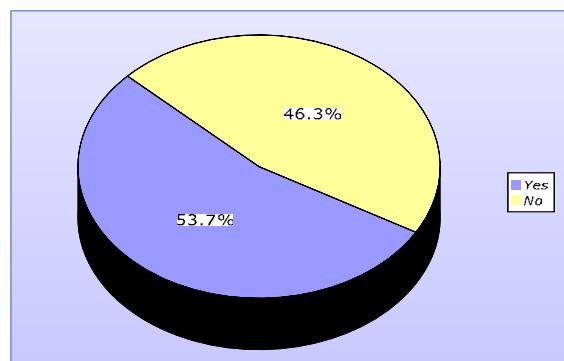
Three regions had a higher than average proportion of doctors who understood the benefits. 60% of GPs in Greater London, the North West and the West Midlands understood the benefits compared with the average of 53%.

The older and younger cohorts both had a higher proportion of GPs who did not understand the benefits of Choose and Book. 55% of GPs who qualified in the 60s and 57% of those qualifying in 2000 or later did not understand the benefits, compared with the average of 47%.

4.2.3 Requirements

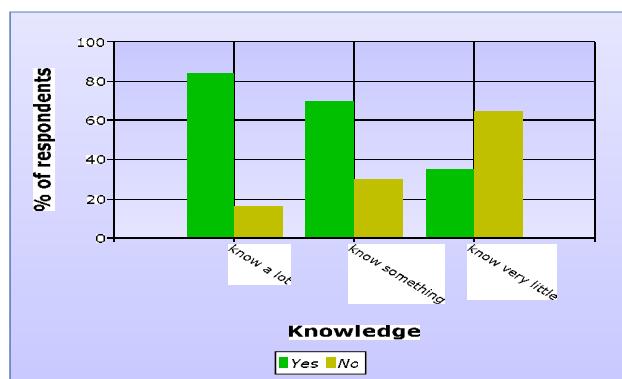
The sample was also fairly evenly divided with regard to their understanding of the requirement to offer 4 or 5 choices at the time of booking, with 54% being aware and 46% unaware of this requirement.

Figure 9 : Are you aware of the need to offer patients four or five choices?



As might be expected, the extent to which GPs were aware of the need to offer four or five choices is directly proportional to their degree of knowledge of the programme.

Figure 10 : Awareness of the number of choices analysed by degree of knowledge

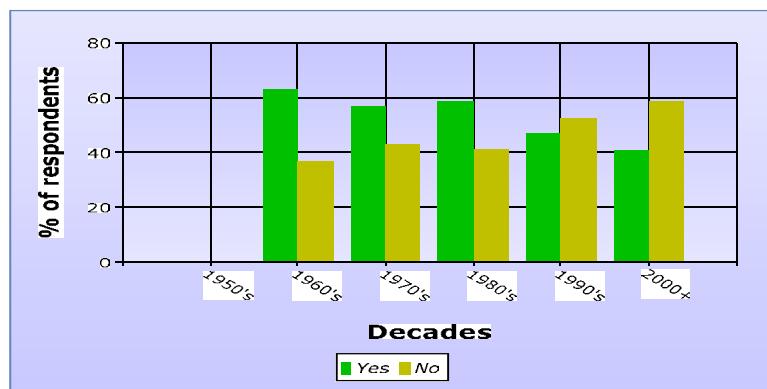


There is little difference across regions in the awareness of the number of choices that will be offered. Trent and Eastern have a higher proportion of GPs who are aware of this, with 58% and 60% respectively compared with the average of 54%. The South West has 55% of GPs who are not aware, compared with the average of 46%.

In contrast, there is more variation between GPs based on their year of qualification.

Older GPs are better informed than younger ones, with GPs qualified in the 60's, 70's and 80's being above the average of 54%.

Figure 11: Awareness of the number of choices analysed by year of qualification



4.2.4 Opportunities Offered by Choose and Book

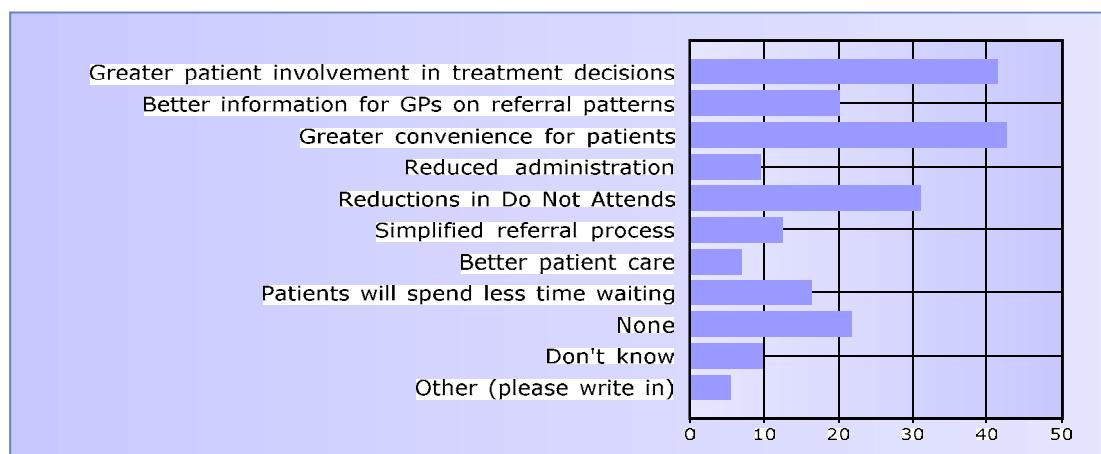
The opportunities chosen most frequently by the sample as being offered by Choose and Book were:

- Greater convenience for patients
- Greater patient involvement in treatment decisions
- Reduction in Do Not Attends

However, 22% of the sample thought that Choose and Book does not offer any opportunities and a further 10% did not know what opportunities it might offer.

The complete response is illustrated in Figure 12.

Figure 12 : What Opportunities do you think Choose and Book Offers?



A few respondents provided responses in the “other” category. These were mainly expressing reservations rather than offering positive opportunities. A couple of respondents suggested that:

- there could be better and faster information on referral patterns;
- increased patient choice;
- Provision of accurate waiting times;
- Greater interest in quality – both patients, GPS and Trusts.

Reservations include:

- Only if the service offered is rapid and of high quality;
- Further Admin tasks when there is already not enough time;
- Increased administration;
- It’s an unknown entity;
- Politicians pleasing the public with meaningless processes;
- Wasting more GP time doing jobs that are traditionally done by other sectors of the health community.

The complete verbatims are available in the accompanying Excel workbook.

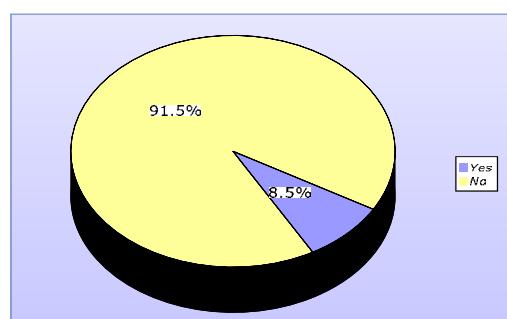
4.3 The Consultation Process for Choose and Book

Four questions covered this aspect of Choose and Book and the overall responses indicate that GPs do not feel that they have been consulted effectively.

4.3.1 The opportunity to feed into the consultation process

There was a clear consensus that GPs had not had the opportunity to feed into the consultation process as 92% of the sample answered “no” to this question.

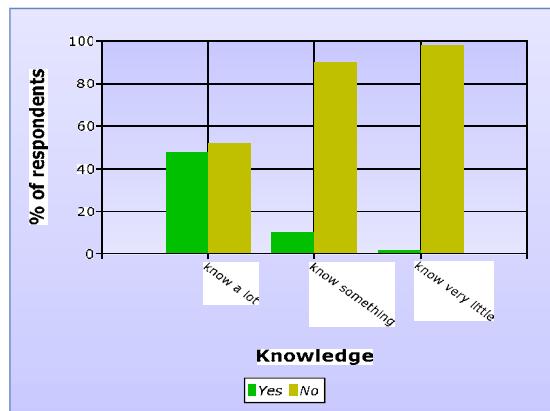
Figure 13 : Have you had the opportunity to feed into any consultations for Choose and Book?



