

Citizens' Panel for health and social care

Survey on preferred methods of accessing health and care services and NHSScotland Climate Emergency and Sustainability Strategy

Report, May 2024

© Healthcare Improvement Scotland 2024

Published May 2024

This document is licensed under the Creative Commons Attribution-Noncommercial-NoDerivatives 4.0 International Licence. This allows for the copy and redistribution of this document as long as Healthcare Improvement Scotland is fully acknowledged and given credit. The material must not be remixed, transformed or built upon in any way. To view a copy of this licence, visit <https://creativecommons.org/licenses/by-nc-nd/4.0/>

www.hisengage.scot

Contents

- Foreword 2
- Executive Summary 5
- Chapter 1: Introduction and context 10
- Chapter 2: Preferences for accessing health and care services..... 12
- Chapter 3: NHSScotland Climate Emergency and Sustainability Strategy 19
- Appendix 1: Questionnaire 37
- Appendix 2: Response profile 46

Foreword

Welcome to the thirteenth Citizens' Panel report for health and social care in Scotland. This report details the findings from the full Panel survey, which collected feedback between November 2023 and February 2024.

The questions were on two different topics:

How people prefer to access health and care services

At a recent meeting of the NHS Chief Executives there was discussion about trying to better understand public preference on accessing health and care services. The Citizens' Panel was asked to feedback on this topic to provide public insight on this issue to the NHS Chief Executive's Group.



NHSScotland Climate Emergency and Sustainability Strategy

A separate topic commissioned by the Scottish Government asked questions on NHSScotland's Climate Emergency and Sustainability Strategy. Feedback on this topic will be considered by NHSScotland to address this challenge, building a health system that cares for people and the environment. I would like to acknowledge The Health Foundation and Ipsos whose report 'Going green: what do the public think about the NHS and Climate Change?'¹ helped influence some of the Citizens' Panel questions on this topic.

The Citizens' Panel has allowed us to seek the views of a cross-section of the Scottish public and topics are determined from priority areas in the Scottish Government Health & Social Care Directorate.

I would like to thank the individuals who have volunteered to be part of the Panel, who together make up a representative section of the population of Scotland. In addition, I would like to thank our Public Experience Volunteers and Public Partners who contributed to user testing of the survey questions. I would also like to thank our research partners, Research Resource, who conducted the survey and our partners in Scottish Government for their contribution, as well as all staff involved from Healthcare Improvement Scotland.

I hope you enjoy reading this report.

Suzanne Dawson
Chair, the Scottish Health Council

¹ <https://www.health.org.uk/publications/long-reads/going-green-what-do-the-public-think-about-the-nhs-and-climate-change>

Citizens' Panel for health and social care

This infographic summarises the key findings from the thirteenth survey. We asked questions about:

- How people prefer to access health and care services, and
- NHSScotland Climate Emergency and Sustainability Strategy

In total **589** panel members responded to the survey by post, email or telephone, which represents a **57%** response rate.

How people prefer to access health and care services

Statements on booking and attending appointments

Booking - First Preference



- Telephone 52%
- Online booking system 35%
- Speak to someone face to face 9%
- Email 2%
- Other 2%

Attending - First Preference



- In person - face to face 89%
- Online video 5%
- Telephone 4%
- Other 2%

Seeking Information - First Preference



- Access information online from a trusted source 38%
- Speak to someone face to face 30%
- Telephone 21%
- Email 6%
- Speak to someone via online video 4%

Seeking Advice - First Preference



- Speak to someone face to face 54%
- Telephone 21%
- Access information online from a trusted source 15%
- Email 5%
- Speak to someone via online video 4%
- Other 1%

What matters to you about access to health and care services

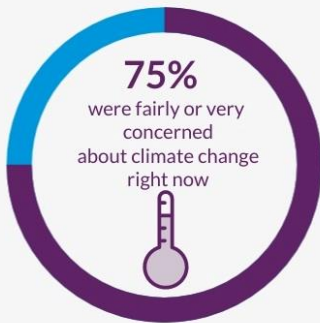
Accessibility and availability of appointments/ being able to get through by phone

Speed and Efficiency

Preference for Face-to-Face/ human interaction

NHSScotland Climate Emergency and Sustainability Strategy

Concerns about Climate Change



Climate Change Threat



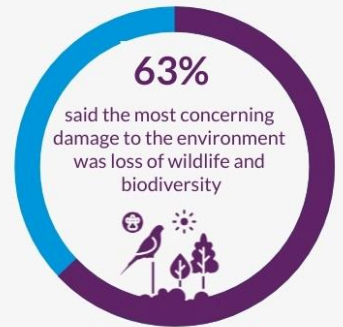
said climate change is a fair or great deal of threat to their health personally



said climate change is a fair or great deal of threat to their family's health



said climate change is a fair or great deal of threat to the health of the citizens' of Scotland



Responsibility and priority around climate change in NHSScotland

75%
agreed or strongly agreed that the NHS has a responsibility to reduce its impact on climate change and the environment



81%

agreed or strongly agreed that patients have a responsibility to help the NHS to reduce its impact on climate change and the environment

55%
agreed or strongly agreed that the NHS should make reducing its impact on climate change and the environment one of its top priorities

What would you be prepared to do to help NHSScotland reduce climate change

94%
would return unused medicines or empty inhalers to the pharmacy for reuse or disposal



97%
would return medical equipment that was no longer needed to be reused



Adverse weather concerns affecting NHSScotland services



28%
have had adverse weather ever prevent them or someone they care for, from being able to access a NHSScotland service

Net Zero

44% were aware that the NHS aims to be Net Zero

80% support or strongly support NHSScotland's policy to become net zero

Executive Summary

What is a Citizens' Panel?

A Citizens' Panel is a large, demographically representative group of citizens regularly used to assess public preferences and opinions. A Citizens' Panel aims to be a representative, consultative body of residents. They are typically used by statutory agencies, particularly local authorities and their partners, to identify local priorities and to consult the public on specific issues.

Background and context

The Citizens' Panel for health and social care was established in 2016 to be nationally representative and has been developed at a size that allows statistically robust analysis of the views of the Panel members at a Scotland-wide level. This was the first time a national Citizens' Panel of this nature, focusing on health and social care issues, had been established in Scotland. Panel members were randomly selected from the general population and invited to join the Panel. Some targeted recruitment also took place to ensure that a representative Panel was created.

The Panel was refreshed in 2022 and a small number of additional recruits added in 2023. The 2022 refresh replaced Panel members who either did not want to continue being members or that had not responded to previous surveys with fresh Panel members. The 2023 additional recruits were targeted in areas or demographics that were underrepresented in the Panel. At the time of this survey in the summer 2023, there are 1028 Panel members from across all 32 local authority areas.

This report details the findings from the thirteenth Panel survey which collected feedback between November 2023 and February 2024. The questions were on two different topics:

- How people prefer to access health and care services, and
- NHSScotland Climate Emergency and Sustainability Strategy

A total of 589 responses (57% response rate) were received, either by post, email or by telephone. This level of return provides data accurate to $\pm 4.04\%$ ² at the overall Panel level. In this report we do not report results broken down into sub-categories (for example, gender or age) as they are not statistically significant. All comparisons that are made in this report are statistically significant, unless otherwise stated.

This executive summary details the key findings from the research. More detailed information on the profile of responses can be found in Appendix 2.

² Based upon a 50% estimate at the 95% level of confidence.

Key findings

How people prefer to access health and care services

Findings

The Chief Executives of NHSScotland health boards meet regularly to discuss strategic health policy and operational decisions. At a recent meeting of the NHS Chief Executives Group there was discussion about trying to better understand public preference on accessing health and care services.

To help with this understanding, Panel members were asked about their preferences for accessing services, as well as booking appointments and how to access information. This revealed that telephone contact was the most popular method of booking appointments with over half (52%) stating this was their first preference. On the other hand, face to face contact was more important for respondents when attending appointments or consulting a health care professional (89%) and when seeking advice about healthcare conditions (54%). The first preference for seeking information about health and care services was by accessing information online from a trusted source with 38% stating this would be their first preference, however this was very closely followed by face to face (30%) and over the phone (21%).

When asked about what matters most about accessing health and care services, 39% said that accessibility and availability of appointments was most important, followed by the speed and efficiency of service (29%) and the preference for face to face or human interaction (23%).

Recommendations

Based on these findings Healthcare Improvement Scotland makes the following recommendations to NHS Chief Executive's Group and NHS Boards for consideration:

- Consider the results of this survey when delivering healthcare services to ensure a range of options are available for patients and public to book and attend appointments, as well as seeking advice about their healthcare.
- Ensure face to face contact is an option for all consultations, where feasible.
- Ensure people's preferences are asked and prioritised. And keep in mind that this can change e.g. face to face first consultation and online follow-up meeting.
- Go forward with a more digital approach for booking appointments, though it is important to ensure other ways to book appointments, for example via telephone.
- Consider how to ensure high-quality, up to date information is available online but also communicated in different ways, for example through face to face interactions and via telephone, and accessible to all.

NHSScotland Climate Emergency and Sustainability Strategy

Findings

The second section of the survey began by asking respondents for their opinions on **Climate Change**:

- Three quarters of Panel members were very or fairly concerned about Climate Change (75%), 18% were neither concerned nor unconcerned and 7% were very or fairly unconcerned.
- Of most concern to Panel members in relation to damage to the environment were the loss of wildlife and biodiversity (63%), and this was followed by waste (56%) and air pollution (50%). Just 4% of respondents said they were not concerned about any damage to the environment as a result of Climate Change.
- Following on from this, respondents were asked about the impact of Climate Change and damage to the environment on their own personal health, their family's health and the health of Scotland's citizens. This revealed that over half of respondents were of the opinion that Climate Change and damage to the environment poses a great deal or a fair amount of threat on the health of Scottish citizens (58%) and on the health of Panel members' families (52%). However, just under half of respondents were of the opinion it has a great deal or fair amount of threat on them personally (48%).
- Respondents were more likely to consider Climate Change to pose a great deal of threat in 40 years time (62%) than right now (12%).

Panel members were asked for their opinions concerning **responsibilities and priorities in relation to Climate Change**:

- 81% agreed that patients have a responsibility to help NHSScotland to reduce its impact on Climate Change and the environment.
- 75% agreed NHSScotland has a responsibility to reduce its impact on Climate Change and the environment.
- 55% agreed NHSScotland should make reducing its impact on Climate Change and the environment one of its top priorities, although 20% disagreed.

In terms of actions relating to their **medication** that Panel members would be willing to take to help NHSScotland reduce Climate Change:

- 94% would be in support of returning unused medicines or empty inhalers to the pharmacy for reuse or disposal.
- 86% would support the re-issue of medicines that have been returned by other patients because they were not used, as long as unopened and safety checked.
- 86% would support accepting the exact amount of medication that is prescribed to them without being given any extra.
- 76% would support choosing one medicine over another because it has less of an impact on the environment (with no negative effect on your treatment).

- 68% would support using more environmentally friendly medicine, even if less convenient than regular medicine. E.g. adjusting the dosage/frequency (with no negative effect on your treatment).
- 61% would support taking a more environmentally friendly medicine, even if the NHS has to pay more for the medicine (with no negative effect on your treatment).

With regard to actions that can be taken relating to the **use of medical equipment** and other aspects to help NHSScotland reduce emissions and be more environmentally friendly:

- 97% would support returning medical equipment no longer needed, to be re-used, such as crutches, boots, slings.
- 88% would support reusable personal equipment in hospital, such as a gown, after it has been sterilised and checked for safety.
- 73% would support using public transport when travelling to health and care services, where available/appropriate.
- 70% would support considering the environmental impact of their treatment options as part of deciding their treatment with their health professional (with no negative effect on your treatment).
- 57% would support having a video or telephone GP consultation to reduce travel, even if they would prefer to see someone face to face, although 26% opposed this.

