

Accredited Official Statistics



Health and Care Experience Survey 2023/24: National Results

May 2024

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Health and Care Experience Survey 2023/24: National Results

The Health and Care Experience Survey (HACE) 2023/24 asked about peoples' experiences, during the previous 12 months, of accessing and using their General Practice and other local healthcare services; receiving care, support and help with everyday living; and caring responsibilities.

Key Points

Over 107,000 people registered with a General Practice in Scotland responded to the survey, giving an overall response rate of 20%.

Experience of General Practice and Out of Hours healthcare:

- 69% of people rated their overall experience of their General Practice as good or excellent: this is a slight increase since the last survey in 2021/22 (67%), but it is lower than the survey prior to that in 2019/20 (79%).
- 84% of people who needed to see or speak to a doctor / nurse quite urgently were seen within 2 working days: this is slightly lower than in 2021/22 (85%) and in 2019/20 (86%).
- 62% received face-to-face appointments at the General Practice: this is a large increase from 2021/22 (37%), but it is lower than in 2019/20 (87%).
- 73% of people rated their overall experience of Out of Hours healthcare as good or excellent: this is higher than in 2021/22 (67%), but it is lower than in 2019/20 (79%).

Experience of help, care and support:

- 63% of people rated their help, care or support services as good or excellent.
- 64% felt they were supported to live as independently as possible.
- 53% felt they had a say in how their help, care or support was provided.

Comparisons over time for the help, care and support section are not presented in this publication due to changes in the opening question to this section, which results in a different cohort of people answering this section when compared to previous years.

Experience of caring responsibilities:

- 62% of carers feel they have a good balance between caring and other things in their life: this is slightly lower than in 2021/22 (63%) and 2019/20 (64%).

- 31% of people felt supported to continue caring: a slight increase compared to 2021/22 (30%), but lower than 2019/20 (34%).

Introduction

The Scottish Health and Care Experience Survey is a postal survey, which was sent to a random sample of people who were registered with a General Practice in Scotland, lived in Scotland, and were aged 17 and over on 25 September 2023.

The survey has been run every two years since 2009 and forms part of the [Scottish Care Experience Survey Programme](#), which is a suite of national surveys which provide local and national information on the quality of health and care services from the perspective of those using them.

Questionnaires were sent out in October and November 2023 asking about peoples' experiences during the previous 12 months.

Aims

The survey's specific objectives are:

For local improvement:

- Provide General Practices with structured feedback on peoples' experiences of their service, relative to other practices in Scotland and to previous results.
- Provide NHS Boards, Health & Social Care Partnerships and General Practice Clusters with information about peoples' experiences in their respective areas, and variation within and between local areas.

For national improvement:

- Inform national planning and monitor performance.
- Identify variation within and between local areas, and if, and how the level of positive and negative experiences has changed over time.
- Highlight areas of best practice and areas for improvement.
- Inform the [Quality of Care Experience National Performance Framework](#) indicator.
- Inform the [NHS Scotland Local Delivery Plan standards](#) on accessing General Practice services.
- Inform nine out of the twenty-three [Integration Indicators](#) under the Public Bodies (Joint Working) (Scotland) Act 2014.

This survey is a means for Scottish Ministers to monitor how well they are fulfilling their duty, under Section 1 of the NHS (Scotland) Act 1978, to continue to promote a comprehensive and integrated health service that is designed to secure:

- Improvement in the physical and mental health of the people of Scotland.
- The prevention, diagnosis and treatment of illness, and for that purpose to provide or secure the effective provision of services in accordance with the 1978 Act.

Context

The Care Experience Programme supports three strategic objectives for both the Scottish Government and NHS Scotland – that care is safe, effective and person centred. It does this by providing a basis for the measurement of quality as experienced by people across Scotland.

In addition, the programme supports the [Chief Medical Officer's vision](#) that, by 2025, we will support the Health and Social Care workforce to practice [Realistic Medicine](#), thereby enabling the delivery of high quality and personalised care to the people of Scotland.

Fieldwork for the previous round of the survey (2021/22) was carried out during the COVID-19 pandemic and this must be kept in mind when comparing the two rounds.

Outputs

In this report, we show the results at a national level.

Other outputs of the survey available on the [Health and Care Experience Survey collection page](#) are:

- An excel spreadsheet showing results at national level and broken down at Health and Social Care Partnership level, Health Board, General Practice Cluster and General Practice level.
- An excel spreadsheet with data used for the charts and tables in this report.
- A technical report with details of the survey design and methodology.

Other material related to the survey, including a copy of the [2023/24 survey questionnaire](#), are available online, together with other [survey materials](#).

In addition, results for each General Practice, General Practice Cluster, Health and Social Care Partnership and NHS Board, as well as time series trends where applicable, are available via an [online dashboard hosted by Public Health Scotland](#).

Throughout this report the survey results are presented as weighted average percentages. Different proportions of people were selected from each General Practice and the response rate varied by age and sex. Weighting the results

provides results which are more representative of the population of Scotland as a whole.

Where applicable, we compare data with results from previous rounds of the survey. All changes over time that are discussed in the report are statistically significant at the ninety-five per cent level. Due to the large sample size, even small changes of 1% in the national results may be statistically significant.

An Accredited Official Statistics Publication for Scotland

These statistics are [accredited official statistics](#). The Office for Statistics Regulation has independently reviewed and accredited these statistics as complying with the standards of trustworthiness, quality, and value in the [Code of Practice for Statistics](#).

These statistics were accredited in April 2012 and accredited official statistics are called National Statistics in the [Statistics and Registration Service Act 2007](#).

Scottish Government statistics are regulated by the Office for Statistics Regulation (OSR). OSR sets the standards of trustworthiness, quality and value in the [Code of Practice for Statistics](#) that all producers of official statistics should adhere to.



Experience of General Practice

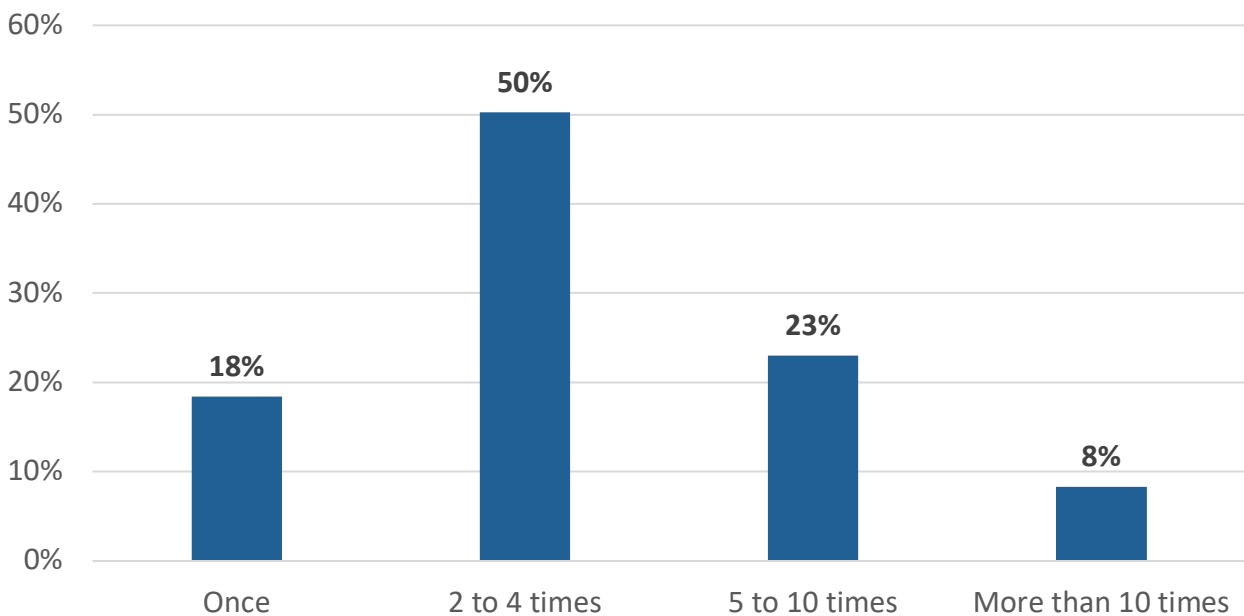
Contacting the General Practice

The survey asked participants when they had last contacted the General Practice named on the survey letter.

In 2023/24, 82% of respondents had contacted the named General Practice in the last twelve months. This is a higher percentage than in the 2021/22 survey (77%), but slightly lower percentage than in 2019/20 (86%).

Of those who contacted their General Practice in the last twelve months, half contacted them between 2 and 4 times. These proportions were similar in 2019/20 and 2021/22.

Figure 1: 'Roughly, how often have you contacted this General Practice in the last 12 months?', 2023/24, weighted percentages.

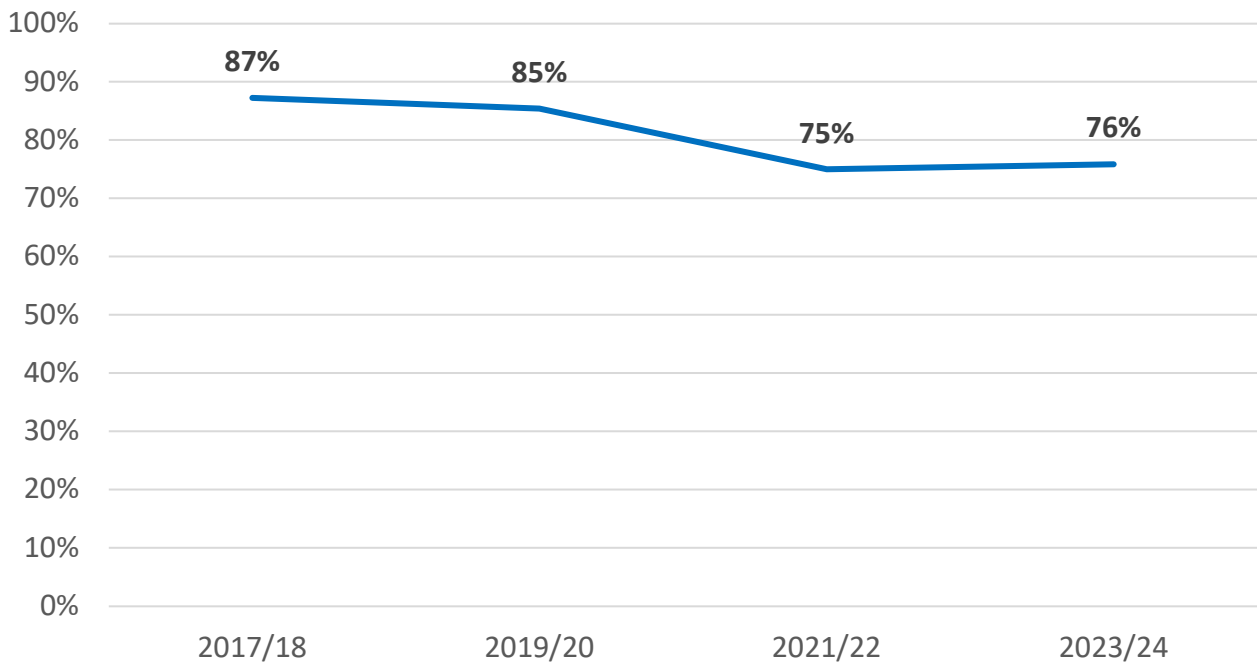


Ease of contact

- 76% of people found contacting their General Practice in the way they wanted fairly or very easy. This is similar to 2021/22 (75%), but lower than in 2019/20 (85%).