There is very little variation between region in the response to this question. For example, the percentage of GPs who have not had an opportunity to feed into any consultations varied between 89% and 93% across regions. The variation by year of qualification is, once again, greater than for the regions. The range is 88% to 99% compared with the average of 91.5%.

There is a significant difference in response to this question depending on the degree of knowledge of the programme, as illustrated in Figure 14.

Figure 14 : Involvement in Consultation analysed by degree of knowledge



Almost half of those GPs who know a lot about the programme have had the opportunity to feed into consultation.

4.3.2 Adequacy and timeliness of the consultation on the functionality

The respondents were asked whether they regarded the consultation by National Programme for Information Technology (NPfIT) on the functionality of the Choose and Book system to be adequate and timely. Over half of the sample responded that this consultation was neither adequate nor timely but a significant proportion did not know whether it was either adequate or timely, 38% and 45% respectively. Very few answered these questions in the affirmative. The results are displayed in Figures 15 and 16.

Was the consultation on the functionality of Choose and Book:

Figure 15 : Adequate?

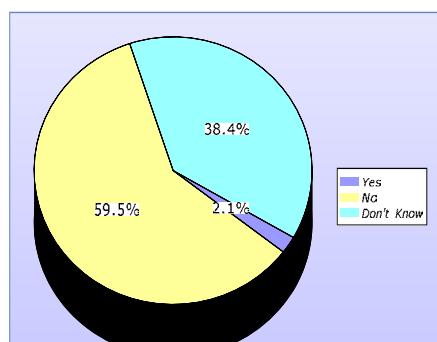
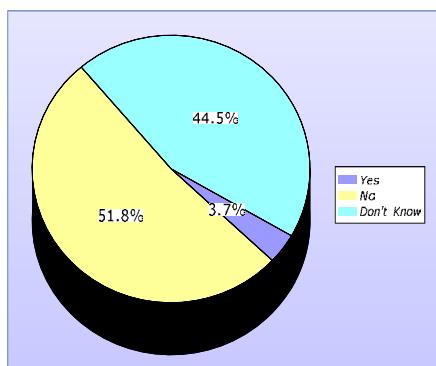


Figure 16 : Timely?



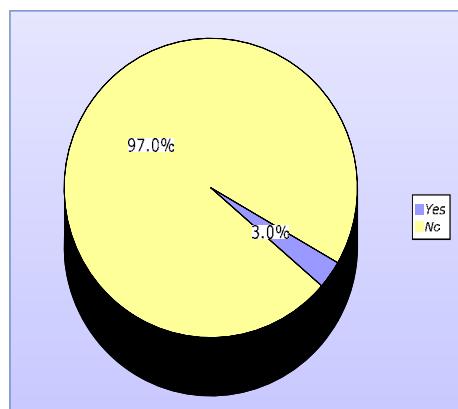
Trent is the only region that showed a noticeable difference from the average; this occurred for both adequacy and timeliness. 71% of GPs in Trent believe that this consultation was not adequate, compared with the sample average of 60%. The proportion of GPs selecting “*Don’t know*” decreased to 29% compared with the sample average of 38%. The figures for timeliness are 64% compared with 51% and 33% compared with 45%.

The most recently qualified doctors had the highest level of “*Don’t knows*” in the sample. The other cohorts by year of qualification were similar to the average.

4.3.3 Adequacy of the consultation on the implementation timetable

GPs were virtually unanimous in responding that NPfIT did not consult adequately on the implementation timetable for Choose and Book. 97% of the sample selected no in response to this question.

Figure 17 : Has NPfIT consulted adequately on the implementation timetable for Choose and Book?



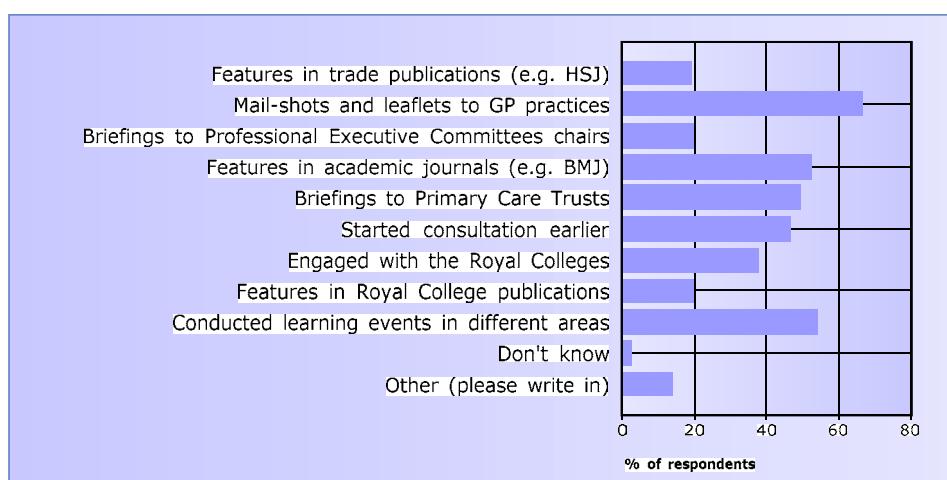
This is such an overwhelming result that there are no differences between regions, year of qualification or degree of knowledge of the programme.

4.3.4 Suitable approaches for consulting with GPs and clinicians

The most popular method GPS believe NPfIT should have used to consult and inform GPs was the use of mail shots and leaflets to GP practices (selected by 66% of respondents). This was followed by “conducting learning events in different areas” (54%) and “features in academic journals” (53%).

Figure 18 shows the full analysis of this question, demonstrating the wide range of approaches which GPs believe can be used to facilitate consultation and information.

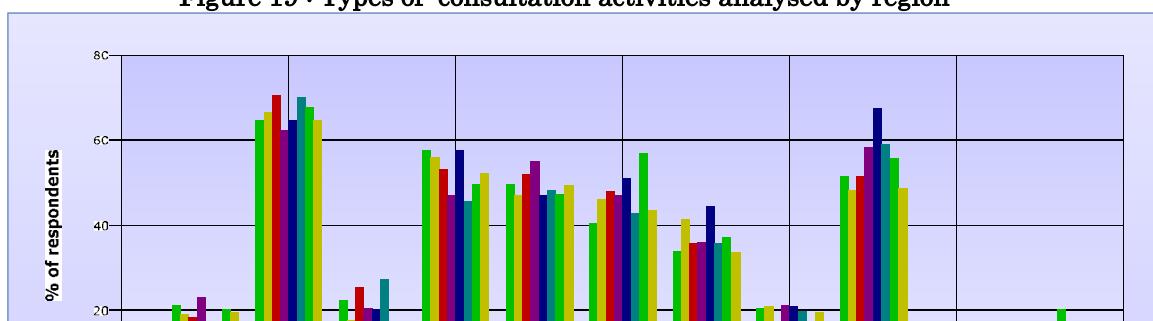
Figure 18 : What should NPfIT do to consult and inform GPs and other clinicians?



The regional analysis has the same overall shape as the national picture, with a few cases of some activities being more popular in certain regions. Examples which were chosen by a higher proportion of respondents than average include:

- Starting the process earlier - Trent;
- Conducting learning events in different areas – North West;
- Engaging with the Royal Colleges – North West.