Respondents were asked a number of questions on **adverse weather** and the impact it can have on NHSScotland services:

- More than 6 in 10 respondents (62%) had strong or some concerns that weather may prevent them, or someone they care for, from being able to access an NHSScotland service in the future.
- Just over a quarter of respondents (28%) said that adverse weather had at some point, prevented them or someone they care for, from being able to access an NHSScotland service, and where this was the case, the majority (73%) said this had been due to snow.

By 2040 NHSScotland wants to have achieved '**Net Zero**'. The goal of achieving Net Zero emissions is a crucial part of global efforts to combat Climate Change and limit global warming to below 2 degrees Celsius above pre-industrial levels.

- More respondents were unaware (47%) than aware (44%) that NHSScotland aims to be Net Zero.
- The majority of respondents said that a TV campaign (59%) or social media campaign (52%) would be the best way to reach people to increase awareness of NHSScotland trying to attempt to achieve Net Zero.
- Eight in ten respondents (80%) strongly supported NHSScotland's policy to become Net Zero, 16% neither supported nor opposed it and 4% were opposed or strongly opposed to it.

Recommendations

Based on these findings Healthcare Improvement Scotland makes the following recommendations to the Scottish Government and NHSScotland:

1. Consider the results of this survey and people's support for NHSScotland to reduce its environmental impact in:
 - medical equipment
 - travel, and
 - goods and services.
2. Act on the findings that people are willing to take actions to reduce the environmental impact of NHS care such as medicines use.
3. Increase awareness of NHSScotland's Net Zero objective through the likes of TV and social media campaigns.
4. Enhance awareness of Climate Change's impacts on individuals (present and future generations), making it more personal, thereby boosting willingness to adopt adaptation and mitigation practices and enhancing the population's resilience.
5. Conduct deliberative engagement to understand where the boundaries sit in people's willingness to change e.g. what inconvenience is too much when having to use different medications and understand how people think they can help NHSScotland become more sustainable.

Chapter 1: Introduction and context

Questionnaire design

The questions for this survey were designed by Healthcare Improvement Scotland in partnership with the Scottish Government. With respect to the topic on the NHSScotland Climate Emergency and Sustainability Strategy some questions were developed and influenced from The Health Foundation and Ipsos survey on a similar topic 'Going green: what do the public think about the NHS and Climate Change?'³ Draft questions were tested with members of the public, which influenced the final question set. A copy of the final questionnaire is available in Appendix 1.

Response rates and profile

At the time of writing this report, the Citizens' Panel for health and social care has a total of 1028 members. The thirteenth Citizens' Panel for health and social care survey was sent by email on the 8th of November 2023 to all 943 Panel members for whom we have email addresses. Reminder emails were sent to those who had not yet responded by email on the 15th of November 2023. During the w/c 20th November survey packs were sent to all Panel members for whom we did not have email addresses, those from whom a bounce back email message was received, and in addition to those who had not responded to the email surveys sent. This was sent to 727 Panel members. Postal responses continued to be accepted up until the 8th of February 2024. A total of 13 respondents completed the survey online from a QR code in the postal survey. A total of 68 telephone interviews were completed between the 25th of January and the 3rd of February 2024.

This took the final response up to 589, a 57% response rate. This level of return provides data accurate to +/-4.04% (based upon a 50% estimate at the 95% level of confidence) at the overall Panel level. This survey is therefore statistically robust at the Scottish population level.

Despite the attempts of the telephone boost, younger respondents were still underrepresented. Furthermore, the response was underrepresented in terms of those living in social housing and private rented accommodation. To ensure the data was representative by age and tenure, survey data was weighted to adjust for this imbalance.

Full information on the response profile achieved and weighting can be found in Appendix 2.

³ <https://www.health.org.uk/publications/long-reads/going-green-what-do-the-public-think-about-the-nhs-and-climate-change>

Interpreting results

When reporting the data in this document, in general, percentages in tables have been rounded to the nearest whole number. Columns may not add to 100% because of rounding or where multiple responses to a question are possible. The total number of respondents to each question is shown either as 'Base' or 'n=xxx' in the tables or charts. Where the base or 'n' is less than the total number of respondents, this is because respondents may be 'routed' passed some questions if they are not applicable.

All tables have a descriptive and numerical base, showing the population or population sub-group examined in it. Because of the self-completion nature of the survey, the base for each question varies slightly.

Open-ended responses have been coded into response categories in order that frequency analysis or cross-tabulations can be undertaken of these questions. The process of coding open-ended responses begins with reading through the responses to get a feel for potential response categories. A list of thematic response categories is then created. These are known as 'codes'. The coding process then involves assigning each response to a code. Responses can be coded into multiple categories where more than one point is communicated. Response categories must be clear and easy for anyone reading the analysis to understand. To check the coding of open-ended responses, 10% of all responses are validated by a second person to check for any issues or errors.

The following chapters present the findings on each topic, followed by conclusions and recommendations at the end of each chapter.

Chapter 2: Preferences for accessing health and care services

Introduction

The aim of this section of the questionnaire was to understand different preferences for accessing health and care services, as well as booking appointments, and how to access information.

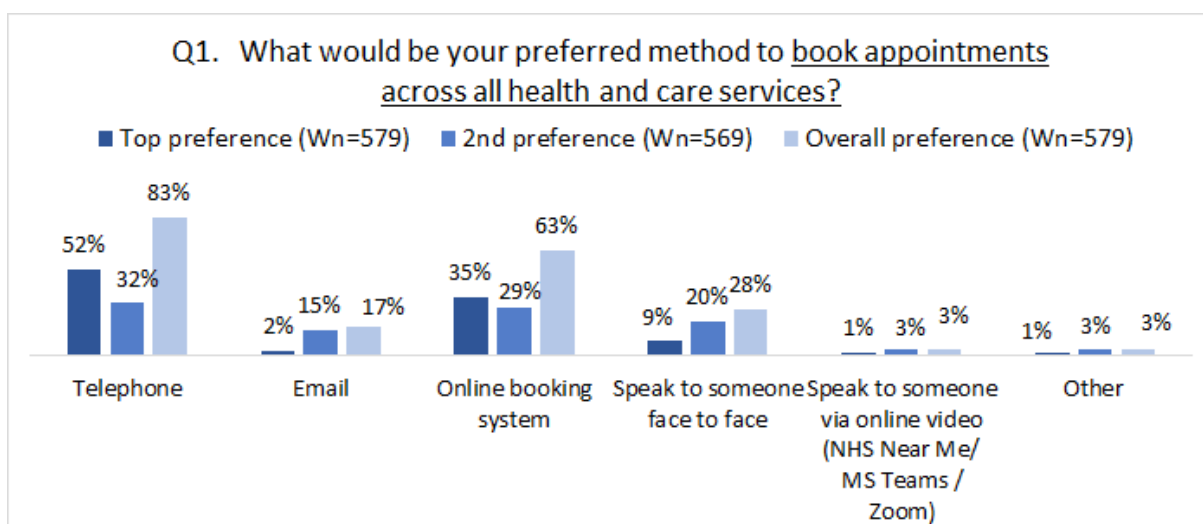
The Chief Executives of NHSScotland health boards meet regularly to discuss strategic health policy and operational decisions. At a recent meeting of the NHS Chief Executives Group there was discussion about trying to better understand public preference on accessing health and care services.

The results from these questions will be fed back to the NHSScotland Chief Executives Group.

Preferences for booking appointments

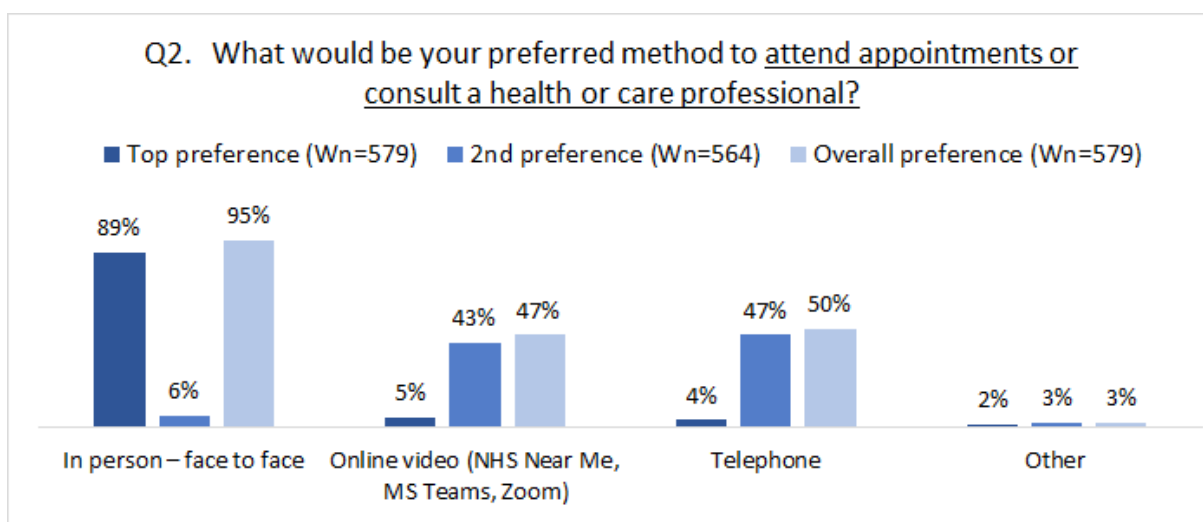
Panel members were asked about their top two preferences for booking appointments across all health and care services. As can be seen in the chart below, booking appointments via telephone was the most popular method, with 83% of respondents selecting this as their first or second preference⁴. This was also the method respondents were most likely to select as their first preference (52%). This was followed by booking appointments through using an online booking system (63% selecting this as a first or second preference), and speaking to someone face to face (28%).

⁴ The overall preference has been calculated by adding the number of respondents who have selected this as first or second preference and dividing by the overall number of respondents, therefore is slightly different to the sum of first and second preference.



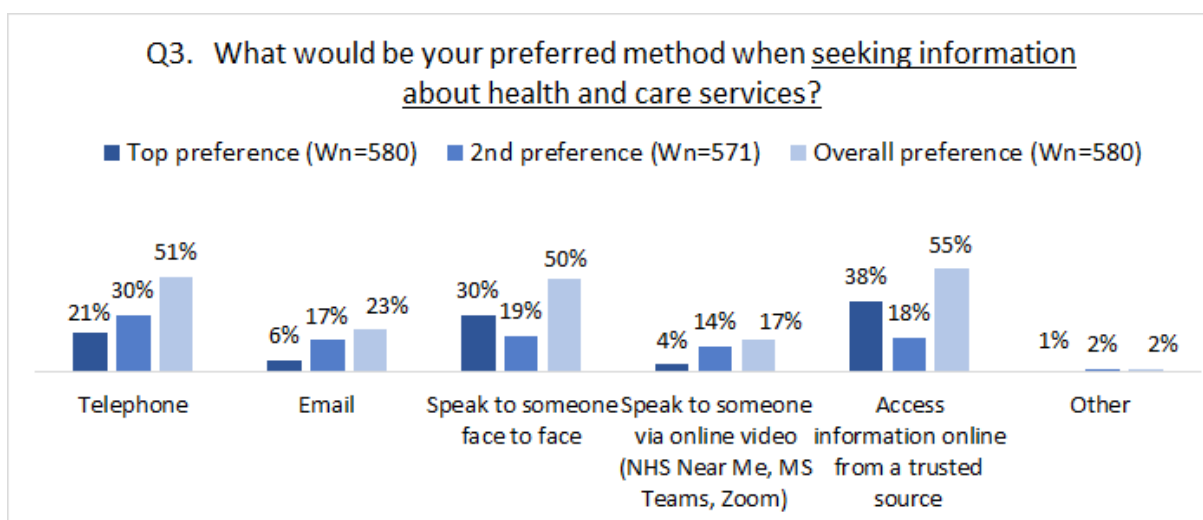
Preferences for attending appointments or consulting a health or care professional

In terms of attending appointments or consulting a health or care professional, the vast majority of respondents (95%) would prefer to do this in person on a face to face basis (95% selecting this as a first or second preference). The next most popular option was telephone consultations (50%). Respondents were also most likely to select in person face to face consultations as their first preference (89%). Where respondents provided other comments this was largely where they felt this would depend on the nature of their contact.