The proportion of people finding it easy or very easy to contact their General Practice in the way they wanted has declined since 2017/18.

Figure 2: People finding it easy or very easy to contact their General Practice in the way they wanted, 2017/18 - 2023/24, weighted percentages.



Experience of appointments

Advance booking

Half of respondents (50%) reported they are able to book appointments at their General Practice three or more working days in advance. This is similar to the 2021/22 survey (48%), but lower than in 2019/20 (64%).

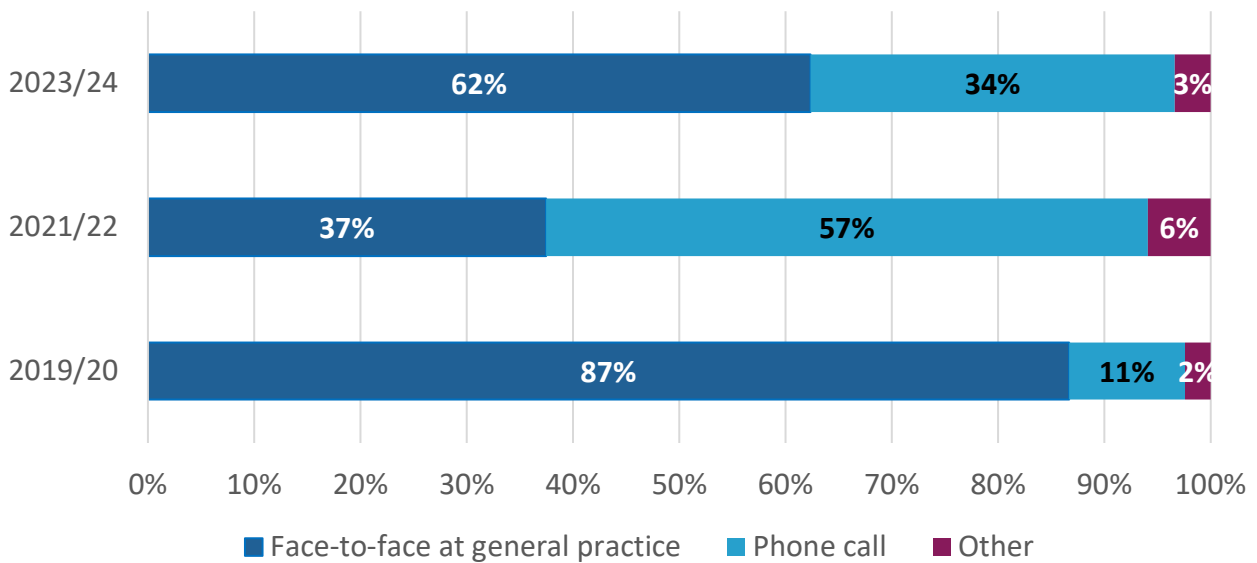
Mode and choice of appointment

We asked what form the last appointment people got from their General Practice took. Of those who were offered an appointment:

- 62% received face-to-face appointments at the General Practice. This is a large increase from 2021/22 (37%), but it is lower than in 2019/20 (87%).
- 34% received phone call appointments. This is a decrease from 2021/22 (57%), but it is a higher proportion compared with 2019/20 (11%).
- Other types of appointments (3% in total) included home visits, videocalls, email or instant message consultations. This is lower than in 2021/22 (6%), but higher than in 2019/20 (2%).

The majority of appointments were face-to-face in 2023/24 and 2019/20, while most appointments were phone calls in 2021/22.

Figure 3: Mode of the last appointment with General Practice, 2019/20 – 2023/24, weighted percentages.



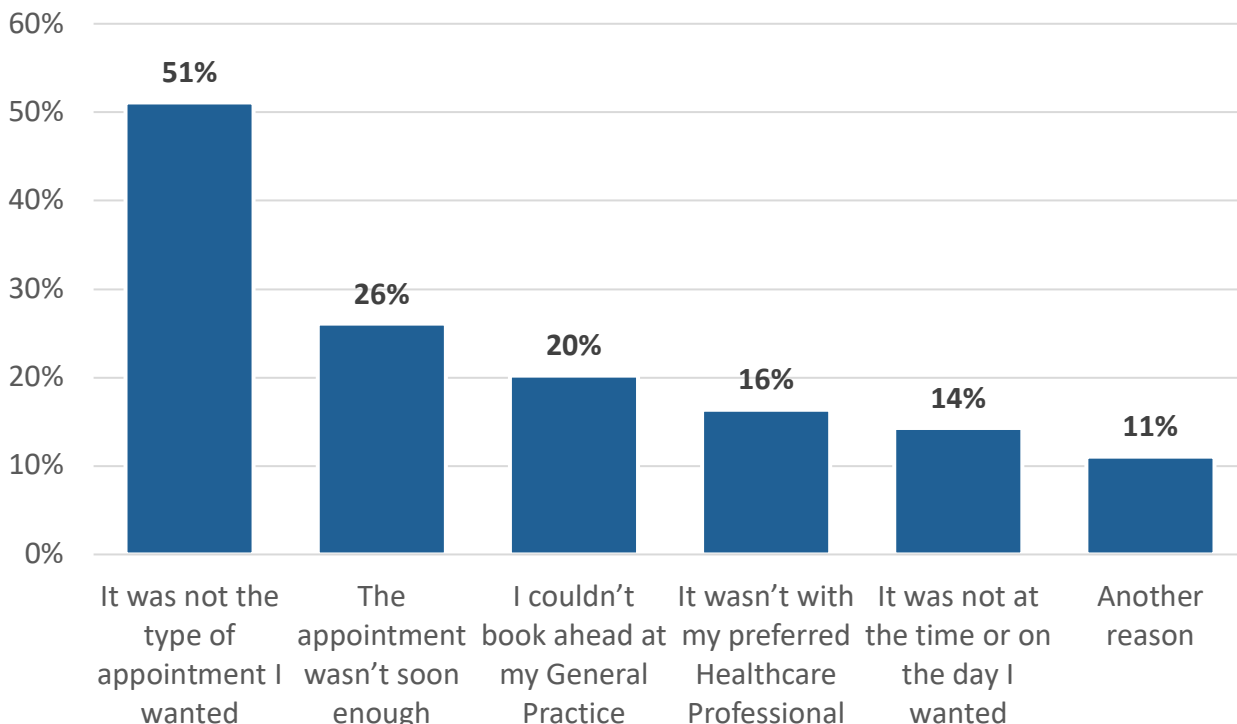
Note: 'Other' includes: home visits, videocalls, via email or instant message, and other ways.

Of the people offered an appointment:

- 81% were satisfied with the appointment and accepted it.
- 18% were not satisfied with the appointment but accepted it.
- 1% were not satisfied and did not take the appointment.

Type of appointment was the main reason for people not being satisfied with the offered appointment.

Figure 4: Reasons for not being satisfied with the offered appointment, weighted percentages.



Note: People could tick one or more of the options above.

Opening hours

- Over four out of five people (82%) are happy with the opening hours of their General Practice. This question was temporarily removed from the survey in 2021/22 and the level of satisfaction is unchanged from 2019/20.

Urgent consultations

People were asked how long they waited the last time they needed to see or speak to a doctor or a nurse from their General Practice quite urgently.

- 84% were able to see or speak to a doctor or a nurse from their General Practice within 2 working days. This is slightly lower than the results from 2021/22 (85%) and 2019/20 (86%).
- 16% waited more than 2 working days to see or speak to a doctor or nurse. This is slightly higher than the results from 2021/22 (15%) and 2019/20 (14%).

When asked about the reasons for waiting longer than 2 days:

- 70% said they were not offered a chance to see or speak to anyone within two days.
- 16% responded that the person they wanted to see was not available in the next 2 days.
- 5% said that the times available in the next 2 days were not convenient.
- 10% gave another reason.