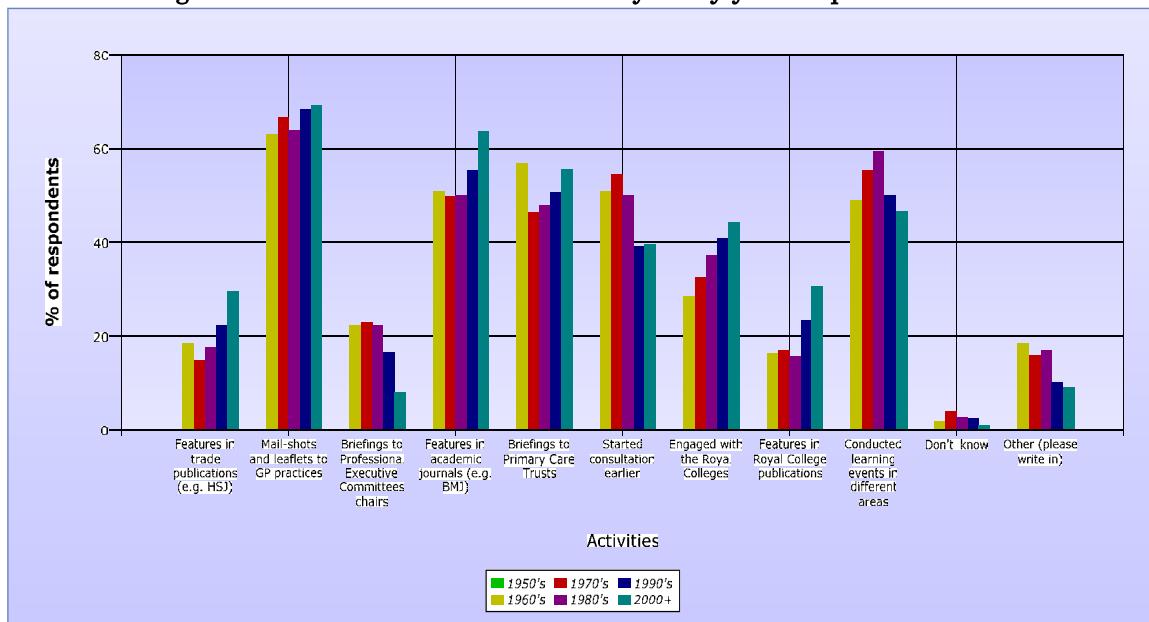
Figure 19 : Types of consultation activities analysed by region



Younger doctors (those qualified in 2000 or later) have a slight preference for features in academic journals and features in Royal College publications compared with other cohorts. The interest in engaging with the Royal Colleges is greatest in younger GPs and lowest with the most experienced.

The full analysis is displayed in Figure 20.

Figure 20 : Consultation activities analysed by year of qualification



14% of respondents offered other comments on the consultation process.

Popular responses include:

- Asking individual GPs or visiting individual surgeries
- Email
- Doctors.net.uk bulletins
- Engage with LMCs, GPC and PHCSG

- PCTs to communicate with their GPs
- Use of publications such as Pulse, GP, Doctor

The full list of verbatims is provided in the associated Excel Workbook.

4.4 Requirements Necessary to Implement Choose and Book

4.4.1 Training

Nearly three-quarters of GPs were not aware of any training required to implement Choose and Book. Of the quarter who were aware of the training requirements, 90% of these are not aware of how the training will be organised and paid for. Knowledge of this aspect of the programme is low.

Figure 21 : Are you aware of any training you will require in order to implement Choose and Book?

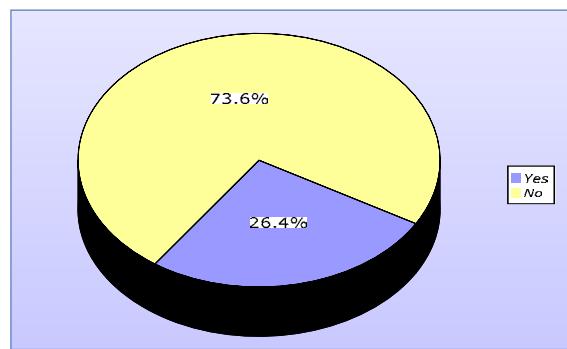
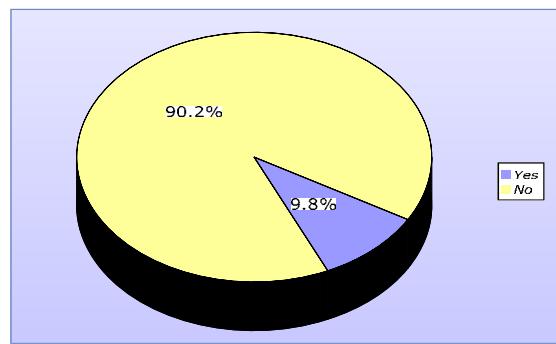
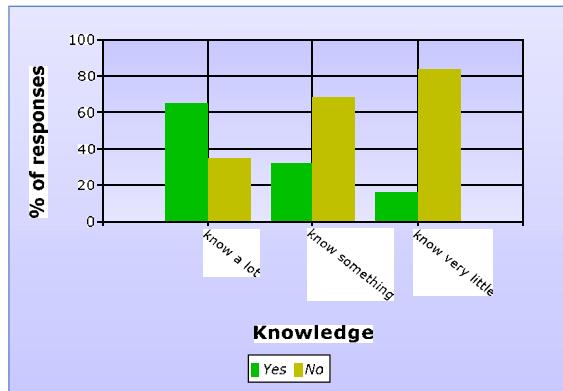


Figure 22 : Do you know who will be organising and paying for that training?



The most dramatic difference from the sample average occurs in the cohort who know a lot about Choose and Book. 65% of these GPs are aware of training , compared with 26%. This is illustrated in Figure 23. A similar, but less dramatic, pattern is seen in relation to awareness of who will organise and pay for the training. 25% of the GPs who know a lot about the programme are aware of who will organise and pay for the training. This proportion drops significantly in the other two cohorts of this analysis.

Figure 23 : Awareness of training analysed by degree of knowledge



The highest awareness of the training was in the Greater London region, where 33% of GPs were aware compared with the average of 26%. It is lowest in the North West, where 79% of GPs were not aware of training compared with 74% on average. Knowledge of who will organise and pay for the training is lowest in the West Midlands followed by the South East (2% and 5% of each cohort respectively compared with 10% on average)

GPs who qualified in the 70's and 80's were more aware of training than average (30% of each group compared with 26%) and lowest in the younger doctors (78% versus 74%).

4.4.2 Information required by patients and clinicians

4.4.2.1 Patients

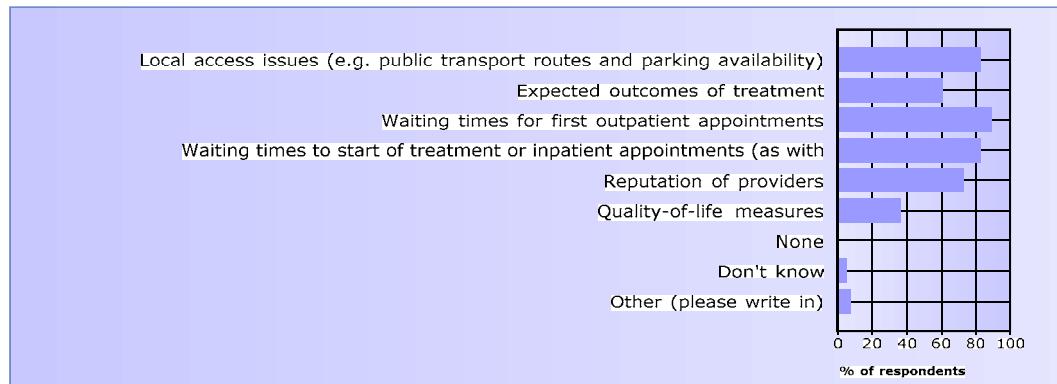
GPs' view of the information patients will require to choose from a range of providers is very consistent, with over 70% of the sample selecting the following:

- Waiting times for the first outpatient appointment
- Waiting times to the start of treatment or inpatient appointments
- Local access issues

- Reputation of the providers

Expected outcomes of treatment and quality-of-life measures were chosen less frequently.