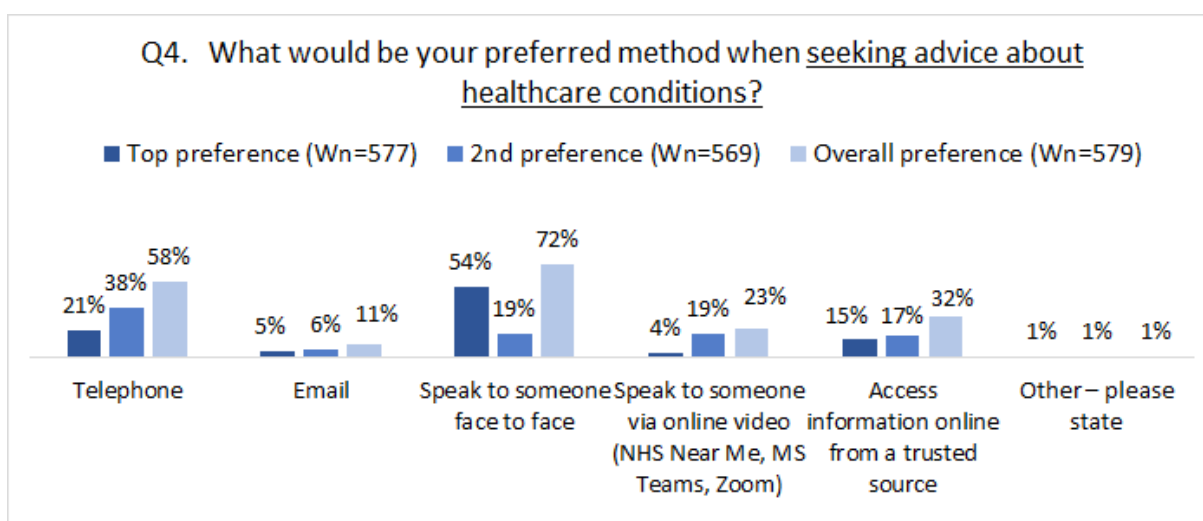
Preferences when seeking information about health and care services

Just over half of respondents (55%) said their first or second preference when seeking information about health and care services would be to access information online from a trusted source, and this was also the option most likely to be selected as a first preference (38%). The next most popular option was doing this via telephone, with 51% of respondents selecting this as a first or second preference.



Preferences when seeking advice about healthcare conditions

Respondents were asked about the methods they prefer to use when seeking advice about healthcare conditions. More than 7 in 10 respondents (72%) said their first or second preference would be to speak to someone face to face, with over half (54%) selecting this as a first preference. This was followed by doing this via telephone, with just under 6 in 10 respondents (58%) stating this was their first or second preference, and with 21% selecting this as their first preference.



What matters most about accessing health and care services

The survey included an open-ended question which asked Panel members what matters most to them when accessing health and care services. The responses have been coded thematically and are shown in the table below. Of most importance to Panel members was the accessibility and availability of appointments and being able to get through on the phone (39%), and this was followed by the speed and efficiency of service (29%), and the preference for face to face or human interaction (23%).

Q5. What matters to you most about how you access health and care services?	
Weighted base: n=513	%
Accessibility and availability of appointments/being able to get through by phone	39%
Speed and efficiency	29%
Preference for face to face/human interaction	23%
Good communication/access to information	16%
Access/being directed to qualified staff/knowledgeable professionals	12%
Convenience and ease of use	9%
Personalised care and continuity/not to feel rushed	9%
Accuracy and trustworthiness	8%
Flexibility and choice/different methods of available	3%
Confidentiality and privacy	3%
Concerns about technology e.g. not using Artificial Intelligence or bots/ensuring IT is working well	2%
Access to comprehensive personal records	1%
Adherence to guidelines and best practices	0.4%
Other	5%

Examples of the responses provided by Panel members about what matters most to them in terms of how they access health and care services are shown below:

That I get clear information, can ask questions and get clear answers. All from people who are qualified to assess my medical needs and with good communication skills.

Having the correct information easily accessible at any time of day, not just office hours.

That they have your health and social care records available online, in full at the touch of a button – timelessly. Direct, handheld access to all records.

I have a pronounced speech impairment, so telephoning is problematic and stressful for me. I want access to be stress-free, straightforward, simple and easy to access services at a time to suit me. I've used an online booking system before (in Edinburgh) and it worked incredibly well; I could see at a glance, what appointments were available, and I could book one in a matter of seconds. It was a safe, reliable system and represented what I want in a system.

Being able to talk to someone. They may ask other things based on their experiences. An AI only works to a pre-determined set of peripherals, so easy to miss a small something that may be relevant. Also talking to someone could set someone's mind at ease, more than an email or AI.

Getting a prompt response - e-mails and that. If you are not well you aren't wanting to be hanging around.

Confidentiality and trust in what is said. Reliability!

Prefer not to reveal private information to people on the phone.

What matters to you most about how you access health and care services?

Qualification of consultant, sufficient time for consultation, ease of access.

I suppose that it's easy - that it is straightforward because obviously there are a lot of older people who can't access e-mails and if there is an easy number to phone.

Dealing with a known person who knows my background and history.

Someone at the end of the phone, not an automated service.

Conclusions and recommendations for accessing health and care services

Conclusions

These findings highlight that people may prefer different modes of communication depending on the nature of their contact with health and care services. This demonstrates the importance of enabling choice when contacting or engaging healthcare services.

Most respondents preferred to book appointments via telephone, and many via an online booking system, noting the importance booking appointments easily, fast, and in their own time. This is also supported by respondents' views around the importance of being able to get through to practices via telephone, availability of appointments, and speed and efficiency of services.

More direct, "human" contact was important to the vast majority when attending appointments or consulting with a healthcare professional, and when asking for advice about their conditions, both aspects of care that could be seen as more directly impacting people's health outcomes. These modes of contact may also allow for clearer communication, a real time interaction where they may be able to ask questions and pre-empt potential miscommunication. Face to face contact was most preferred for attending appointments or consulting with a professional. Online video consultations were only noted as a preference for a bit less than half of the respondents, and via telephone for half of the respondents, and again this preference depended on the nature of their contact, so could potentially be preferred for a follow-up appointment but possibly not for a first consultation. When seeking advice about their health, most preferred to do this by speaking to someone face to face, and just over half of the respondents preferred to do this via telephone. It is interesting to note that online video calls, while supporting real time engagement, were not seen as a preferred option for this.

When accessing information about health and care, doing this online from a trusted source was the strongest first preference, however many preferred to do this by speaking to someone face to face or via telephone. This highlights that, while accessing information online is popular, people may prefer to use the telephone for this or speak to someone face to face, depending on their needs and preferences, and what type of information they might be looking for.

When looking at what matters most to respondents about how they access health and care services, the most reported aspects were accessibility and availability of appointments and getting through via phone, and speed and efficiency. This highlights people's preference to access support when they need it and in the way they prefer, suggesting links with the objectives of person-centred and value-based care approaches. For just under a quarter of respondents, human, face to face interaction was important, also reflected in responses around preferring face to face appointments and consultations.

These findings suggest that while the public may support a more digital approach for certain aspects, such as making appointments, face to face and telephone interaction remain important for contacts of different nature, such as seeking advice or attending appointments, and this will differ between individuals and their needs, as noted by some respondents. Some respondents highlighted the importance of having flexibility and a choice of different methods, and some also noted concerns, such as around confidentiality and privacy, and the use of specific technology such as AI, which should be considered when developing and implementing digital approaches.

Recommendations

Based on these findings Healthcare Improvement Scotland makes the following recommendations to NHS Chief Executive's Group and NHS Boards for consideration:

- Consider the results of this survey when delivering healthcare services to ensure a range of options are available for patients and public to book and attend appointments, as well as seeking advice about their healthcare.
- Ensure face to face contact is an option for all consultations, where feasible.
- Ensure people's preferences are asked and prioritised? And keep in mind that this can change e.g. face to face first consultation and online follow-up meeting.
- Go forward with a more digital approach for booking appointments, though it is important to ensure other ways to book appointments, for example via telephone.
- Consider how to ensure high-quality, up to date information is available online but also communicated in different ways, for example through face to face interactions and via telephone, and accessible to all.

Chapter 3: NHSScotland Climate Emergency and Sustainability Strategy

Introduction

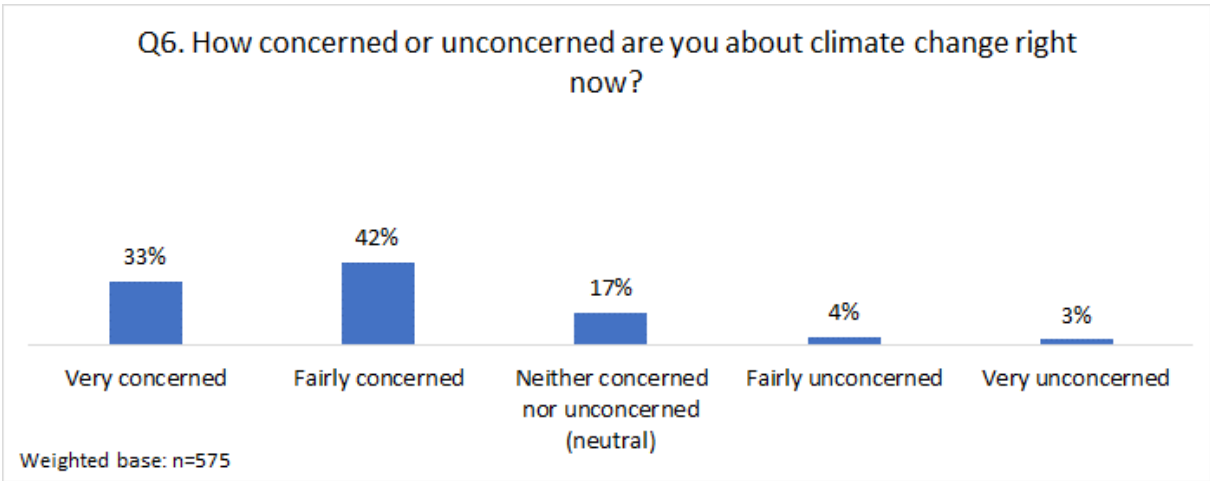
The survey went on to ask a series of questions regarding NHSScotland’s Climate Emergency and Sustainability Strategy.

It was explained to respondents that by making sure the care given to the people of Scotland is sustainable, we can play a part in slowing the critical and rapidly deteriorating state of our planet’s climate system. This climate emergency is driven by human activities and is leading to severe and potentially irreversible change, such as rising temperatures, extreme weather events, and ecosystem disruptions.

Respondents were told that their feedback will be considered in future planning to address this challenge, building a health system that cares for people and the environment. The intention of NHSScotland’s Climate Emergency and Sustainability Strategy is to be part of leaving the planet in a state that enables future generations to be able to meet their own needs, and which ensures environmental, social, and economic wellbeing for all.