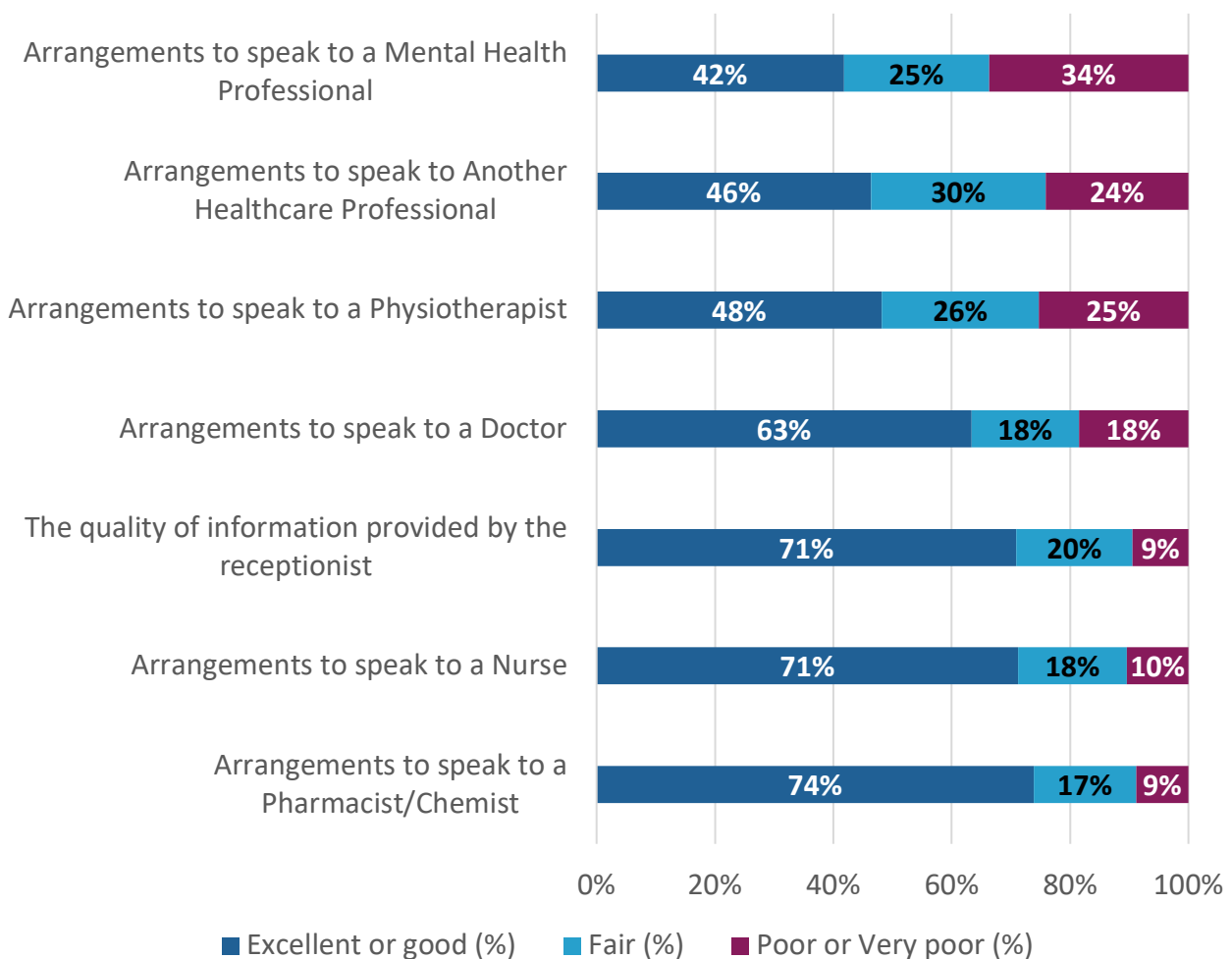
Receptionist and arrangements for getting to speak to a healthcare professional

71% of people rated the quality of information provided by the receptionist as good or excellent. This is higher than in 2021/22 (67%) and lower than the figure in 2019/20 (76%).

Survey participants were asked to rate the arrangements for getting to speak to a few different healthcare professionals.

34% of respondents rated the arrangements to speak to a mental health professional as poor or very poor.

Figure 5: Arrangements to speak to different health care professionals, weighted percentages.

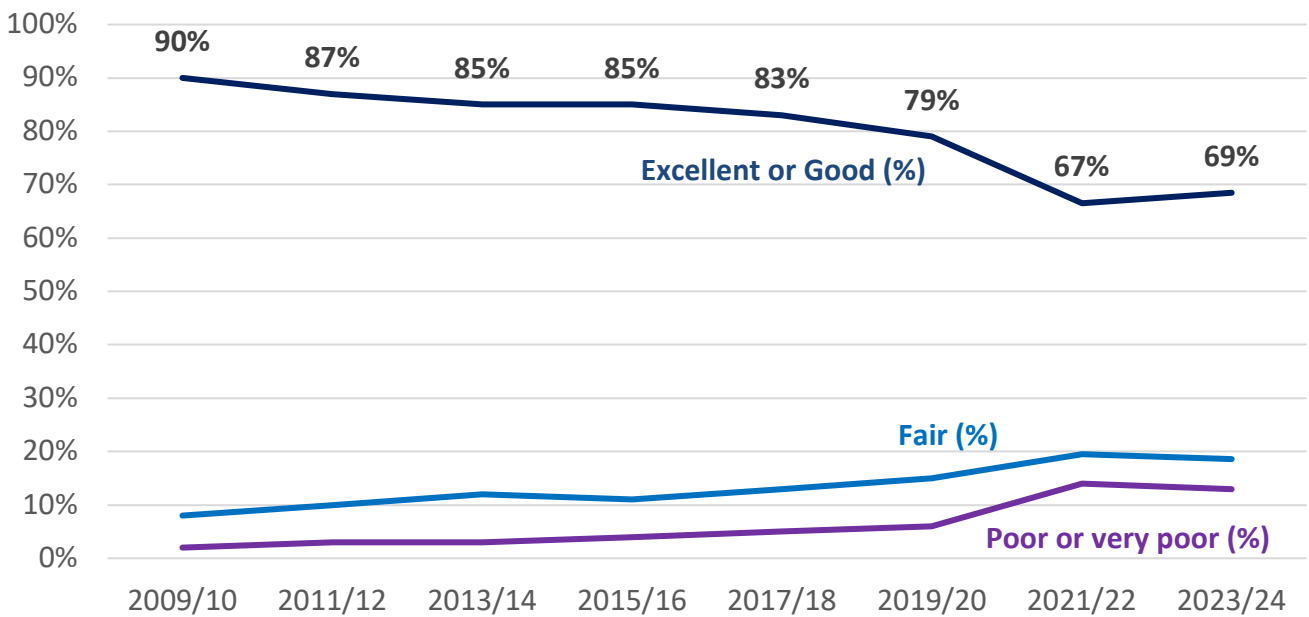


Overall care

69% of people rated the overall care provided by their General Practice as excellent or good, 19% as fair, and 13% rated it as poor or very poor.

The proportion of people rating the overall care from their General Practice as excellent or good increased in 2023/24, but it is still below 2019/20 levels.

Figure 6: Proportion of people rating the overall care provided by the General Practice as excellent or good, fair, or poor or very poor, 2009/10 to 2023/24, weighted percentages.



Treatment or Advice from your General Practice

Treatment or Advice received

Survey participants were asked about the last time that they received treatment or advice at their General Practice.

The most common reason for receiving treatment or advice was for another physical health problem (58%). 4% of respondents did not receive treatment or advice.

The majority of consultations were for another physical health problem.

Table 1: Treatment or advice received at the last consultation, weighted percentages and number of respondents.

Treatment or Advice received	Weighted percentages (%)	Number of respondents
An injury or accident	8%	6,548
Another physical health problem	58%	51,589
A mental health problem	10%	6,378
A routine appointment	19%	19,199
Something else	15%	12,794
No treatment/advice received	4%	3,348

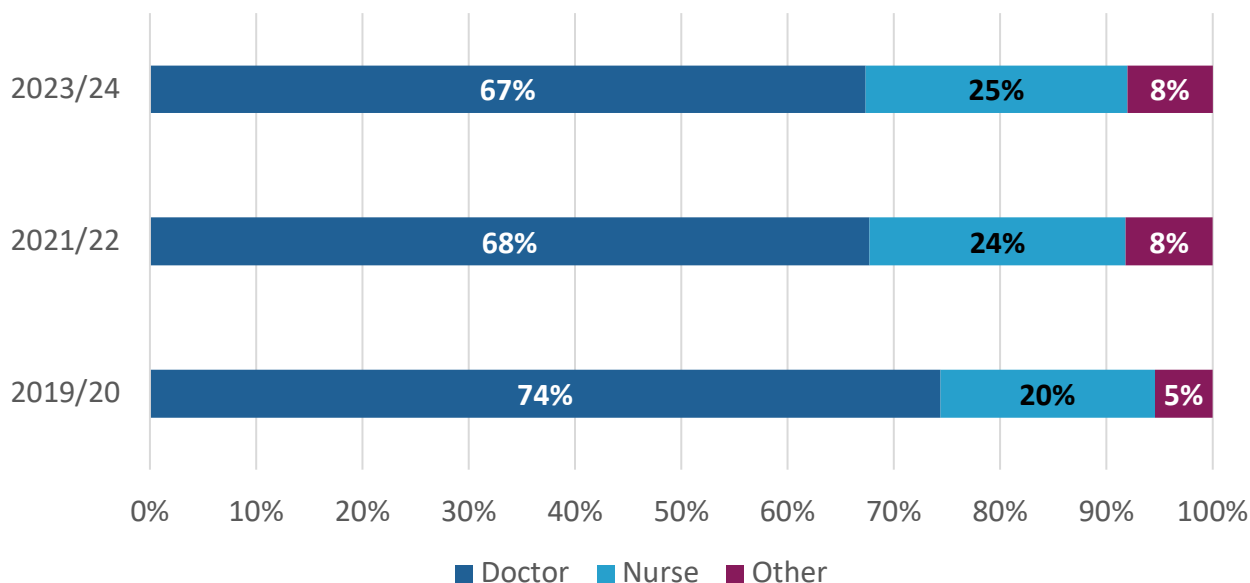
Note: Respondents could tick more than one options and therefore the percentages do not sum to 100.

Healthcare Professional

Referring to the same consultation, participants were asked who they received most of their treatment or advice from.

The proportion of consultations in 2023/24 where doctors gave most of the treatment or advice has decreased since 2019/20, but is relatively stable compared to 2021/22.

Figure 7: Healthcare professional who gave most of the treatment or advice at the last consultation, 2019/20 to 2023/24, weighted percentages.