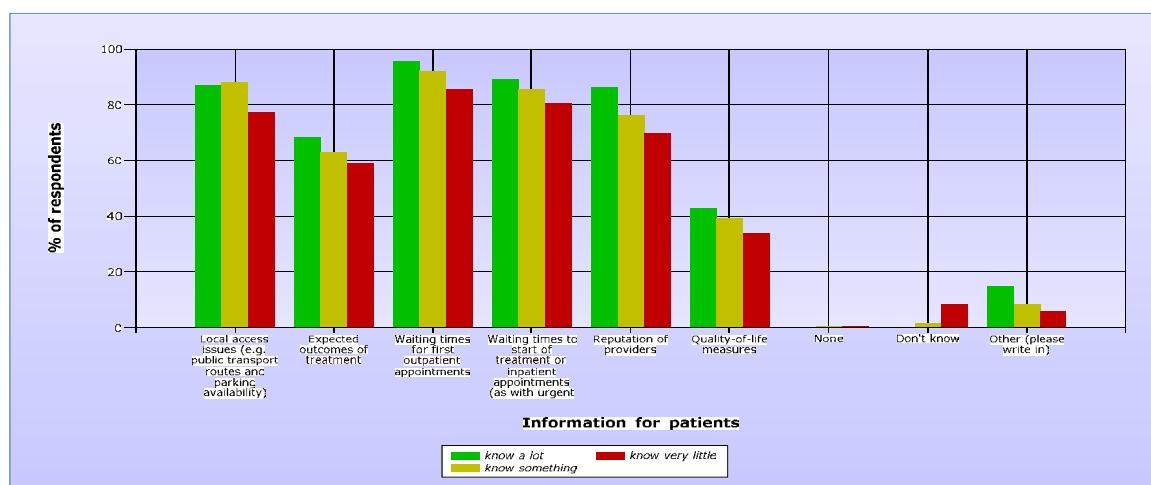
Figure 24 : What information will be required for patients to choose from a range of providers?



Analysis by region revealed no significant differences. The only notable difference between GPs based on their year of qualification was that younger doctors mentioned local issued more frequently, with 69% of this group selecting this option compared with the average of 59%.

The degree of knowledge was inversely related to the number of GPs selecting each option, illustrated in Figure 25.

Figure 25 : Information required by patients analysed by degree of knowledge of Choose and Book



7% of respondents offered other information that will be required. Popular themes include:

- Complication rates;
- MRSA rates;
- Follow-up procedures;
- Transport and travel issues such as ambulance services, distance to the provider and car parking arrangements;

- Information on consultants such as special interests and individual reputation;
- Advice from their GP
- Language issues.

A number of respondents mentioned that the type of information they would require is not available to them. This includes data on waiting times, outcomes, PCT contracts, comparison of different facilities and teams etc.

The full list of verbatims is provided in the associated Excel workbook.

4.4.2.2 GPs

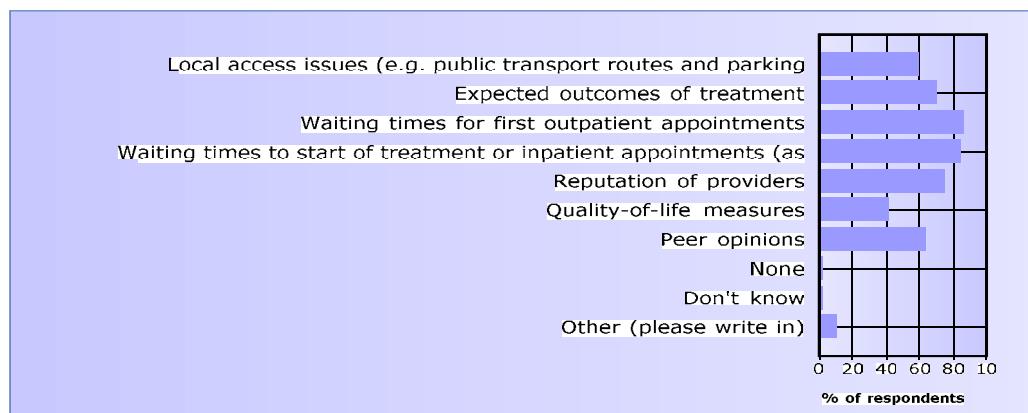
With regard to the information that GPs require for themselves in order to refer patients to a wider range of providers, the following three aspects were selected by over 70% of respondents:

- Waiting times for first outpatient appointment
- Waiting times to the start of treatment or inpatient appointments
- Reputation of the providers

Local access issues were chosen less often than expected outcomes of treatment and peer opinions.

The least important information was, once again, quality-of-life measures.

Figure 26 : What information will you want in order to refer your patients to a wider range of providers?



All three of the sub-group analyses have responses that are consistent with the national picture. No region stood out with regard to any particular information requirement. The same applies to the analysis by year of qualification and the degree of knowledge of the programme.

10 % of respondents provided comments on other information that will be required. Popular themes include:

- Follow up arrangements;
- Outcome measures;
- Quality of communication between the provider and GP;
- Personal knowledge of the consultant or provider;
- Information on the provider and their policies;
- Reputation of the consultant or provider.

Many of the comments related to the time required to implement Choose and Book rather than specific information requirements.

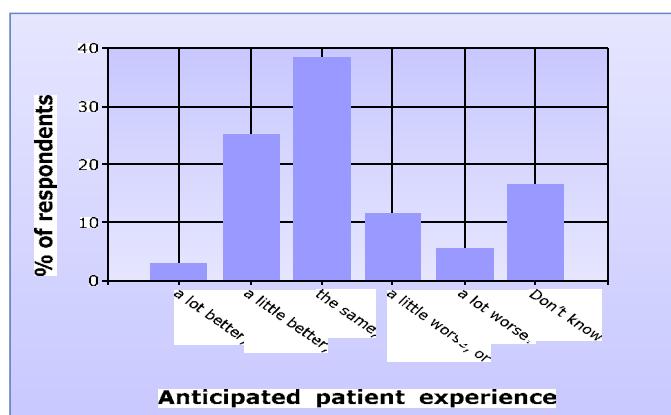
The full list of verbatims is provided in the associated Excel workbook.

4.5 Impact of Choose and Book on Patients

4.5.1 Patients' experience of healthcare

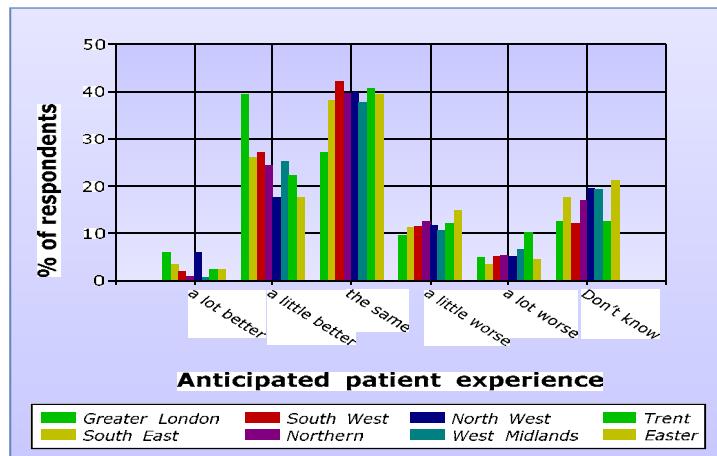
The modal response to the question “what effect do you think that Choose and Book will have on patients’ experience of healthcare” was “*the same*”. The distribution is displayed in Figure 26, which also demonstrates that 17% of the sample do not know what effect Choose and Book will have on patients’ experience of healthcare.

Figure 27 : What effect do you think that Choose and Book will have on patients' experience of healthcare?