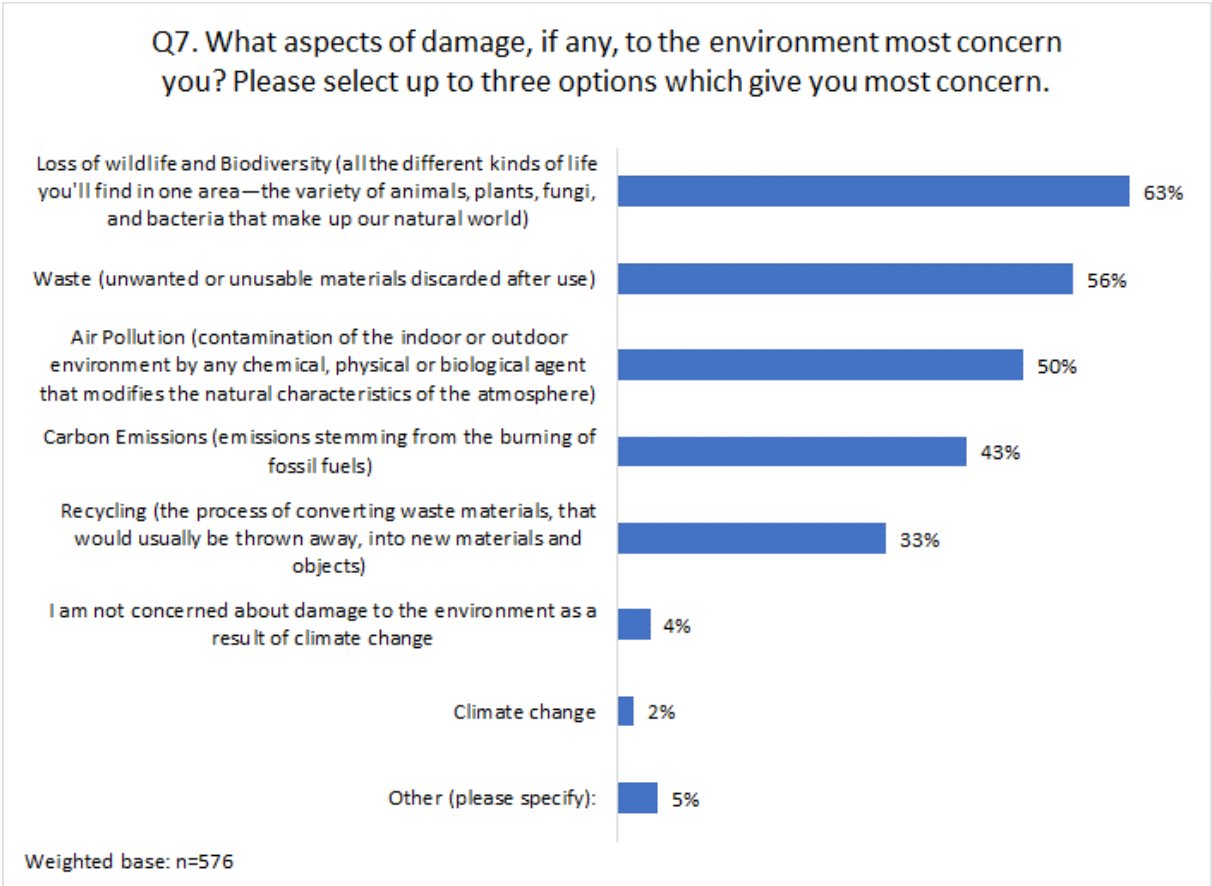
Level of concern regarding Climate Change

The section began by asking respondents how concerned or unconcerned they are about Climate Change right now. Three quarters of respondents were very or fairly concerned about Climate Change (75%), 17% were neither concerned nor unconcerned and 7% were very or fairly unconcerned.



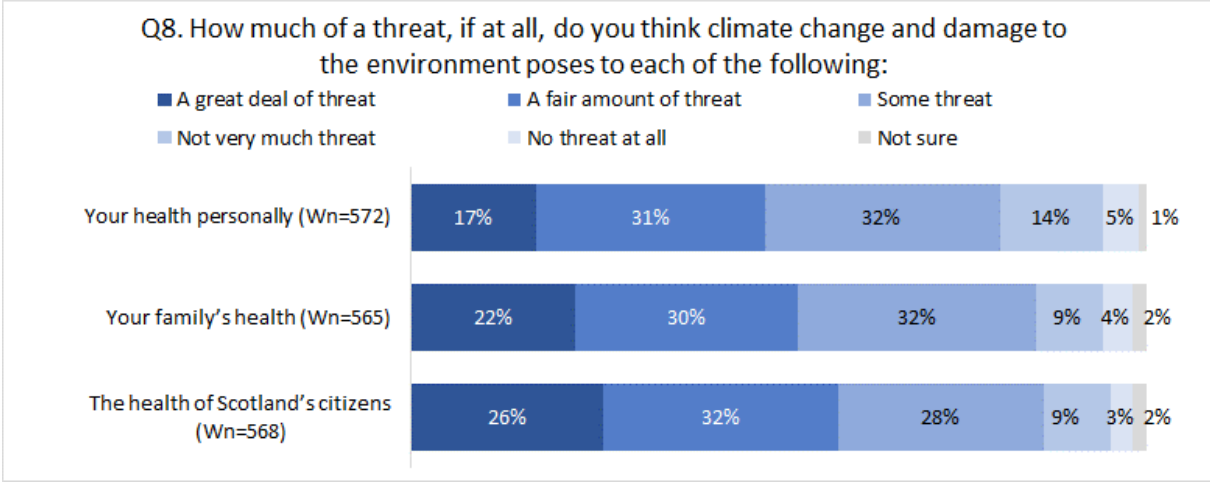
Aspects of Climate Change damage which are most concerning

Following on from this, respondents were asked about any aspects of damage to the environment that were of most concern to them. Respondents were limited to selecting three options. Of most concern to respondents was the loss of wildlife and biodiversity (63%), and this was followed by waste (56%) and air pollution (50%). Just 4% of respondents said they were not concerned about any damage to the environment as a result of Climate Change.

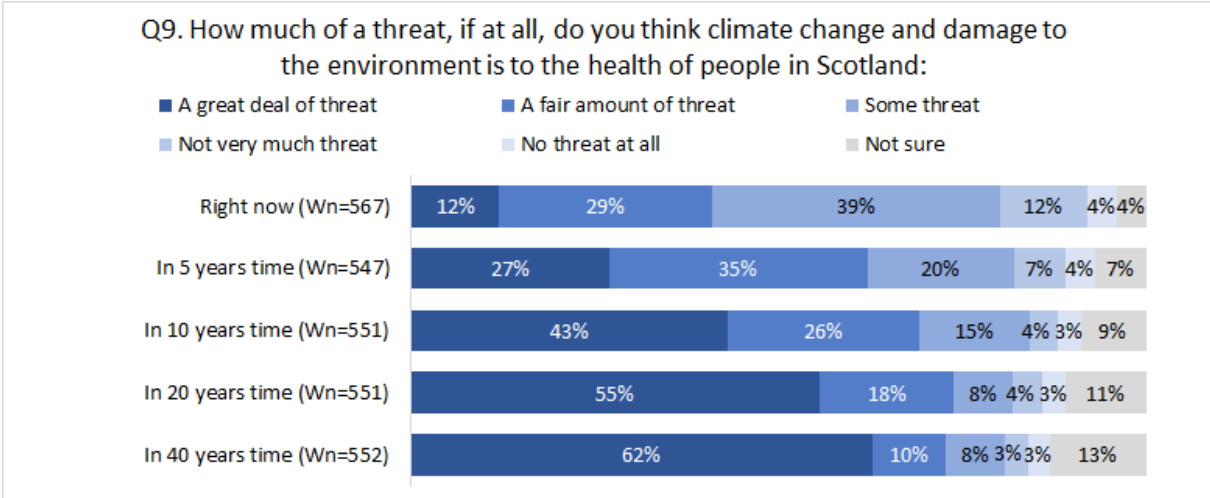


The impact of Climate Change and damage to the environment on health

Respondents were asked how much of a threat, if at all, Climate Change and damage to the environment pose to the health of Panel members personally, their family’s health, and the health of Scotland’s citizens in general. As shown in the chart below, over half of respondents were of the opinion that Climate Change and damage to the environment pose a great deal or a fair amount of threat on the health of Scottish citizens (58%) and on the health of Panel members’ families (52%). However, just under half of respondents were of the opinion it has a great deal or a fair amount of threat on their health personally (48%).

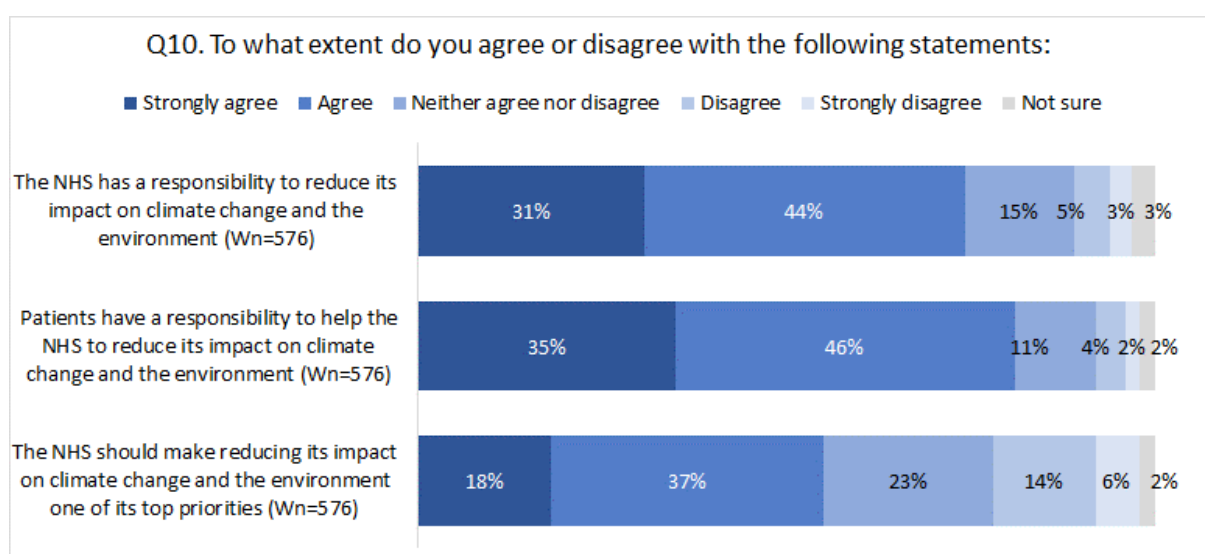


Following on from this, respondents were asked how much of a threat Climate Change and damage to the environment is to the health of people in Scotland now, and in the future. It is clear that this is less of a concern for respondents right now (just 12% stating a great deal of threat) than it is in the future, with 55% of respondents saying that this will be a great deal of threat in 20 years time, and 62% having this opinion when thinking about this in 40 years’ time.