Person-centred care

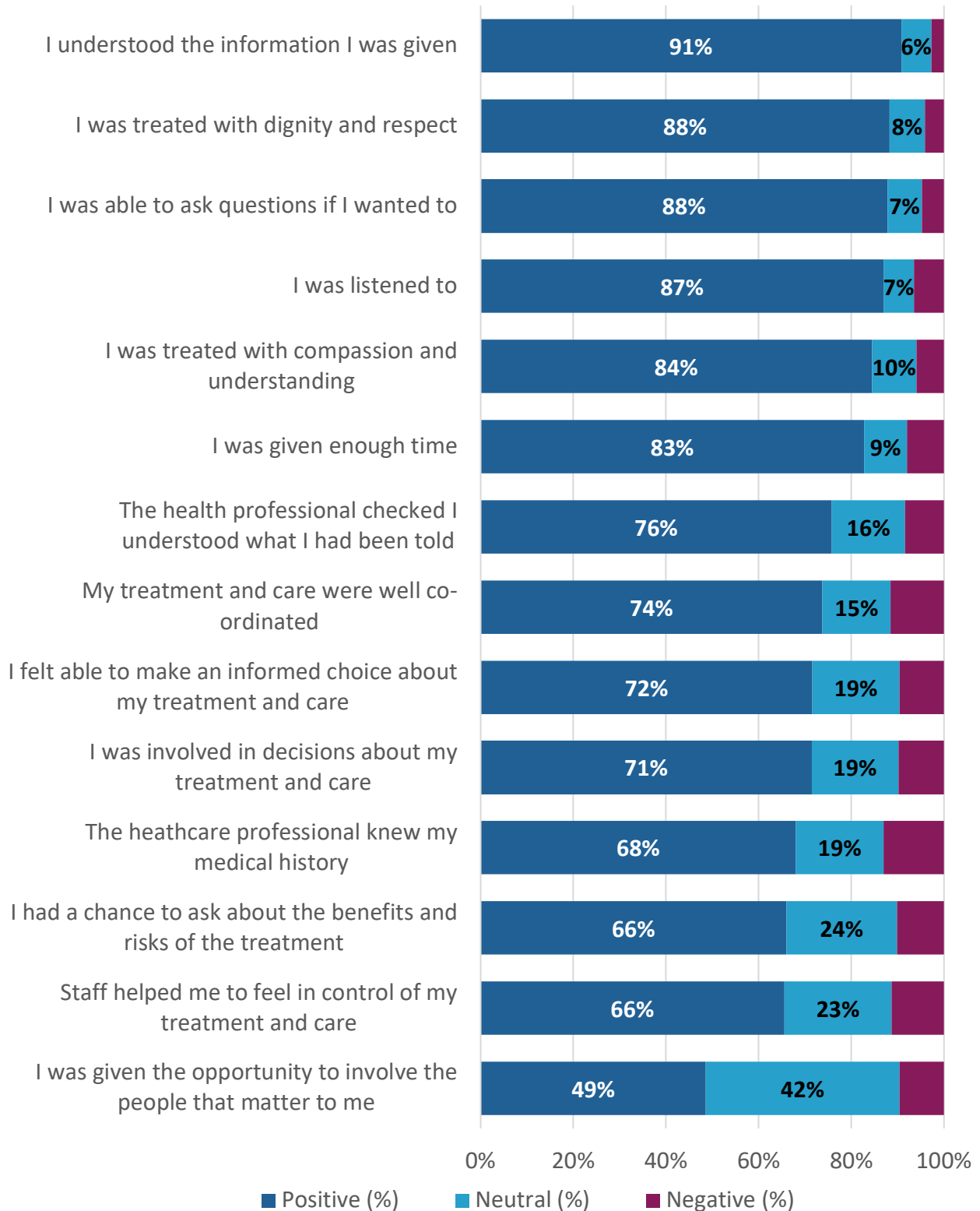
[Person-centred care](#) is about ensuring the people who use NHS services are at the centre of care. It ensures that care is personalised, co-ordinated and enabling so that people can make choices, manage their own health, and live independent lives, where possible.

Participants were asked whether they agreed with fourteen statements relating to their experience, that describe principles of person-centred care, referring to last time they received treatment or advice at their General Practice. They could choose an option on a 5-point scale ranging from strongly agree to strongly disagree. We classify responses as 'positive' where the respondents agree or strongly agree with the statement, neutral where they neither agree nor disagree, and as negative where respondents disagree or strongly disagree.

- The most positively rated statements were: 'I understood the information I was given' (91%), 'I was treated with dignity and respect' (88%), and 'I was able to ask questions if I wanted to' (88%).
- The most negatively rated statements were: 'The healthcare professional knew my medical history' (13%), 'My treatment and care were well coordinated' (11%), and 'Staff helped me to feel in control of my treatment and care' (11%).

Among the person-centred statements, the most positively rated statement was: ‘I understood the information I was given’, and the most negatively rated statement was: ‘The healthcare professional knew my medical history’.

Figure 8: Person-centred care statements, agreement, weighted percentages.



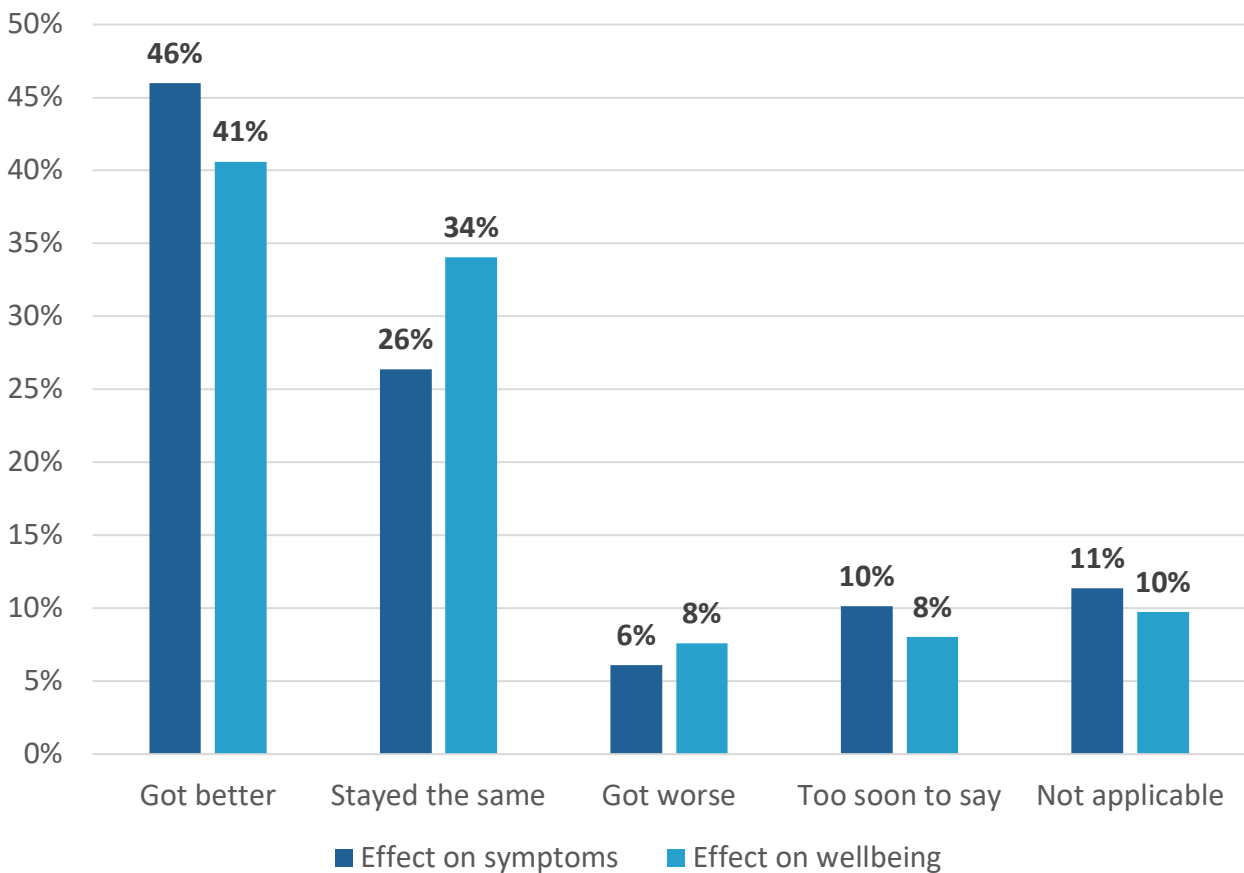
Effect of Treatment or Advice

People were asked to describe the effect that the treatment or advice received from a General Practice had on both the symptoms they were experiencing and their overall wellbeing.

- 46% of respondents reported that their symptoms got better, and 41% reported that their overall wellbeing got better.
- 6% of people reported that their symptoms got worse, and 8% of people reported that their overall wellbeing got worse.

Treatment / advice tend to have more positive effects on symptoms than on overall wellbeing.

Figure 9: Effects of care on symptoms, and overall wellbeing, weighted percentages.