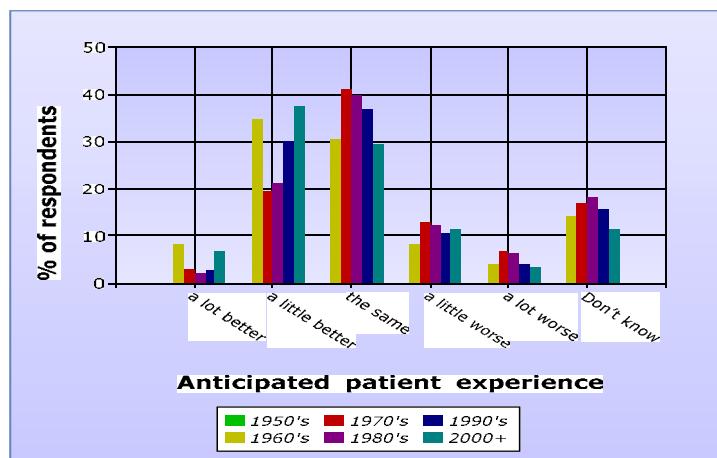
GPs in Greater London are more positive about the impact of Choose and Book on patients' experience of healthcare. 39% of these GPs believe that patients' experience will be a little better, compared to 25% of the total sample.

Figure 28 : Patients' experience of healthcare analysed by region



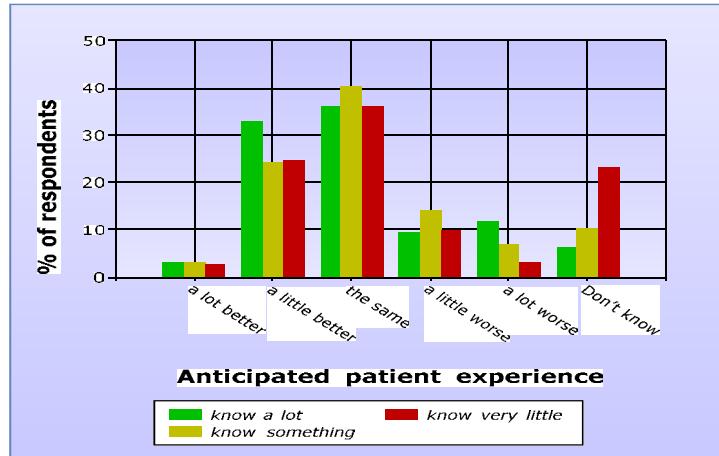
The most optimistic group of GPs are those who qualified after 2000. 35% of these believe the patients' experience will be a little better as a result of Choose and Book.

Figure 29 : Patients' experience of healthcare analysed by year of qualification



Those GPs who know most about Choose and Book are also optimistic with regard to the impact of the programme on patients' experience of healthcare. 33% believe the experience will be a little better, compared to the average of 25%. This is illustrated in Figure 30.

Figure 30 : Patients' experience of healthcare analysed by knowledge of Choose and Book

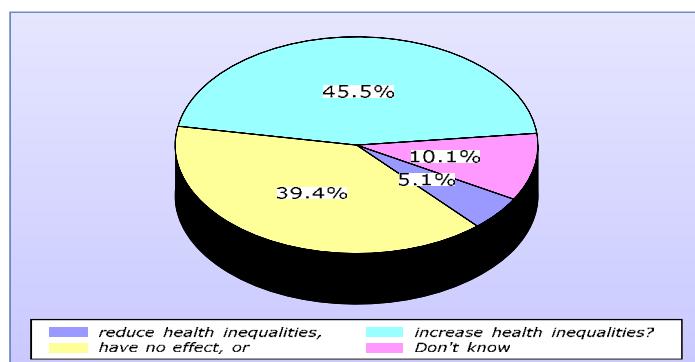


4.5.2 Considerations for ethnic minorities and disadvantaged groups

4.5.2.1 Healthcare Inequalities

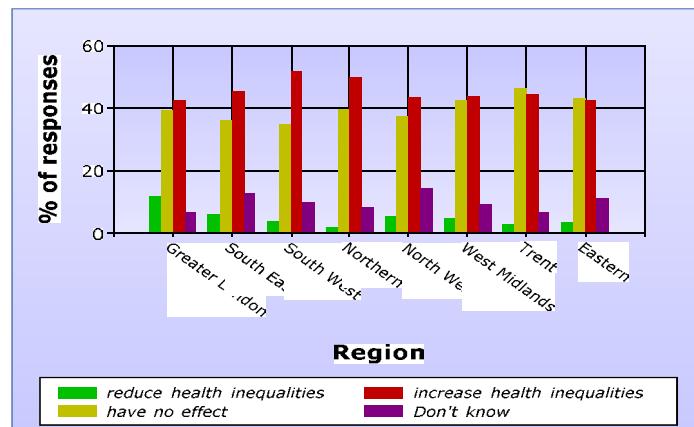
45% of the sample believes that Choose and Book will increase health inequalities for disadvantaged sections of their practice population. In contrast only 5% believe it will reduce these.

Figure 31 : Impact of Choose and Book on Health Inequalities



Whilst more GPs in Greater London than average believe that Choose and Book will reduce health inequalities, those in the South West and Northern regions are more likely to be concerned that it will increase inequality.

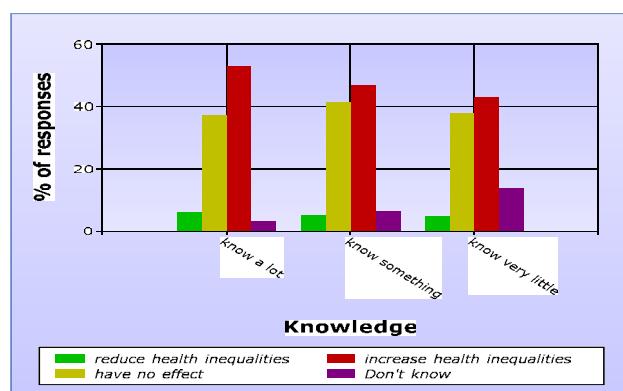
Figure 32 : Impact on Health inequalities analysed by region



The only significant difference from the average observed in the analysis by age is that the oldest cohort of GPs is least concerned that health inequalities will increase. 33% of this group chose this option compared with 46% overall.

Those GPs who know most about Choose and Book are more likely to be concerned that it will increase health inequalities.

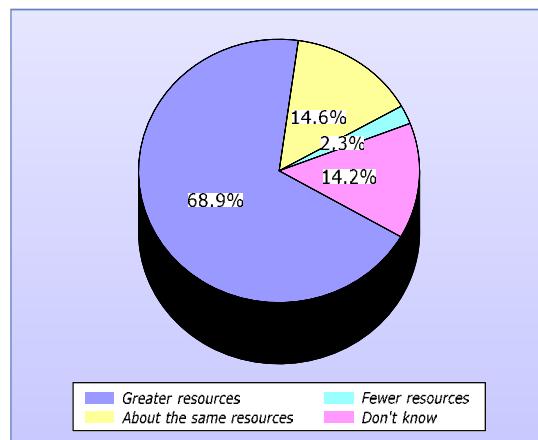
Figure 33 : Impact on health inequalities analysed by knowledge of Choose and Book



4.5.2.2 Impact on Resources

The majority of GPs (69%) think that Choose and Book will require greater resources for ethnic minority or disadvantaged groups.

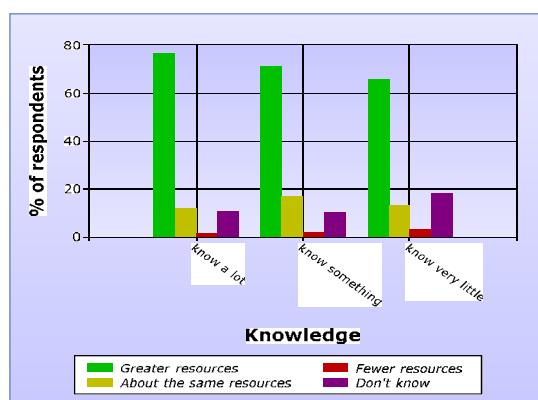
Figure 34 : Will Choose and Book require more or fewer resources for ethnic minority or disadvantaged groups?