Responsibility and priority around Climate Change in NHSScotland

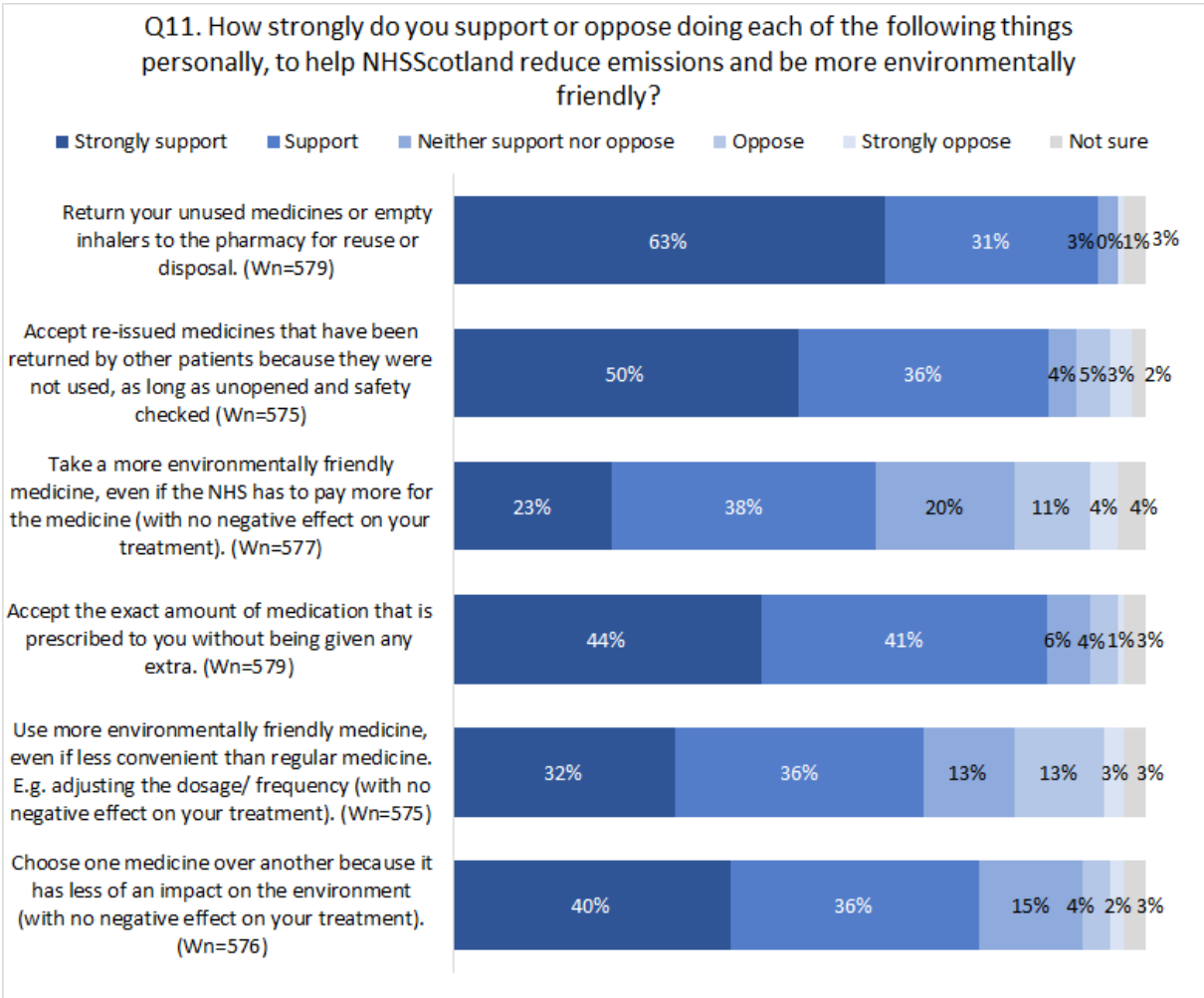
Respondents were asked to what extent they agreed or disagreed with various statements concerning responsibilities and priorities in relation to Climate Change in NHSScotland. Over 8 in 10 respondents (81%) were in agreement that patients have a responsibility to help the NHS to reduce its impact on Climate Change and the environment, compared to 6% who disagreed. In terms of the NHS having a responsibility to reduce its impact on Climate Change and the environment, three quarters (75%) were in agreement and 8% disagreed. Respondents were least likely to agree that the NHS should make reducing its impact on Climate Change and the environment one of its top priorities, although still over half (55%) were in agreement and 20% stated they disagreed.



Actions the public are willing to take to help NHSScotland reduce emissions and be more environmentally friendly

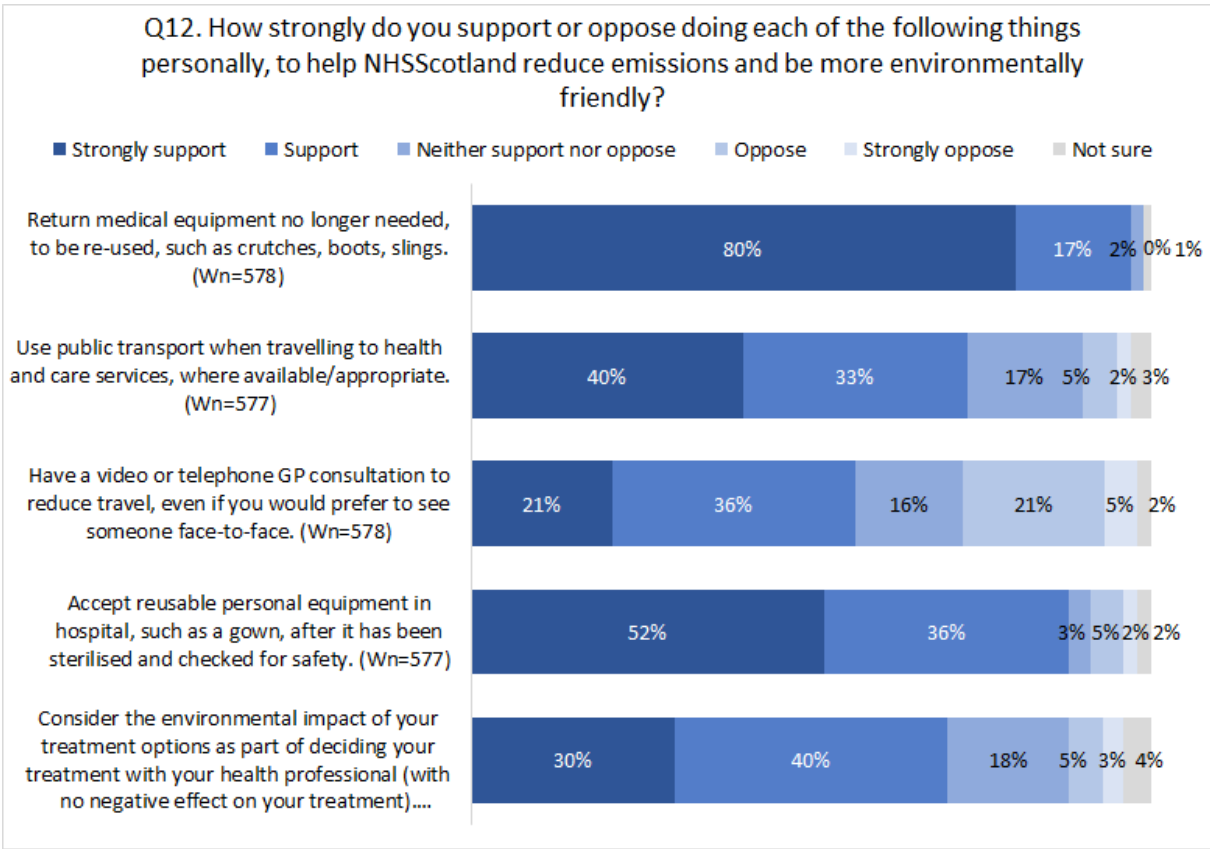
Questions were asked of respondents relating to the use of medicines and actions that they could take personally to help NHSScotland reduce emissions and be more environmentally friendly. Respondents were asked to answer from their own perspective and as honestly as possible about what they would be willing to do, or not do, in relation to used medicines.

The majority of respondents were in support of all actions that were put to them. They were most likely to support the returning of unused medicines or empty inhalers to the pharmacy for reuse or disposal (94%), accepting re-issued medicines that have been returned by other patients because they were not used, as long as unopened and safety checked (86%), and accepting the exact amount of medication that is prescribed without being given any extra (86%)⁵. On the other hand, respondents were least likely to support taking a more environmentally friendly medicine, even if the NHS has to pay more for the medicine (with no negative effect on their treatment) (61% support or strongly support and 15% oppose or strongly oppose) and using more environmentally friendly medicine, even if less convenient than regular medicine (68 support and 16% oppose).



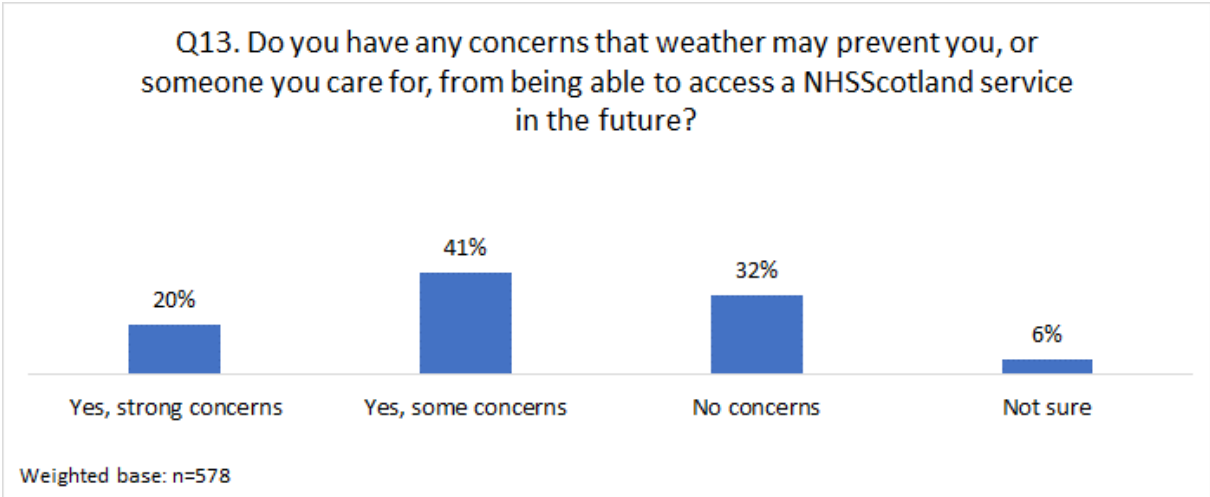
⁵ Overall percentage of support equates to 86% not 85% due to rounding.

The survey continued by asking respondents about their opinions on actions that they could take personally to help NHSScotland reduce emissions and be more environmentally friendly relating to the use of medical equipment and other aspects. Again, there is a strong level of support for these actions, with the majority of respondents stating they support or strongly support all actions that they were asked about. Actions which had the greatest level of support were in relation to returning medical equipment that was no longer needed to be reused (97% support or strongly support), and accepting reusable personal equipment in hospital, such as a gown, after it has been sterilised and checked for safety (88%). Support was lowest in relation to having a video or telephone GP consultation to reduce travel, even if they would prefer to see someone face to face, with 57% being in support of this and 26% being opposed.