Out of Hours Healthcare

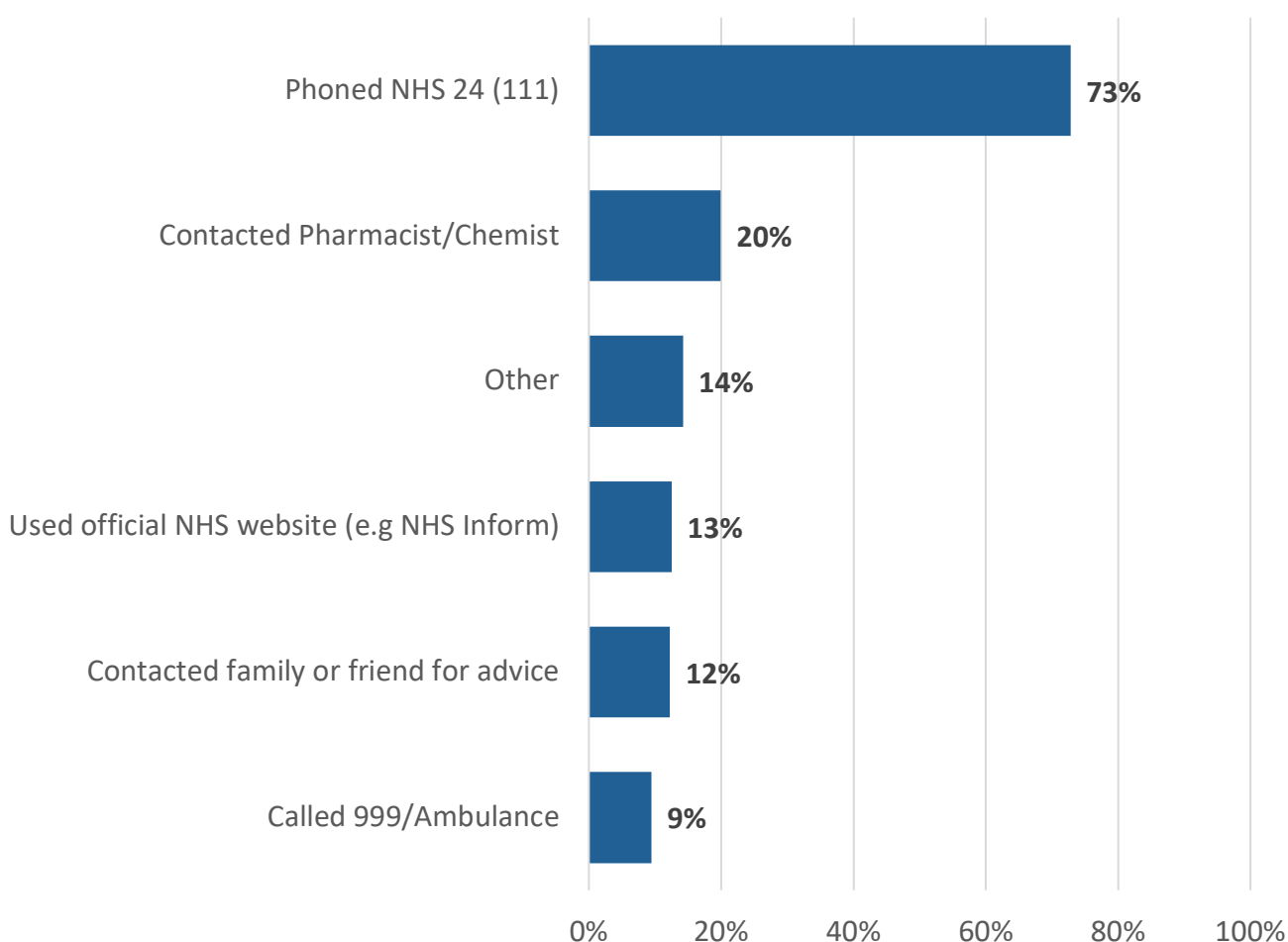
Out of Hours healthcare: Contacts

In the last 12 months, 20% of people contacted an NHS service when they wanted to see a healthcare professional, but their General Practice was closed. This is an increase from 15% in 2021/22.

These people, who received Out of Hours healthcare, were asked to think about the last time they tried to get treatment when their General Practice was closed, and describe what they did. They could tick one or more options.

The majority of people phoned NHS 24 the last time they tried to get treatment when their General Practice was closed.

Figure 10: Who people contacted when trying to access healthcare when their General Practice was closed, weighted percentages.

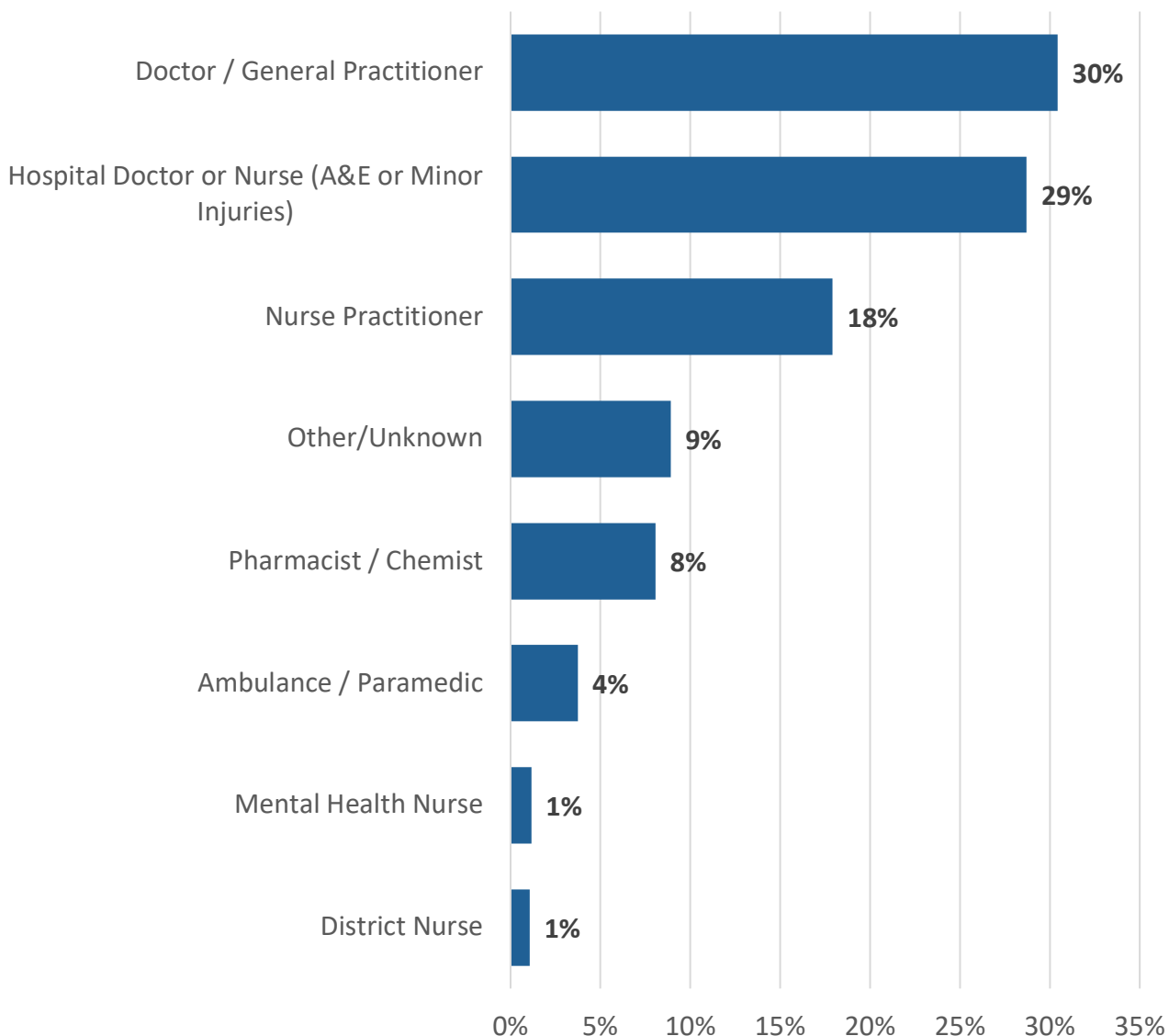


Note: Respondents could tick more than one options and therefore the total of percentages does not add to 100.

Healthcare Professional, Mode of the Consultation and Treatment / Advice Received

The majority of people received most of their treatment / advice either from Doctor / General Practitioners (30%) or from a Hospital Doctor or Nurse (A&E or Minor Injuries, 29%).

Figure 11: Healthcare professionals people received most of their treatment or advice from when seeking Out of Hours healthcare, weighted percentages.

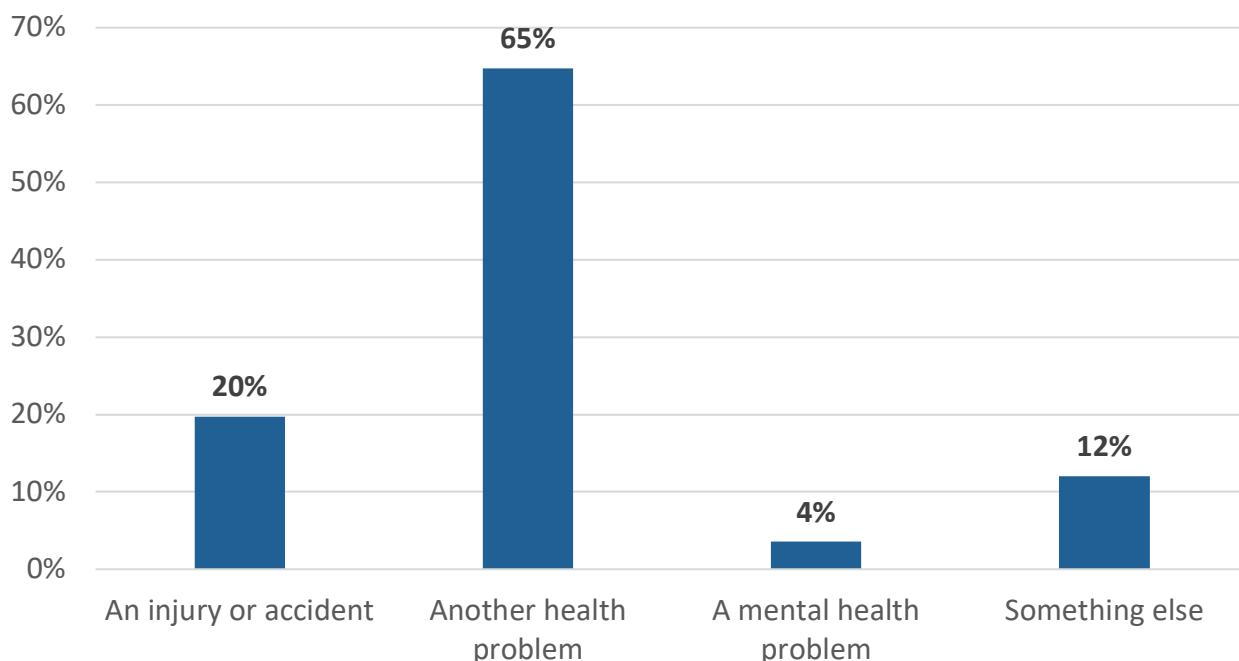


Mode of consultation

- Out of Hours consultations were predominantly either at hospital / location (50%), or over the telephone (44%).
- A minority of people were seen at their home / homely setting (5%), or received treatment or advice using a video call like Near me or Zoom (1%).

Of all Out of Hours consultations, 20% of consultations were for an injury or accident, and 65% for another health problem.

Figure 112: Treatment / Advice received during Out of Hours healthcare, weighted percentages.