Compared with the total sample, the GPs in the North West region are more likely to perceive that Choose and Book will require more resources as 75% of respondents selected this option compared with 69% overall. 19% of GPs in Eastern region think resources will be about the same, compared with 15% overall and 18% of GPs in Northern region do no know, compared with 14% overall. The analysis by year of qualification revealed no notable differences from the total sample.

Once again, the analysis by degree of understand of Choose and Book demonstrated an inverse relationship between the degree of understanding and the view of the resources required for ethnic minorities or disadvantaged groups.

Figure 35 : Impact on resources required for ethic minorities/disadvantaged groups analysed by knowledge of Choose and Book

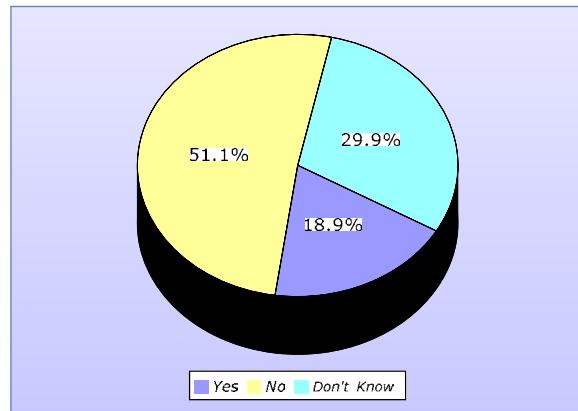


4.6 Impact on GPs

4.6.1 Capacity

GPs were asked if they thought their practice had the capacity to implement Choose and Book. 51% thought they had not, 30% did not know and 19% thought they had.

Figure 36 : Do you think your practice has the capacity to implement Choose and Book?



GPs in Trent and those who qualified in the 70's and 80's are most likely to believe that their practices do not have the capacity to implement Choose and Book, with 63%, 57% and 61% of respondents selecting this option respectively.

Figure 37 : Capacity to Implement Choose and Book analysed by region

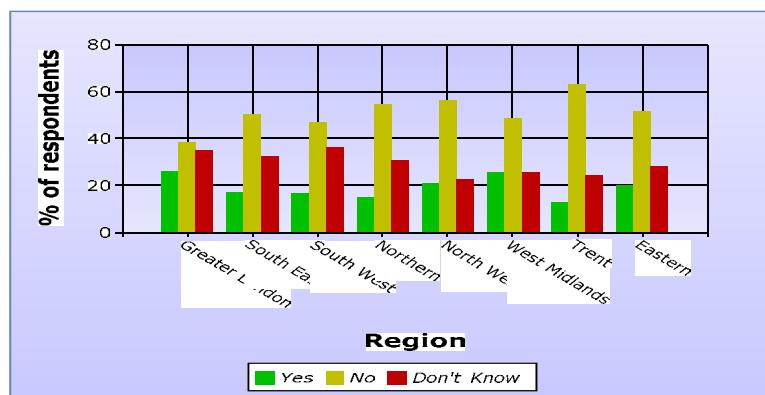
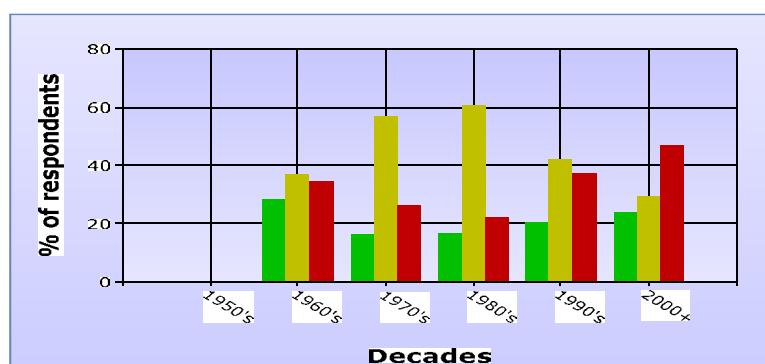
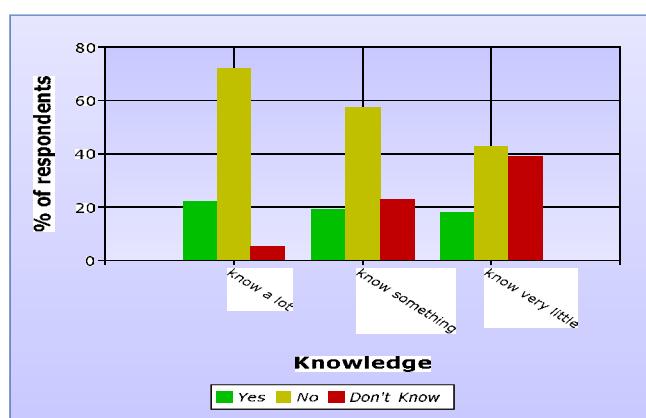


Figure 38 : Capacity to Implement Choose and Book analysed by year of qualification



The degree of knowledge influences the views of GPs with respect to their capacity to implement Choose and Book in their practices.

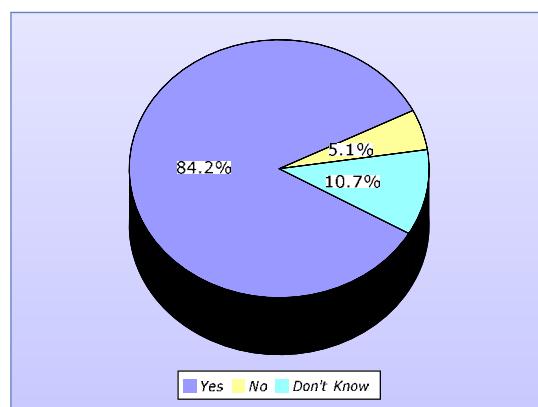
Figure 39 : Capacity to Implement Choose and Book analysed by degree of knowledge of Choose and Book



4.6.2 Work patterns

The majority (84%) of GPs think that offering Choose and Book will require different working practises, either for themselves or their practice.

Figure 40 : Do you think offering Choose and Book will require you or your practice to work differently?



There are no significant differences across regions and the only difference in the year of qualification cohorts is that the youngest and oldest cohorts are more likely not to know,

accompanied by a decrease in the proportion selecting yes. The percentage selecting “no” in these two groups is around 10%, twice that of the average.

Respondents answering “yes” to this question were asked to explain why they felt they would have to work differently. The main themes from the 1260 responses were:

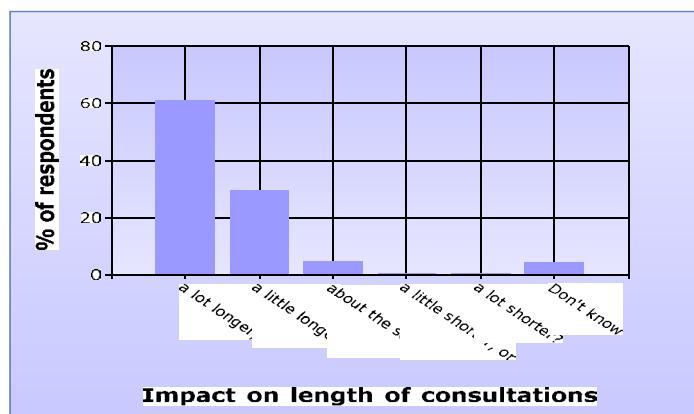
- Extra time needed with patients, lengthening the consultation time
- More administration for GPs
- Increased awareness of providers, assimilation of information about them
- Training for both clinical and administrative staff
- Changing procedures
- Improved knowledge and usage of IT
- Additional resources (admin, IT, space etc)

The full verbatims are provided in the associated Excel workbook.

4.6.3 Lengthen of consultations

The majority of GPs believe that Choose and Book will increase the length of their consultations. 61% believe it will increase a lot and 30% believe it will increase a little. Very few (less than 1%) believe that there will be a reduction in the length of their consultations.

Figure 41 : What impact do you expect Choose and Book to have on the length of your consultations?