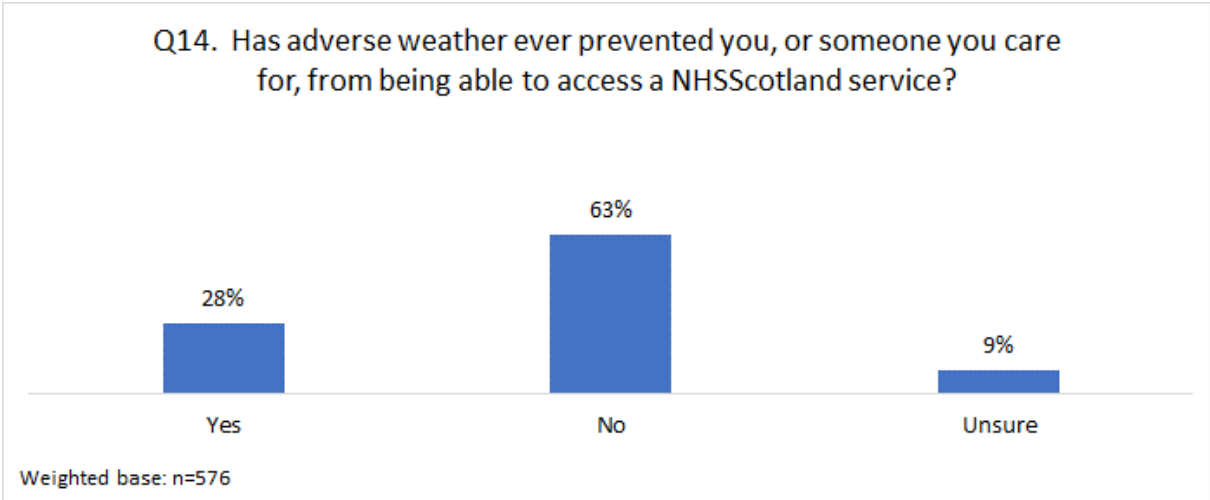


Adverse weather concerns affecting NHSScotland services

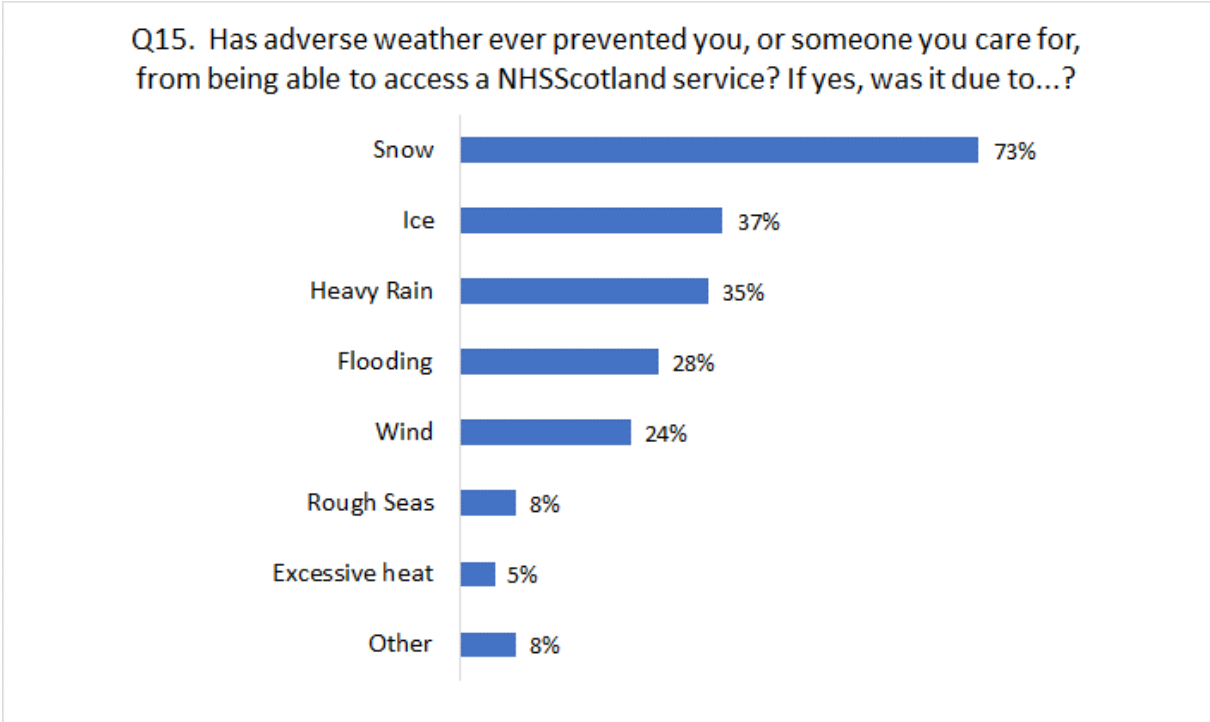
The survey included a number of questions regarding adverse weather and potential impact on NHSScotland services. One in five respondents (20%) had strong concerns and 41% of respondents had some concerns that weather may prevent them, or someone they care for, from being able to access an NHSScotland service in the future. On the other hand, just under a third of respondents (32%) had no concerns about this, and the remaining 6% were unsure.



Just over a quarter of respondents (28%) said that adverse weather had at some point, prevented them, or someone they care for, from being able to access an NHSScotland service. The majority of respondents, however, (63%) said this had not been an issue for them, and 9% were unsure.



Where respondents had been impacted by adverse weather and were prevented from accessing an NHSScotland service, the majority (73%) said this was due to snow, 37% said it was due to ice and 35% said it was because of heavy rain.



Health benefits of reducing impact on the environment and helping NHSScotland adapt to Climate Change

Respondents were asked to think about potential health benefits to the population of Scotland as a result of health and care services being more environmentally friendly. Respondents were most likely to comment that being more environmentally friendly will be better or healthier overall for everyone (19%), that the environment will be cleaner and with less waste and pollution (17%), and some spoke of improvements to air quality (11%), or said that reusing or recycling medicines and medical equipment would mean money could be spent elsewhere on health services (9%).

Q16. Can you think of any health benefits to the population of Scotland as a result of our health and care service being more environmentally friendly? Please tell us what you think.	
Weighted base: n=403	%
Better/healthier overall for everyone/better long term health	19%
Cleaner environment/less waste/pollution	17%
Improvements to air quality/Reduction in vehicle emissions/congestion	11%
Reusing/recycling medical equipment/returning unopened medicines/not giving out more medicine than required/so money can be spent elsewhere	9%
Respiratory health improvements	7%
Cost savings/economic benefits/money could be sent elsewhere	7%
Measures to reduce travel to appointments e.g. video/telephone/email contact, public buses/local services	5%
Benefit to future generations	4%

Other things should be made priority e.g. waiting lists/healthcare should be the priority	4%
Improvements to mental wellbeing	3%
Comments re Climate Change/could result in weather improvements	3%
More walking/exercise/active travel	2%
No foreseeable benefits	2%
Raised awareness that change is required from everyone/promotions on healthier living	2%
Stop smoking/vaping	1%
Other	10%
No suggestions/no comment/can't think of anything/unsure	23%

Examples of the responses provided by Panel members to describe potential benefits to the Scottish population as a result of health and care services being more environmentally friendly are shown below:

I think if the health and care service were more environmentally friendly, we would probably see less wastage which in turn (would mean we) see the running of services more productively. Saving money and investing back somewhere else in the NHS.

I think the benefits come from the greater good, we are pitching in and we are all in it together. It adds up to lots of little changes taken by everyone, and it adds up to real, meaningful, positive change.

Money savings, that can be put to assist medical issues.

HUGE benefits, just from reduced air pollution alone. Active travel, less plastic pollution, etc. And financial savings means more cash for health. Strong environmental action is a win for all.

Can you think of any health benefits to the population of Scotland as a result of our health and care service being more environmentally friendly?

Increased life expectancy.

Yes. It would stop people getting sicker from air pollution and just generally encouraging people to live healthier lifestyles as a way to live your life - makes it a greener way to live.

Any work that we are able to do that has a positive impact on the environment and the impact of climate change will benefit everyone. I think we all have an obligation to do what we can to try and protect our world for future generations.

Encouraging some more extra walking on a reasonable basis. Reduce smoking and vaping.

Evidence is strong for many re air pollution including dementia and more, if NHS can be a leader on this, others can follow. It would be inspirational.

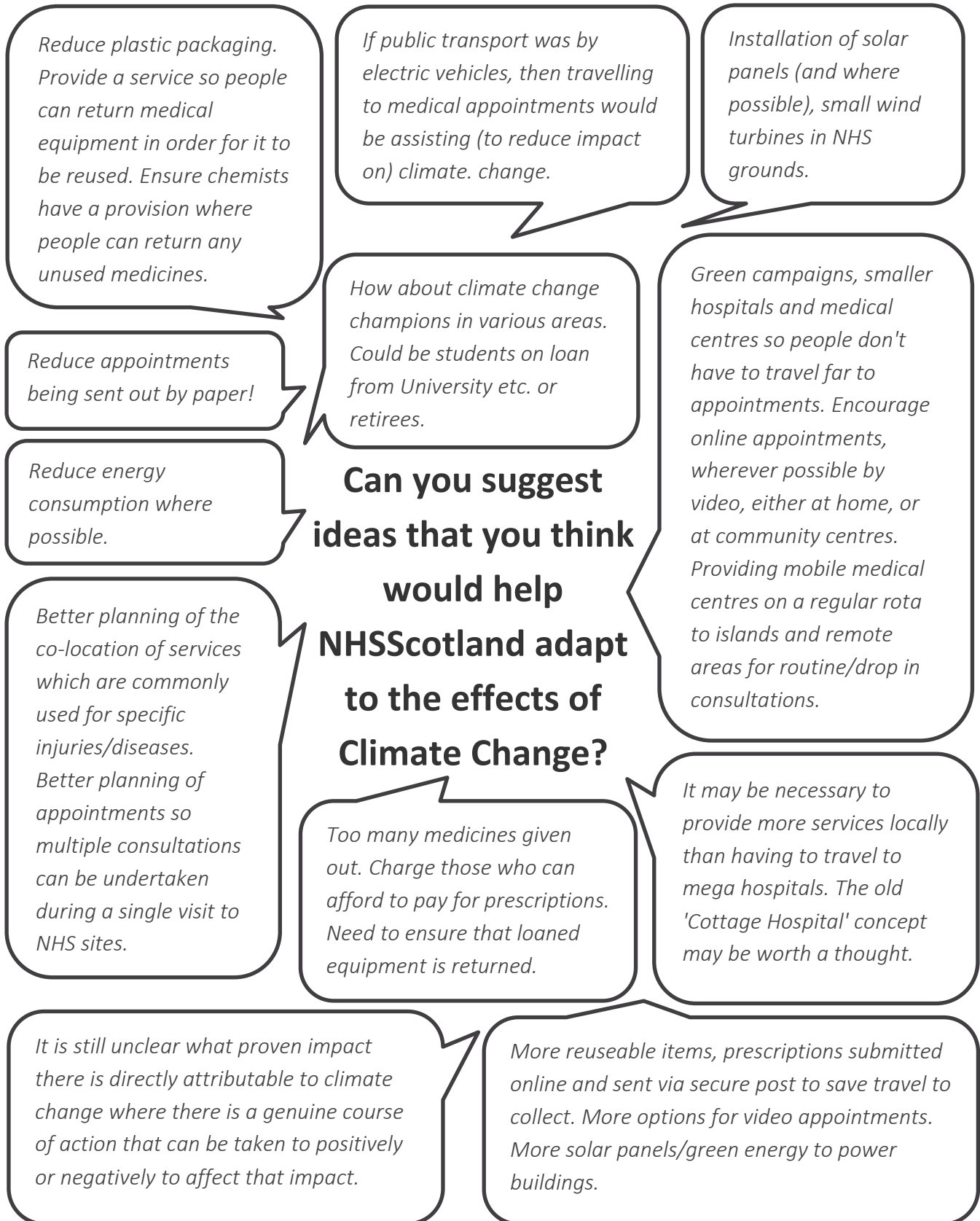
I think the health benefits to the population of Scotland as a result of the healthcare system being environmentally friendly would be more in regards to their mental health, from knowing NHSScotland is doing its part.

It will have some impact on our climate so that will make a difference; it will also help to reduce people's anxiety.

Respondents were then asked if they had any suggestions on what might help NHSScotland adapt to the effects of Climate Change. Over a quarter of respondents suggested recycling or reusing medicine and reducing waste or paperwork (27%), 13% suggested energy-saving measures, such as reducing heating or use of electricity, or using electronic transport, and 6% suggested having more online or telephone services and consultations to reduce travel.