Care experience: Person-centred care and overall experience

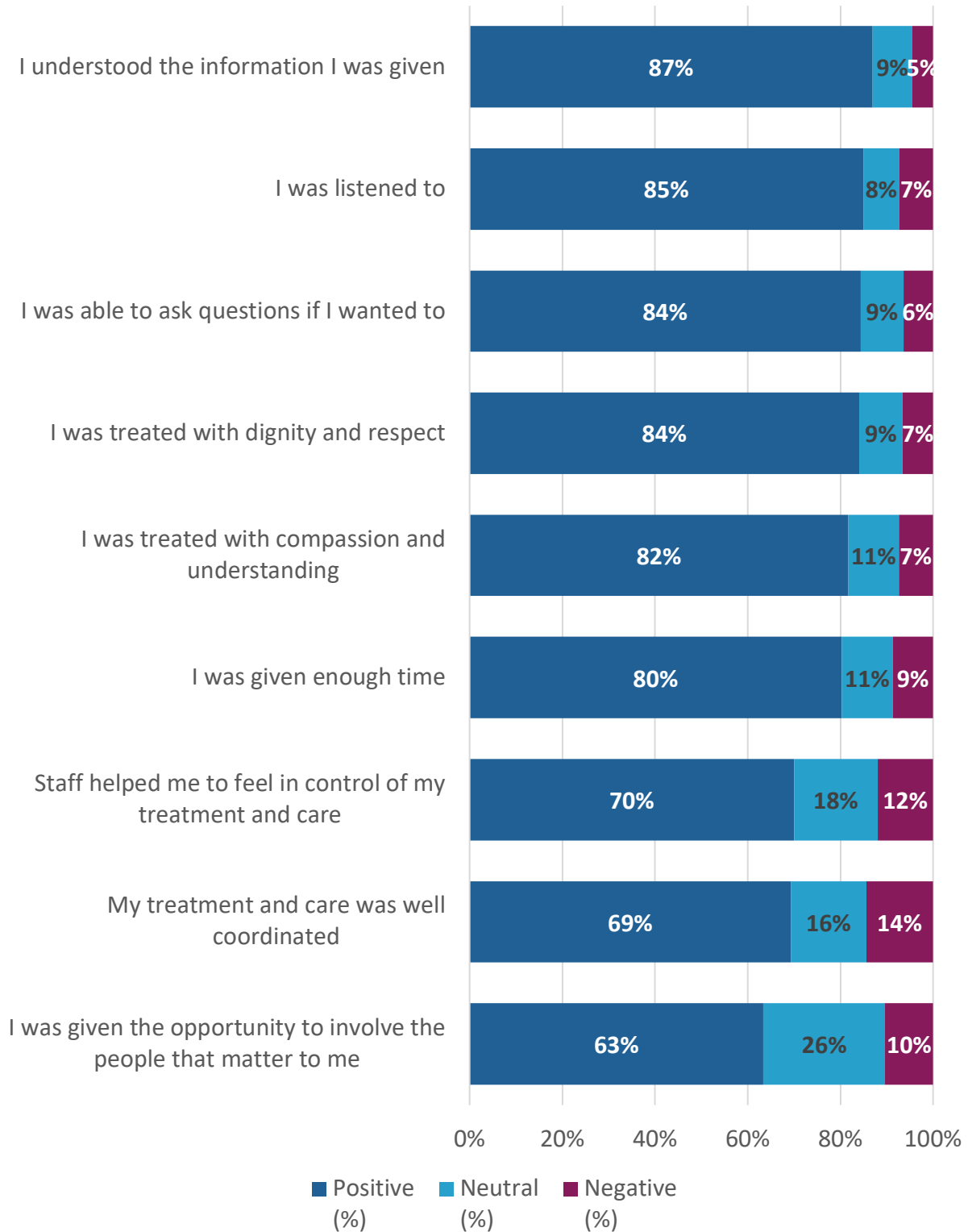
Participants were asked whether they agreed with nine statements, relating to their experience, that describe principles of person-centred care, referring to the last time they received Out of Hours care.

As in the previous section on person-centred care, we classify responses where the respondents agree or strongly disagree with the statement as 'positive', where they neither agree nor disagree as neutral, and responses where they disagree or strongly disagree as negative.

- The most positively rated statements were: 'I understood the information I was given' (87%), 'I was listened to' (85%), 'I was able to ask questions if I wanted to' (84%), and 'I was treated with dignity and respect' (84%).
- The most negatively rated statements were: 'My treatment and care was well coordinated' (14%), 'Staff helped me to feel in control of my treatment and care' (12%), and 'I was given the opportunity to involve the people that matter to me' (10%).

The most positively rated person-centred statement was: ‘I understood the information given to me’, and the most negatively rated statement was: ‘My treatment and care was well coordinated’.

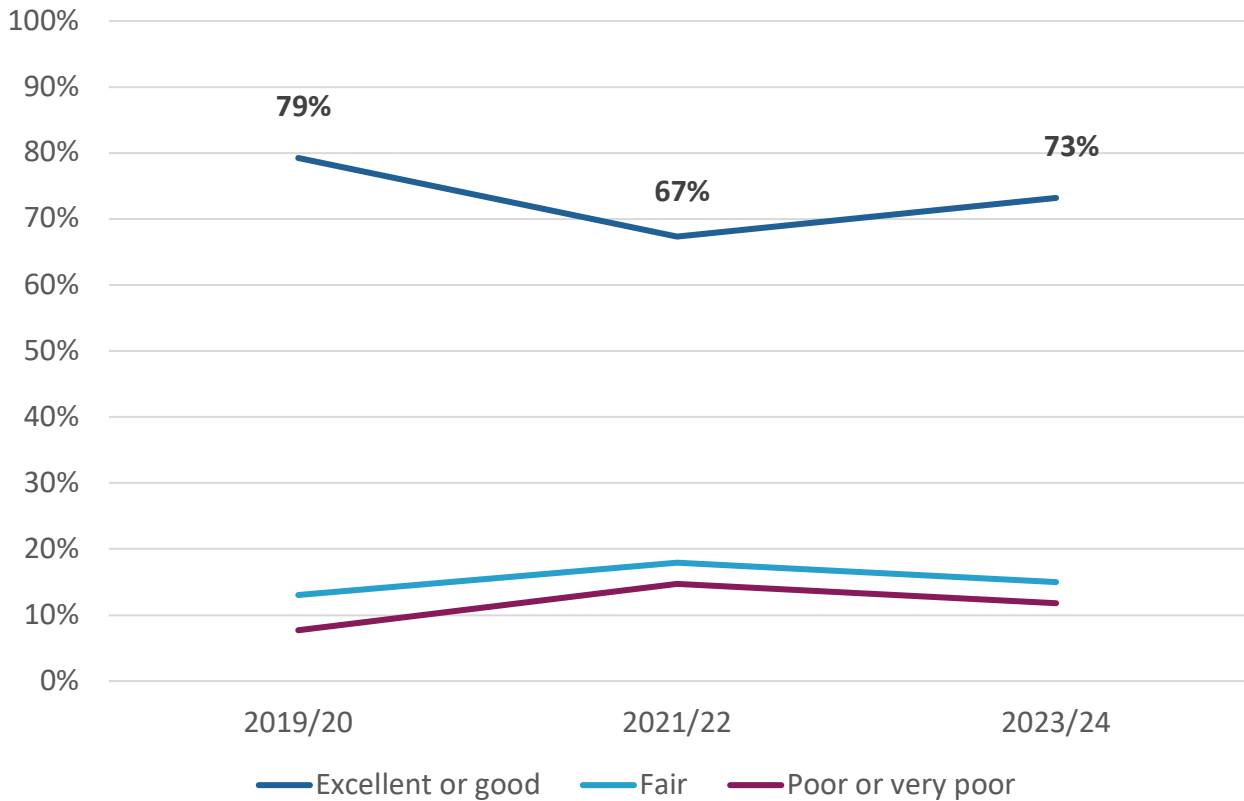
Figure 13: Person-centred care statements for Out of Hours healthcare, agreement, weighted percentages.



Survey recipients were asked 'Overall, how would you rate the care you experienced from this service?'

The proportion of people rating overall care from Out of Hours healthcare as excellent or good increased compared with 2021/22, but it is lower than in 2019/20.

Figure 14: Out of Hours care, rating of overall care, 2019/20 to 2023/24, weighted percentages.



Care, Support and Help with Everyday Living

In this chapter, we report the survey results on care, support and help with everyday living, including help that people get from any organisations, friends or family.

Use of Care Services

12% of respondents received help or support with everyday living, 4% did not have help, but felt they needed it, and 84% did not need help.

Table 2: Help and support with everyday living received in the 12 months prior to the survey, weighted percentages, and number of respondents.

	Weighted responses (%)	Number of respondents
Yes, help for me with personal tasks	7%	8,953
Yes, help for me with household tasks	7%	9,159
Yes, help for me for activities outside my home, e.g. learning, working, socialising	5%	5,121
Yes, help for me with adaptations, and/or equipment for my home	4%	5,700
Yes, an alarm service (e.g. an electronic device I wear) that can get me help	2%	3,146
Yes, emotional/community/peer support	5%	5,315
No, not had any help but I feel that I needed it	4%	3,785
No, I didn't need any help	84%	83,276

Note: Respondents could tick more than one option and therefore the total of percentages does not add to 100.

In 2023/24, the question asking whether someone receives help and support for everyday living changed. It no longer asks about help with caring responsibilities, as it did in previous rounds of the survey. This change was made because during questionnaire testing, some respondents were unsure as to whether to answer the questions in this chapter in relation to their experiences of support in their caring role, or in relation to the services that the person they care for receive.

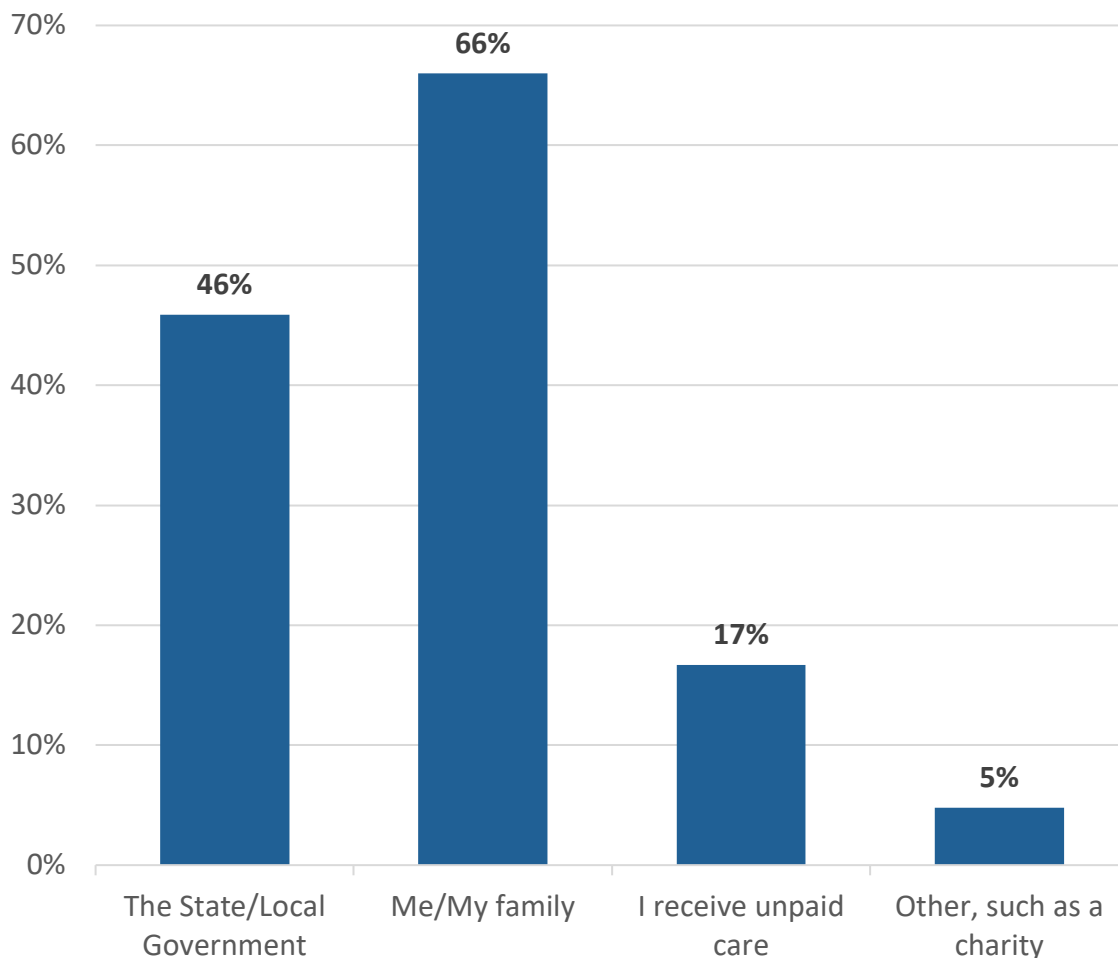
A new response option on emotional / community / peer support has been added to reflect the importance that many people receiving care place on this. Consequently,