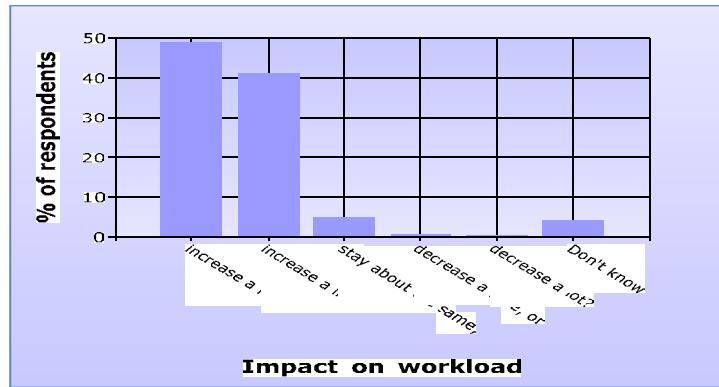


The only notable difference from the overall picture is that 68% of GPs in Trent believe their consultations will be a lot longer compared with the average of 61%.

4.6.4 Overall workload

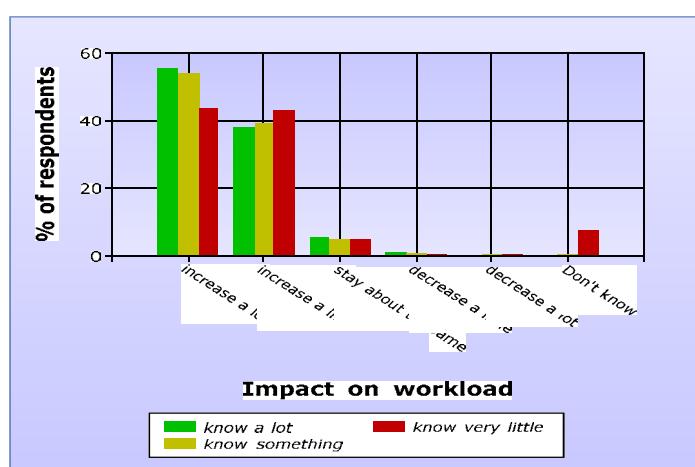
Similarly to the previous question, the majority of GPs believe that Choose and Book will increase their overall workload, either a lot (49%) or a little (41%). Also, less than 1% of respondents believe it will decrease to some extent.

Figure 42 : What impact do you think Choose and Book will have on your overall workload?



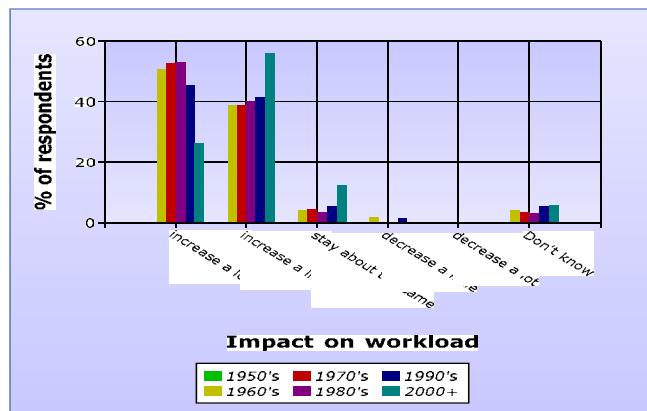
Those GPs who know at lot or a little are more pessimistic about the impact of Choose and Book on their workload than those who know very little and the total population.

Figure 43 : Impact of Choose and Book on your overall workload analysed by knowledge of Choose and Book



There is no notable difference between the regions compared with the overall sample. The only significant difference observed in the analysis by year of qualification relates to the youngest cohort. These GPs are more likely to believe that their workload increase a little compared to the average and fewer are concerned about an increase in the workload.

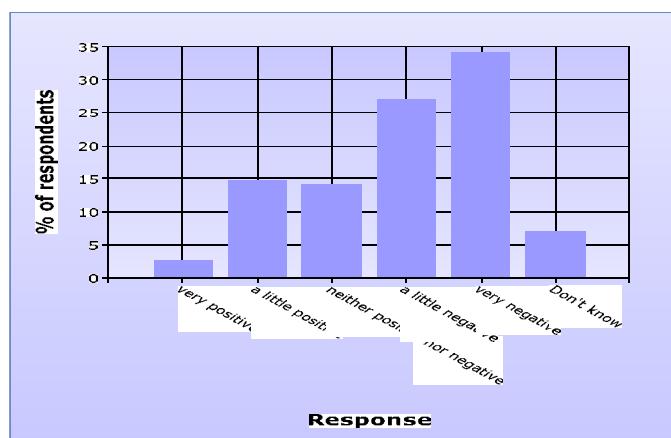
Figure 44 : Impact of Choose and Book on your overall workload analysed year of qualification



4.7 Overall opinion of Choose and Book

The overall opinion of Choose and Book is predominately negative as 61% of respondents feel either a little or very negative about it. Only 3% are very positive and 7% did not express a view. Figure 45 illustrates the distribution of responses to this question.

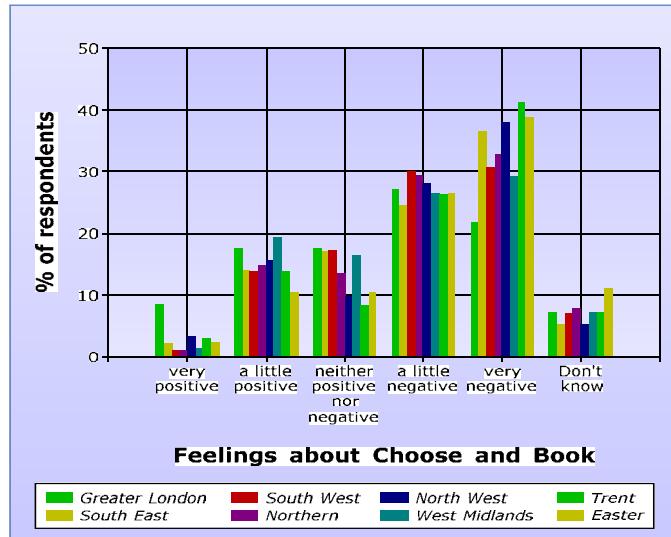
Figure 45 : Overall, how do you feel about the prospect of Choose and Book?



Regionally, the West Midlands has the highest score for “a little positive”, with 19% of GPs selecting this compared with 15% overall. Greater London has the fewest very negative GPs; 22%

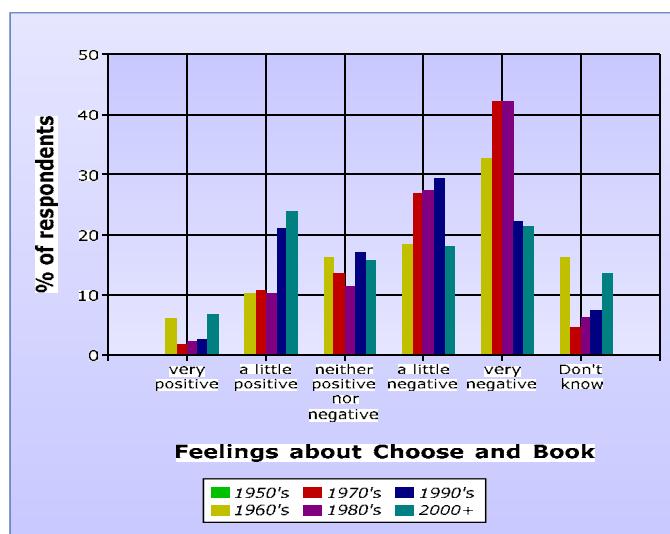
chose “very negative” compared with 34% overall. Trent is the most negative region, with 41% of GPs selecting “very negative”.

Figure 46 : Attitude to the prospect of Choose and Book analysed by region



Analysis by year of qualification demonstrates a pattern which has been seen previously. The oldest and youngest cohorts share the characteristic of being the most positive, with 6% and 7% of these groups selecting “very positive” compared to 3% overall. 24% of the youngest group also selected “a little positive” which is significantly higher than the average of 15%. The most negative groups are the 70’s and 80’s cohorts, as 42% of each group selected “very negative”.