Q17. Can you suggest ideas that you think would help NHSScotland adapt to the effects of Climate Change?	
Weighted base: n=383	%
Recycle/reuse equipment/medicine/reduce waste/paperwork	27%
Energy-saving measures e.g. heating/electricity/electric transport/solar panels	13%
Online/telephone services and consultations to reduce travel	6%
Local services to reduce travel	4%
Better promotion/education of impact of environmental issues	3%
Encourage healthy lifestyles/health promotion to reduce hospital/doctors' appointments	3%
Better/more accessible public transport	2%
Healthcare should be the priority/other priorities more important	2%
More consultation with the public/experts	2%
Impact of Scotland on Climate Change is minimal/not sure Climate Change exists	2%
Emergency planning for extreme weather is needed/better access/connectivity to services in extreme weather	2%
Better planning of services/appointments	1%
Charges/penalties introduced e.g. for missed appointments/prescriptions	1%
Tendering/procurement improvements e.g. purchasing locally	1%
Clear communication between stakeholders	1%
Other	8%
No/can't think of anything	35%

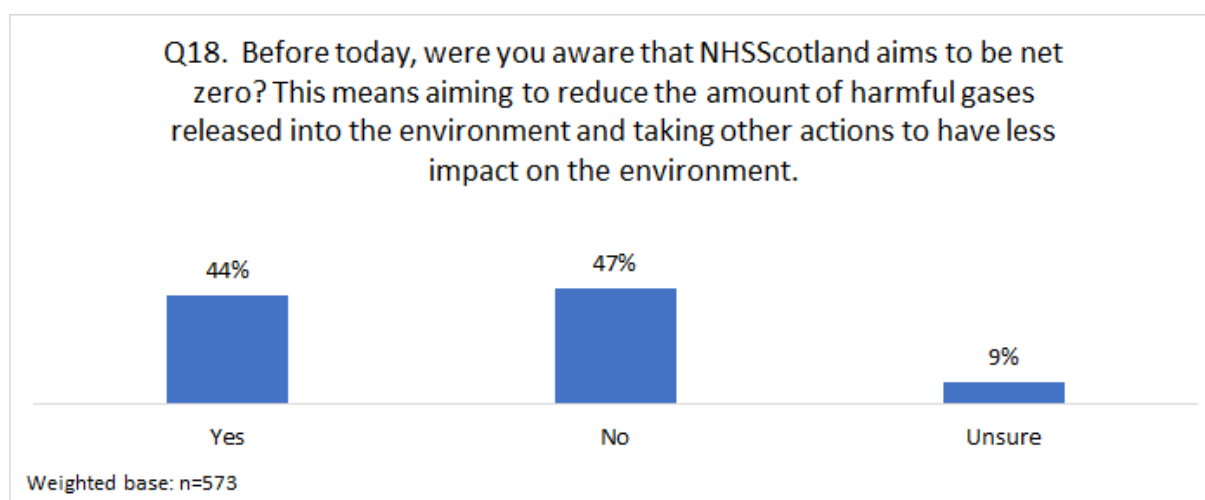
Some examples of the suggestions provided by Panel members on what might help NHSScotland adapt to the effects of Climate Change are shown below:



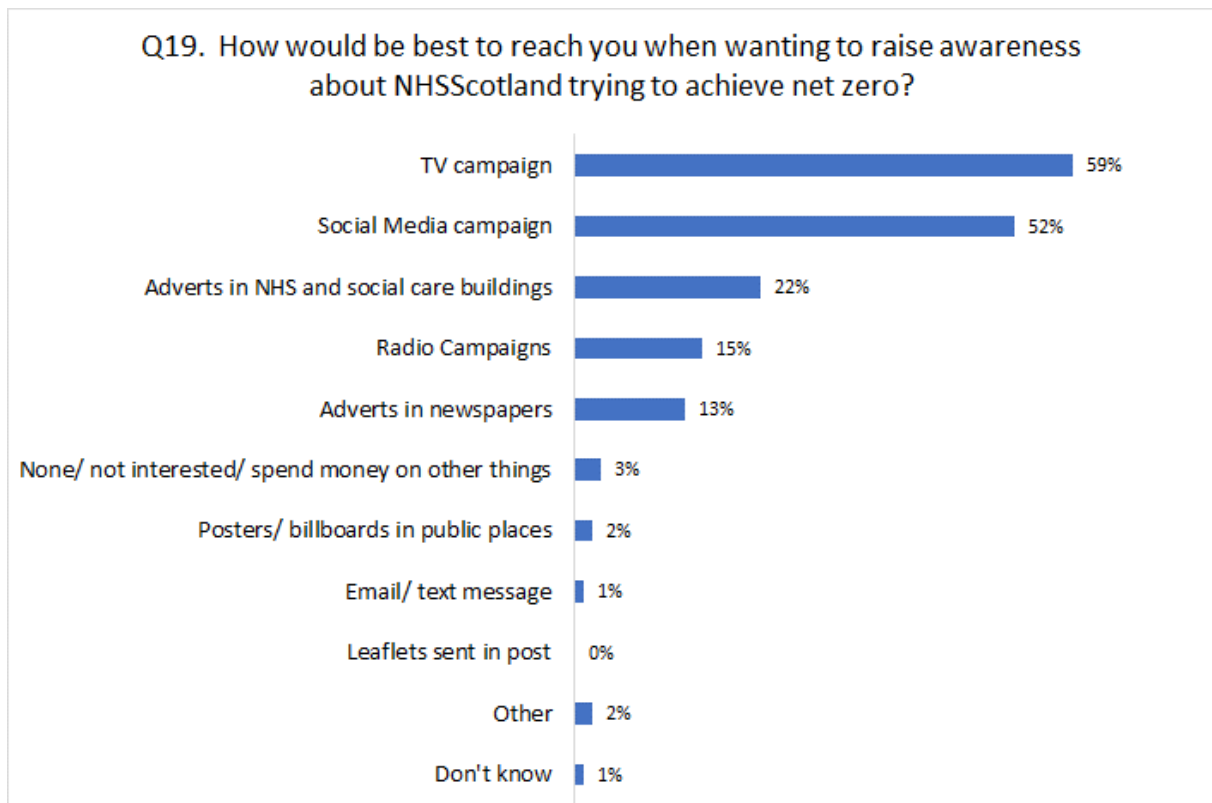
Net Zero

By 2040 NHSScotland wants to have achieved 'Net Zero'. This is when the balance between greenhouse gases released into the atmosphere and those removed from it is equal. Greenhouse gases include carbon dioxide (CO₂), methane (CH₄), and nitrous oxide (N₂O). The best way to achieve Net Zero is to reduce the amount of harmful gases we release into the environment.

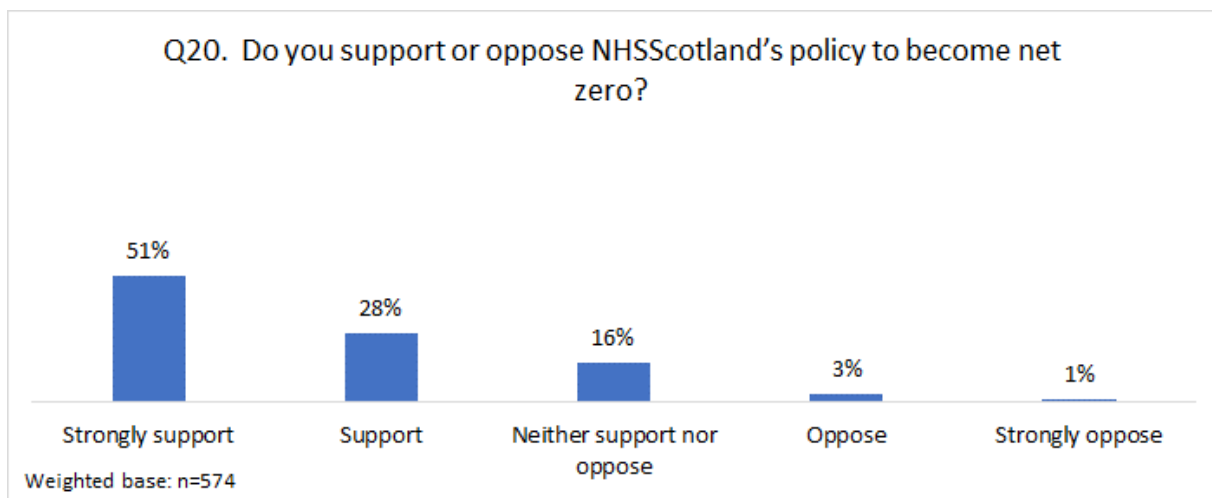
The goal of achieving Net Zero emissions is a crucial part of global efforts to combat Climate Change and limit global warming to below 2 degrees Celsius above pre-industrial levels. Slightly more respondents were unaware (47%) than aware (44%) that NHSScotland aims to be Net Zero.



The majority of respondents said that a TV campaign (59%) or social media campaign (52%) would be the best way to reach people to increase awareness of NHSScotland aiming to achieve Net Zero.



Eight in ten respondents (80%)⁶ strongly supported NHSScotland’s policy to become Net Zero, 16% neither supported nor opposed it and 4% were opposed or strongly opposed to it.



Respondents were then asked to provide reasons for supporting or opposing NHSScotland’s policy to become Net Zero. The main themes were where respondents felt that all organisations or everyone should play their part and be responsible for becoming Net Zero (26%), that becoming Net Zero will benefit everyone or that it is important to become Net Zero (24%), or that becoming Net Zero will be good for the environment or planet (16%).

⁶ Percentage of respondents who support NHSScotland’s policy to become net zero equates to 80% and not 79% (51% who strongly support and 28% who support) due to rounding.

Q21. Why do you say this?	
Weighted base: n=466	%
All organisations/everyone should play their part/are responsible	26%
Will benefit everyone/health/anything to help is good/it's important	24%
It's good for the environment/important for the planet/need to take action now	16%
NHS should prioritise healthcare/improving services over being Net Zero	14%
For future generations	6%
The size of the NHS increases influence of the actions taken. The NHS plays a big part	6%
As long as does not compromise healthcare	3%
Don't think it will happen or make a difference/not achievable/huge challenge/Scotland only has a small impact	3%
Money could be better spent/spent elsewhere/as long as no costly campaigns	2%
Other	9%
No response/don't know	4%

Examples of what Panel members said when asked their opinions on why they supported or opposed NHSScotland's policy to become Net Zero are shown below. It should be noted that even where respondents were in support of becoming Net Zero, they may have still expressed concerns about how this may impact existing services.

Because it's really important for NHS to survive and do good for the people in the future. If we don't have a good environment we aren't healthy. Technology can be used in a positive way to help reach net zero. It would be time efficient and good for the environment.

I am concerned that the money spent on it could be better spent improving the care and treatment of patients, particularly ambulance waiting times.

NHSScotland has an important role in leading the way to net zero. It is a large consumer of energy and attempts to reduce its impact on the environment, can only be beneficial to the general public.

The current situation weather-wise is an indication of what is in store, and we should be doing what we can to mitigate these changes rather than just hope it will eventually be solved. We are part of the problem and need to be part of the solution.

Why do you say this?

Proper care of patients and the ease of those patients to talk to health professionals far outweighs the need for policy to become Net Zero.

As a public organisation it should aim to be environmentally friendly but not at the cost of treating patients. Prevention and treatment are primary goals. Net zero is a goal but not a primary one, particularly with the NHS under such financial stress.

They should focus on getting over the effects of covid, clear waiting lists and get back on track, before committing to something else.

Less attention should be paid to current woke trends which are unobtainable, and all such energy directed to patient care.

Everyone and every organisation has a role in this. However, it's hard for a healthcare provider who needs to balance longer term objectives with the immediate need to protect patient safety especially from infection.

Climate change is probably the biggest threat to mankind on a massive scale. It's too late to stop it, but anything that can be done to slow it and reverse some aspects of it, must be done.

Conclusions and recommendations on NHSScotland Climate Emergency and Sustainability Strategy

Conclusions

The vast majority of the Citizens' Panel are in favour of NHSScotland pursuing a strategy towards achieving Net Zero. Panel members acknowledge the importance of considering risks from environmental damage, including Climate Change, in healthcare provision and suggest moving towards a Net Zero approach to reduce environmental impact. However, there was lack of awareness around the NHSScotland objective to achieve Net Zero.

The public are willing to consider environmental factors when it comes to their healthcare, including medication, as long as it does not impact the effectiveness of their treatment. There is also a willingness to make personal sacrifices to lower the environmental impact of treatments, as long as treatment efficiency is not compromised, and to consider environmental factors related to their medication, even if it results in minor inconveniences. For example, most of the respondents support returning unused medicines and empty inhalers for use or disposal and returning medical equipment to be reused. Whilst there is a strong public appetite for this it should be noted that, currently, there is little infrastructure in NHSScotland to support some of these behaviours. For example, reusing unused medicines that have been returned by patients or accepting the exact amount of medication that is prescribed to patients without being given any extra, which is determined by manufacturers.

In the context of findings discussed above around people's preferred options to access health and care, over half of the respondents support having a video or telephone GP consultation to reduce travel even if they prefer to see someone face to face. This suggests that while face to face contact was a strong preference for most respondents in terms of attending appointments, many may be willing to compromise on this if it supported being more sustainable. However, the nature of the contact may well be a key factor in this compromise.

There is a concern about the interruption of transport services due to weather conditions, potentially linked to Climate Change, which can lead to missed appointments and rescheduling at cost to NHS Boards.

The results of this survey show that there is public concern about Climate Change and its impact, but with less immediate worry about the present or short-term impacts and less worry about impacts on people's own health.