the results for this chapter are not comparable with the results from previous rounds of the survey.

Survey recipients who had indicated that they had received some type of help and care services for everyday living were asked: 'Who funds your help or support with everyday living?'. It is possible to receive help or support with everyday living from a variety of different sources and respondents were able to tick more than one response option.

66% of respondents stated that their help and support for everyday living is funded by themselves or their family.

Figure 15: Who funds your help or support with everyday living? Weighted percentages.



Note: Respondents were able to tick more than one response related to the help they received and therefore percentages do not add to 100.

In terms of how help and support was arranged:

- 22% were offered a choice, and got their preference.
- 2% were offered a choice, but did not get their preference.
- 30% were not offered any choices in how their care was arranged.
- 13% did not want a choice.

- 32% could not remember or did not know whether they had a choice in how their help and care was arranged.

Experiences of Care Services

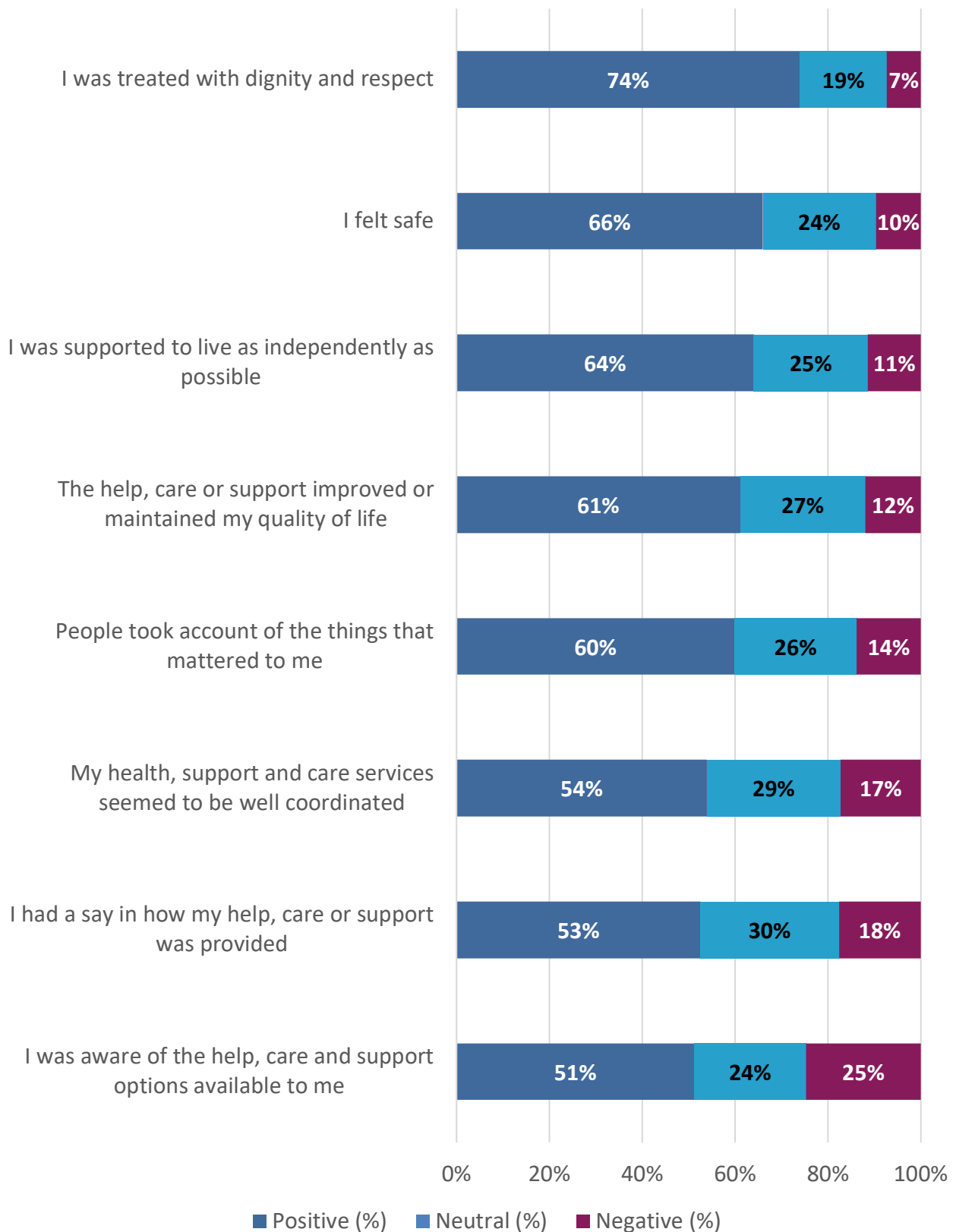
People receiving care, support and help with everyday living were asked whether they agreed with eight statements relating to their experience. These statements describe principles of [person-centred care](#). As in previous sections, we classify responses where they agree or strongly agree with the statement as 'positive', responses where they neither agree nor disagree as 'neutral', and responses where they disagree or strongly disagree as 'negative'.

- The most positively rated statement was: 'I was treated with dignity and respect' (74%), and the least positively rated statement was: 'I was aware of the help, care and support options available to me' (51%).

The results of the person-centred care statements are shown in Figure 16 below.

74% of people receiving care agreed that 'I was treated with dignity and respect'.

Figure 16: Person-centred care statements for care, support and help with everyday living, agreement, weighted percentages.



Respondents who have received help or support for everyday living were asked to give their care a rating from Excellent to Very Poor. Respondents were asked to exclude any help and support received from friends and family in their rating.

- 63% rated their help, care or support services as good or excellent.
- 21% rated it as fair.
- 16% rated it as poor or very poor.

Unmet and Under-met Need

Those who receive help and care services for everyday living, or who responded that they didn't receive help but felt they needed it, were asked:

'If you are not receiving all the help and care services for everyday living that you feel you need, which options describe your situation? Please tick all that apply'.

The most common reason provided for why people felt that they needed more help and care services was that they weren't sure if they were eligible for more, or any, support.

Table 3: 'If you are not receiving all the help and care services for everyday living that you feel you need, which options describe your situation?', weighted percentages.

	Weighted responses (%)	Number of respondents
I did not know how or where to ask for help	23%	2,990
My current care service is not enough	7%	923
I contacted my local authority and have not heard back	4%	550
I have had an assessment, but care has not been provided	6%	725
I do not qualify for services	13%	1,684
I am waiting to be reassigned to a different provider	2%	225
I am not sure I am eligible	31%	4,302
Other	10%	1,348
Not applicable	29%	4,378

Note: Respondents could tick more than one option, and therefore the total of percentages does not add to 100. All responses to the question are included, including "Not Applicable".