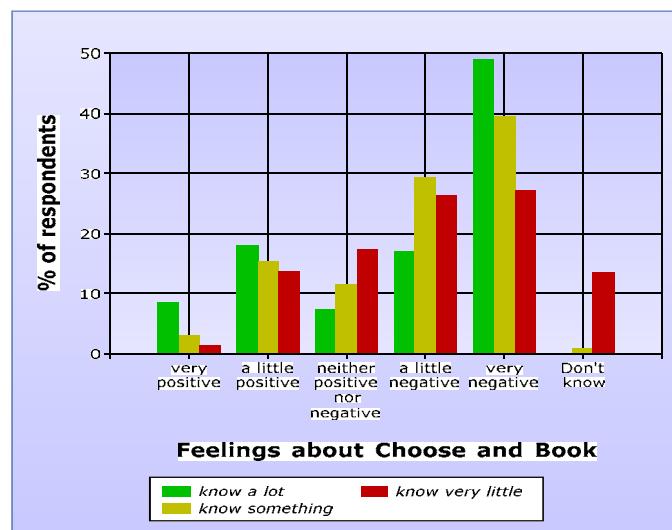
Figure 47 : Attitude to the prospect of Choose and Book analysed by year of qualification



The striking feature of the analysis by degree of knowledge of Choose and Book is that those GPs who know most about it are also the most negative, with 48% selecting “very negative” compared

to the average of 34%. At the same time this group also has a significantly higher number of GPs who feel very positive about Choose and Book, albeit from a low base. 9% fall into this category compared to the average of 3%.

Figure 48 : Attitude to the prospect of Choose and Book analysed by degree of knowledge of Choose and Book



5 Appendix I : Questionnaire

NAO Survey on Choice at Referral

Introductory Text

The National Audit Office has a statutory responsibility to report to Parliament on whether the Department of Health is discharging its responsibilities in an economic, efficient and effective way. We are currently undertaking a study on the Department's preparations for the introduction of patient choice at the point of referral, an initiative which must be in place by December 2005. The Department has chosen to link choice at referral with the e-booking project (part of the NHS National Programme for Information Technology) and the combined policy is now known as 'Choose and Book.' For the purposes of this survey, we have therefore also used the phrase 'Choose and Book.'

This survey is designed to find out how much you know about this area and what your views are of it. Its findings will be included in our final published study, but your contributions will remain anonymous, although we may publish some analysis of respondents by region and age.

1. In what year did you qualify?

Please enter the year	
-----------------------	--

2. In which of the following regions do you practise?

(please select one box)

Greater London	?
South East (Kent, Surrey, Sussex, Hampshire, Isle of Wight, Berks, Bucks, Oxfordshire, Northants)	?
South West (Avon, Gloucestershire, Wiltshire, Somerset, Dorset, Devon, Cornwall, Isles of Scilly)	?
Northern (Northumberland, Durham, Cleveland, North Yorkshire, West Yorkshire Humberside)	?
North West (Cumbria, Merseyside, Lancashire, Greater Manchester, Cheshire)	?
West Midlands (Birmingham, Worcestershire, Warwickshire, Staffordshire, Shropshire)	?
Trent (South Yorkshire, Nottinghamshire, Derbyshire, Lincolnshire, Rutland, Leicestershire)	?
Eastern (Bedfordshire, Cambridgeshire, Essex, Hertfordshire, Norfolk, Suffolk)	?
Scotland, Wales or Northern Ireland	?

3. How much would you say you know about Choose and Book? Would you say you (please select one box)

know a lot,	?
know something, or	?
know very little?	?

4. Do you understand the expected benefits and purpose of Choose and Book?

Yes	?
No	?

5. Are you aware of the need to offer patients four or five choices when referring for elective surgery from December 2005?

Yes	?
No	?

6. Have you had the opportunity to feed into any consultations for Choose and Book?

Yes	?
No	?

7. With regards to the **functionality** of Choose and Book, was consultation by the National Programme for Information Technology with GPs and other clinicians... (please select one box on each line)

	Yes	No	Don't Know
adequate?	?	?	?
timely?	?	?	?

8. What should the National Programme for Information Technology do to consult and inform GPs and other clinicians? Please select all that apply.

Features in trade publications (e.g. HSJ)	?
Mail-shots and leaflets to GP practices	?
Briefings to Professional Executive Committees chairs	?

Features in academic journals (e.g. BMJ)	?
Briefings to Primary Care Trusts	
Started consultation earlier	?
Engaged with the Royal Colleges	?
Features in Royal College publications	?
Conducted learning events in different areas	?
Don't know	?
Other (please write in) _____	?

9. Has the National Programme for IT consulted GPs and other clinicians adequately on the implementation timetable for choose and book?

Yes	?
No	?

10. What opportunities, if any, do you think Choose and Book offers? Please select all that apply.

Greater patient involvement in treatment decisions	?
Better information for GPs on referral patterns	?
Greater convenience for patients	?
Reduced administration	?
Reductions in Do Not Attends	?
Simplified referral process	?
Better patient care	?
Patients will spend less time waiting	?
None	?
Don't know	?
Other (please write in) _____	?

11. Overall, how satisfied would you say you are with the prospect of Choose and Book? Are you... (please select one box)

Very satisfied	?
Somewhat satisfied	?
Neither satisfied nor dissatisfied	?
Somewhat dissatisfied	?
Very dissatisfied	?
Don't know	?

12. Are you aware of any training that you will need in order to implement choose and book?

Yes	?
No	?

(NOTE : If No is selected at Question 12, go to Question 14)

13. Do you know who will be organising and paying for that training?

Yes	?
No	?

14. In your view, what information will be required for **patients** to choose from a range of providers? (select all that apply)

Local access issues (e.g. public transport routes and parking availability)	?
Expected outcomes of treatment	?
Waiting times for first outpatient appointments	?
Waiting times to start of treatment or inpatient appointments (as with urgent cancer referrals)	?
Reputation of providers	?
Quality-of-life measures	?
None	?
Don't know	?
Other (please write in) _____	?

15. What information will **you** want in order to refer patients to a broader range of providers? (select all that apply)

Local access issues (e.g. public transport routes and parking availability)	?
Expected outcomes of treatment	?
Waiting times for first outpatient appointments	?
Waiting times to start of treatment or inpatient appointments (as with urgent cancer referrals)	?
Reputation of providers	?
Quality-of-life measures	?
Peer opinions	?

None	?
Don't know	?
Other (please write in) _____ _____	?

16. a) What impact do you think that Choose and Book will have on the patient's experience of their healthcare? Is it likely to be... (please select one box)

a lot better,	?
a little better,	?
the same,	?
a little worse, or	?
a lot worse?	?
Don't know	?

17. Thinking about health inequalities, and disadvantaged sections of your practice population, do you think the programme will...

reduce health inequalities,	?
have no effect, or	?
increase health inequalities?	?
Don't know	?

18. Will the implementation of 'Choose and Book' require more or fewer resources for ethnic minority, or other disadvantaged groups, than it will for the general population?

Greater resources	?
About the same resources	?
Fewer resources	?
Don't know	?

19. Do you think offering Choose and Book will require you or your practice to work differently?

Yes	?
No	?
Don't Know	?

NOTE IF ANSWER TO QUESTION 19 IS EITHER NO OR DON'T KNOW, GO TO QUESTION 21

20. Please briefly explain how you feel you or your practice will be required to work differently?

--

21. Do you think your practice has the capacity to implement and deliver the Choose and Book programme?

Yes	?
No	?
Don't Know	?

22. What impact do you expect Choose and Book to have on the length of your consultations? Do you think they will be... (select one box)

a lot longer,	?
a little longer,	?
about the same,	?
a little shorter, or	?
a lot shorter?	?
Don't know	?

23. What impact do you think Choose and Book will have on your overall workload? Will it ...

increase a lot,	?
increase a little,	?
stay about the same,	?
decrease a little, or	?
decrease a lot?	?
Don't know	?