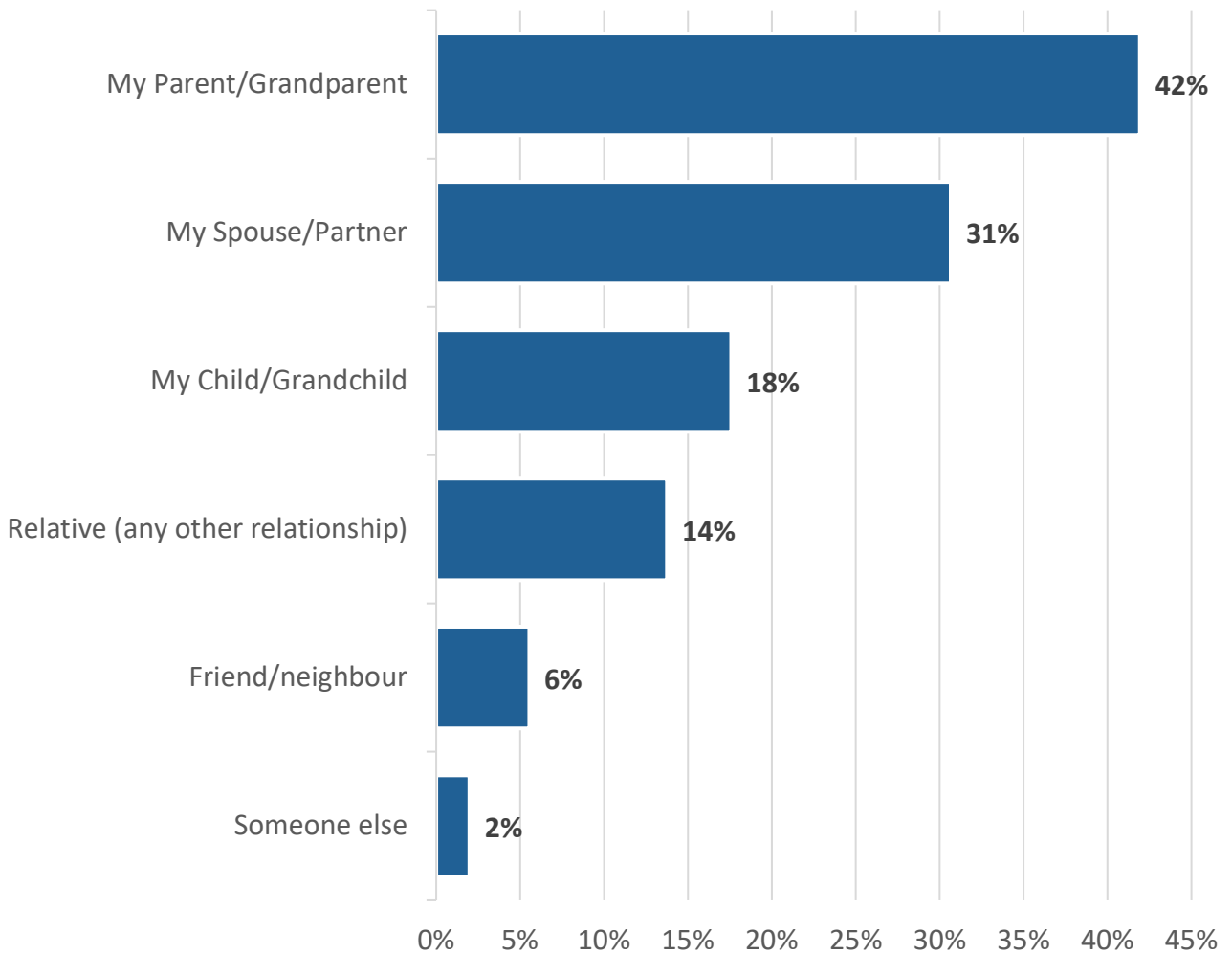
Experiences of Carers

Characteristics of Carers and support received

The survey estimates that 16% of respondents regularly help, support or look after someone because they are living with long-term physical / mental health / disability or problems related to old age.

42% of people who provide regular care or support, care for a parent or grandparent.

Figure 17: Carers by who they help or support, weighted percentages.

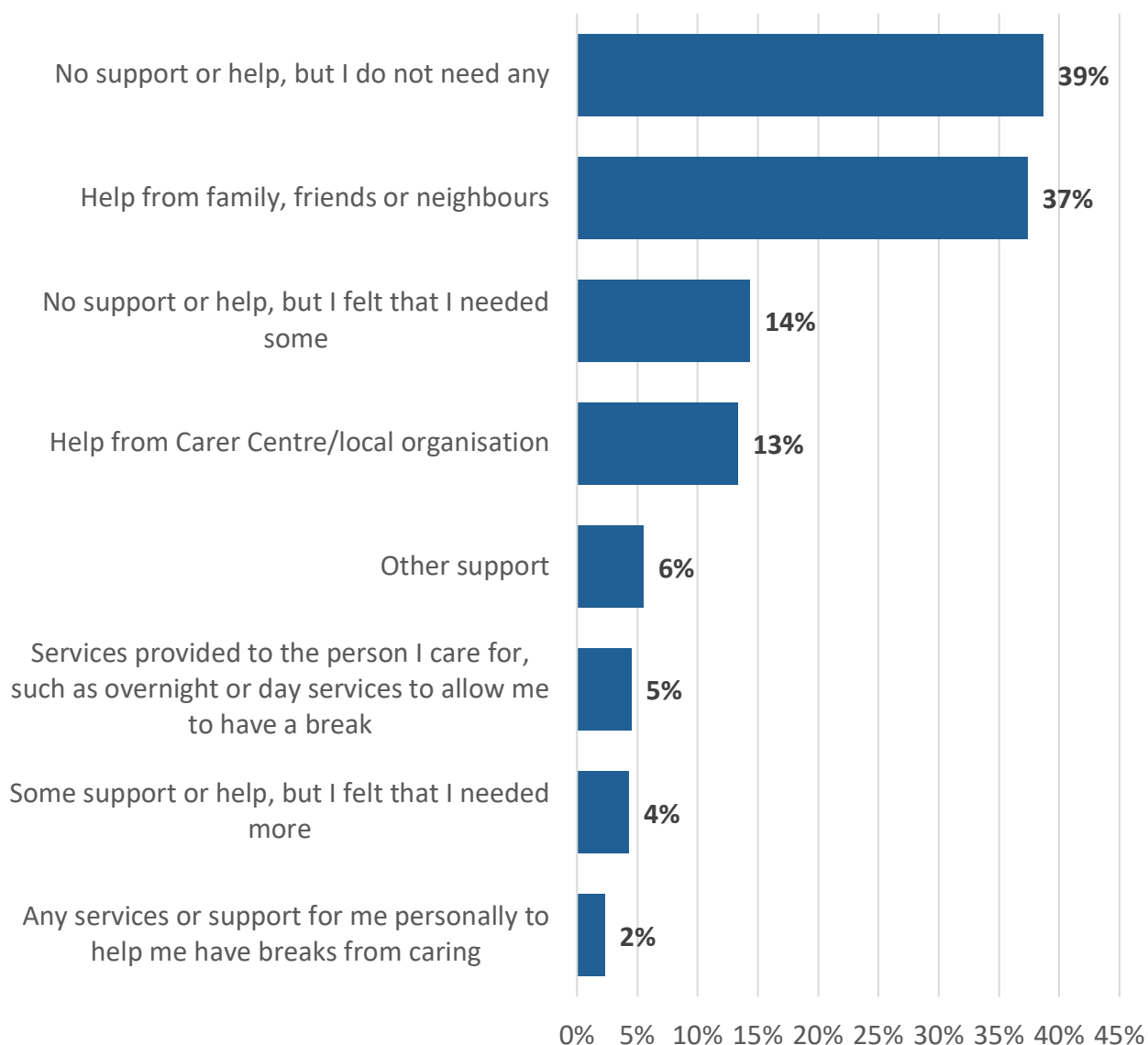


Note: Respondents were able to tick more than one response so percentages will not sum to 100.

Carers were asked if they received any help in their role over the past year.

39% of carers receive no support to help with their caring role, but do not need any. 14% of carers do not get any support or help, but feel they need some, and 4% receive some support or help, but feel they need more.

Figure 18: 'Have you received any support to help with your caring role in the last 12 months?', weighted percentages.



Note: Respondents were able to tick more than one response so percentages will not sum to 100.

The survey also asked whether carers had received an assessment or written plan of their caring role. The majority, 89%, responded that they hadn't. Only 6% responded 'Yes', with 5% saying they didn't know.

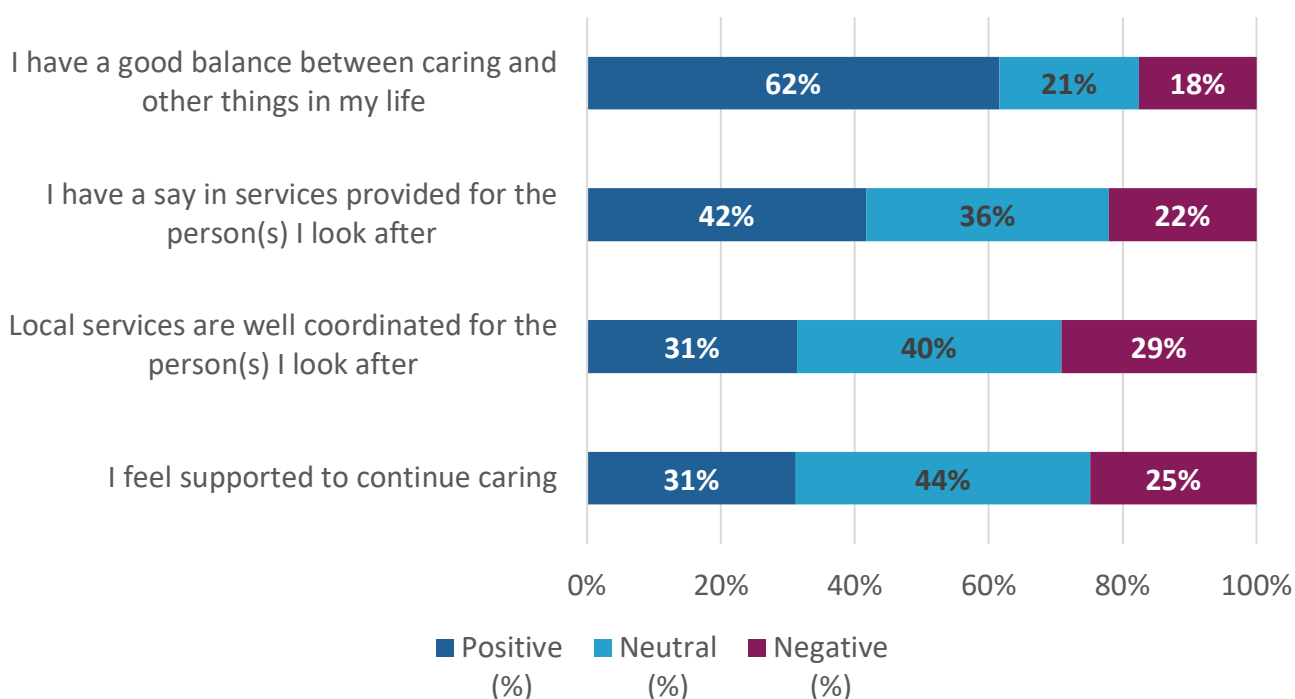
Impact of caring and support for carers

Carers were asked whether they agreed with a number of statements about how they feel as a carer most of the time, based on the principles of person-centred care. As in previous sections, we classify responses where they agree or strongly agree with the statement as 'positive', responses where they neither agree nor disagree as neutral, and responses where they disagree or strongly disagree as negative.

- 62% of carers agree with the statement 'I have a good balance between caring and other things in my life', this is similar to 2021/22 (63%) and slightly lower than in 2019/20 (64%). This is the most positively rated person-centred statement.
- About 31% of carers agree or strongly agree with the statements 'I feel supported to continue caring' and 'Local services are well coordinated for the person(s) I look after'. This is slightly higher than in 2021/22 (30% and 29% respectively), but lower than in 2019/20 (34% and 38% respectively).

62% of carers agree with the statement 'I have a good balance between caring and other things in my life.'

Figure 19: Statements related to the impact of caring on the carers' life and the support they feel they receive in their caring role.



Tell us what you think

We are always interested to hear from our users about how our statistics are used, and how they can be improved.

Enquiries

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