This suggests a potential challenge in motivating the public to change behaviours, emphasising the need to raise awareness about how Climate Change affects both current and future generations, and highlighting the urgency of taking immediate action, irrespective of the perceived threat level of Climate Change in the immediate or distant future. When asking respondents about potential health benefits to the population of Scotland because of NHSScotland being more environmentally friendly, most responses were about health overall rather than particular aspects of health, and nearly a quarter could not think of anything or

were unsure. Similarly, when asked to suggest what might help NHSScotland adapt to Climate Change effects, over a third of the respondents could not think of anything. This could suggest that the health benefits of having a more environmentally friendly NHSScotland are not clearly understood, as well as lack of awareness on potential actions and changes, and further awareness could be beneficial. Awareness of health benefits and actions could also increase understanding of the relevance of this to people personally as well.

Recommendations

Based on these findings Healthcare Improvement Scotland makes the following recommendations to the Scottish Government and NHSScotland:

1. Consider the results of this survey and people's support for NHSScotland to reduce its environmental impact in:
 - medical equipment
 - travel, and
 - goods and services.
2. Act on the findings that people are willing to take actions to reduce the environmental impact of NHS care such as medicines use.
3. Increase awareness of NHSScotland's Net Zero objective through the likes of TV and social media campaigns.
4. Enhance awareness of Climate Change's impacts on individuals (present and future generations), making it more personal, thereby boosting willingness to adopt adaptation and mitigation practices and enhancing the population's resilience.
5. Conduct deliberative engagement to understand where the boundaries sit in people's willingness to change e.g. what inconvenience is too much when having to use different medications and understand how people think they can help NHSScotland become more sustainable.

Appendix 1: Questionnaire



Citizens' Panel 13

In this Citizens' Panel survey we will ask you questions relating to:

How people prefer to access health and care services, and

NHSScotland Climate Emergency and Sustainability Strategy

There are no wrong answers to these questions - this is not a test. We are interested in your personal responses, thoughts and experiences of these issues and how they apply to you. Your answers are confidential and all views will be made anonymous. If you wish to find out more about how we use your data, please visit

www.researchresource.co.uk/privacy-notice

Please answer the questionnaire as fully as you are willing and able to. If there is anything you do not wish to answer please just move on to the next question.

If you would prefer to complete the survey online, please visit the following link. You will need your ID above to access the survey:

We are very grateful to you for taking the time to complete this survey, to help us gain a better picture of the opinions of the Scottish public on issues of health and social care. If you need help to answer the questions please call Research Resource on FREEPHONE 0800 121 8987 or email info@researchresource.co.uk.

If you would prefer to complete the survey online, please visit the following link or the QR code. You will need your respondent identification number noted at the top of the page to access the survey.

www.researchresource.co.uk/citizenspanel13.html



BSL users can contact us via Contact Scotland BSL <http://contactscotland-bsl.org/>

Thank you.

If you would like to complete future surveys online, please provide your email address:

Preferences for accessing health and care services

The Chief Executives of NHSScotland health boards meet regularly to discuss strategic health policy and operational decisions. At a recent meeting of the NHS Chief Executives Group there was discussion about trying to better understand public preference on accessing health and care services.

The following questions are trying to understand different preferences for accessing services, as well as booking appointments, and how to access information. The results from these questions will be fed back to the NHS Chief Executives Group.

When answering the following questions we would like you to respond by giving your preferred 1st or 2nd preference.

1. What would be your preferred method to book appointments across all health and care services? Please indicate your 1st and 2nd preference

	1st preference	2nd preference
Telephone	<input type="checkbox"/>	<input type="checkbox"/>
Email	<input type="checkbox"/>	<input type="checkbox"/>
Online booking system	<input type="checkbox"/>	<input type="checkbox"/>
Speak to someone face to face	<input type="checkbox"/>	<input type="checkbox"/>
Speak to someone via online video (NHS Near Me/MS Teams/Zoom)	<input type="checkbox"/>	<input type="checkbox"/>
Other – please state	<input type="checkbox"/>	<input type="checkbox"/>

2. What would be your preferred method to attend appointments or consult a health or care professional? Please indicate your 1st and 2nd preference.

	1st preference	2nd preference
In person – face to face	<input type="checkbox"/>	<input type="checkbox"/>
Online video (NHS Near Me, MS Teams, Zoom)	<input type="checkbox"/>	<input type="checkbox"/>
Telephone	<input type="checkbox"/>	<input type="checkbox"/>
Other – please state	<input type="checkbox"/>	<input type="checkbox"/>

3. What would be your preferred method when seeking information about health and care services? Please indicate your 1st and 2nd preference.

	1st preference	2nd preference
Telephone	<input type="checkbox"/>	<input type="checkbox"/>
Email	<input type="checkbox"/>	<input type="checkbox"/>
Speak to someone face to face	<input type="checkbox"/>	<input type="checkbox"/>
Speak to someone via online video (NHS Near Me, MS Teams, Zoom)	<input type="checkbox"/>	<input type="checkbox"/>
Access information online from a trusted source	<input type="checkbox"/>	<input type="checkbox"/>
Other – please state	<input type="checkbox"/>	<input type="checkbox"/>

4. What would be your preferred method when seeking advice about healthcare conditions?
Please indicate your 1st and 2nd preference.

	1st preference	2nd preference
Telephone	<input type="checkbox"/>	<input type="checkbox"/>
Email	<input type="checkbox"/>	<input type="checkbox"/>
Speak to someone face to face	<input type="checkbox"/>	<input type="checkbox"/>
Speak to someone via online video (NHS Near Me, MS Teams, Zoom)	<input type="checkbox"/>	<input type="checkbox"/>
Access information online from a trusted source	<input type="checkbox"/>	<input type="checkbox"/>
Other – please state	<input type="checkbox"/>	<input type="checkbox"/>

5 What matters to you most about how you access health and care services?

NHSScotland Climate Emergency and Sustainability Strategy

This section asks you questions which relate to the NHSScotland Climate Emergency and Sustainability Strategy which will shape how NHSScotland reduces the impact it has on the environment from the health and care it provides.

By making sure that the care we give the people of Scotland is sustainable, we can play a part in slowing the critical and rapidly deteriorating state of our planet's climate system. This climate emergency is driven by human activities and is leading to severe and potentially irreversible change, such as rising temperatures, extreme weather events, and ecosystem disruptions.

Your feedback will be considered in our planning as we navigate through this challenge, building a health system that cares for people and the environment. Our intention is to be part of leaving our planet in a state that enables future generations to be able to meet their own needs and which ensures environmental, social, and economic wellbeing for all.

NHSScotland Climate Emergency and Sustainability Strategy

6. How concerned or unconcerned are you about Climate Change right now?

- Very concerned
- Fairly concerned
- Neither concerned nor unconcerned (neutral)
- Fairly unconcerned
- Very unconcerned

7. What aspects of damage, if any, to the environment most concern you?

Please select up to three options which give you most concern.

- Carbon Emissions** (emissions stemming from the burning of fossil fuels)
- Waste** (unwanted or unusable materials discarded after use)
- Recycling** (the process of converting waste materials, that would usually be thrown away, into new materials and objects)
- Air Pollution** (contamination of the indoor or outdoor environment by any chemical, physical or biological agent that modifies the natural characteristics of the atmosphere)
- Loss of wildlife and Biodiversity** (all the different kinds of life you'll find in one area—the variety of animals, plants, fungi, and bacteria that make up our natural world)
- I am not concerned about damage to the environment as a result of Climate Change
- Other (please specify):

8. How much of a threat, if at all, do you think Climate Change and damage to the environment poses to each of the following:

	A great deal of threat	A fair amount of threat	Some threat	Not very much threat	No threat at all	Not Sure
Your health personally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your family's health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The health of Scotland's citizens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. How much of a threat, if at all, do you think Climate Change and damage to the environment is to the health of people in Scotland:

	A great deal of threat	A fair amount of threat	Some threat	Not very much threat	No threat at all	Not Sure
Right now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In 5 years time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In 10 years time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In 20 years time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In 40 years time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Responsibility and priority around Climate Change in NHSScotland

10. To what extent do you agree or disagree with the following statements:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not sure
The NHS has a responsibility to reduce its impact on Climate Change and the environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patients have a responsibility to help the NHS to reduce its impact on Climate Change and the environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS should make reducing its impact on Climate Change and the environment one of its top priorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What would you be prepared to do to help NHSScotland reduce Climate Change

11. How strongly do you support or oppose doing each of the following things personally, to help NHSScotland reduce emissions and be more environmentally friendly?

These questions relate to use of medicines, which you may or may not use personally. Please answer from your own perspective and as honestly as possible, thinking about what you would be willing to do if you used medicines.

	Strongly support	Support	Neither support nor oppose	Oppose	Strongly oppose	Not Sure
Return your unused medicines or empty inhalers to the pharmacy for reuse or disposal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accept re-issued medicines that have been returned by other patients because they were not used, as long as they are unopened and have been checked for safety.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Take a more environmentally friendly medicine, even if the NHS has to pay more for the medicine (with no negative effect on your treatment).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accept the exact amount of medication that is prescribed to you without being given any extra.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use a more environmentally friendly medicine, even if this is less convenient than your regular medicine. For example adjusting the dosage or frequency (with no negative effect on your treatment).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Choose one medicine over another because it has less of an impact on the environment (with no negative effect on your treatment).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. How strongly do you support or oppose doing each of the following things personally, to help NHSScotland reduce emissions and be more environmentally friendly?

These questions relate to medical equipment and other aspects, which you may or may not have experience of personally. Please answer from your own perspective and as honestly as possible, thinking about what you would be willing to do if you did use these.

	Strongly support	Support	Neither support nor oppose	Oppose	Strongly oppose	Not Sure
Return medical equipment no longer needed, to be re-used, such as crutches, boots, slings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use public transport when travelling to health and care services, where available/appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a video or telephone GP consultation to reduce travel, even if you would prefer to see someone face to face.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accept reusable personal equipment in hospital, such as a gown, after it has been sterilised and checked for safety.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consider the environmental impact of your treatment options as part of deciding your treatment with your health professional (with no negative effect on your treatment).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Adverse weather concerns affecting NHSScotland services

13. Do you have any concerns that weather may prevent you, or someone you care for, from being able to access an NHSScotland service in the future?

- Yes, strong concerns
- Yes, some concerns
- No concerns
- Not Sure

14. Has adverse weather ever prevented you, or someone you care for, from being able to access an NHSScotland service?

- Yes
- No
- Unsure

15. If yes, was it due to: (Please select all that apply)

- Snow
- Wind
- Flooding
- Ice
- Rough Seas
- Heavy Rain
- Excessive heat
- Other, please state

Health benefits of reducing Climate Change and helping NHSScotland adapt to Climate Change

16. Can you think of any health benefits to the population of Scotland as a result of our health and care service being more environmentally friendly? Please tell us what you think.

17. Can you suggest ideas that you think would help NHSScotland adapt to the effects of Climate Change?

Net Zero

By 2040 NHSScotland wants to have achieved 'Net Zero'. This is when the balance between greenhouse gases released into the atmosphere and those removed from it is equal. Greenhouse gases include carbon dioxide (CO₂), methane (CH₄), and nitrous oxide (N₂O). The best way to achieve Net Zero is to reduce the amount of harmful gases we release into the environment.

The goal of achieving Net Zero emissions is a crucial part of global efforts to combat Climate Change and limit global warming to below 2 degrees Celsius above pre-industrial levels.

18. Before today, were you aware that NHSScotland aims to be Net Zero? This means aiming to reduce the amount of harmful gases released into the environment and taking other actions to have less impact on the environment.

- Yes
- No
- Unsure

19. How would be best to reach you when wanting to raise awareness about NHSScotland trying to achieve Net Zero? (Please tick two options only).

- TV campaign
- Social Media campaign
- Adverts in newspapers
- Adverts in NHS and social care buildings
- Radio Campaigns
- Other (please specify):

20. Do you support or oppose NHSScotland's policy to become Net Zero?

- Strongly support
- Support
- Neither support nor oppose
- Oppose
- Strongly oppose

Why do you say this?

Appendix 2: Response profile

Response profile

Citizens' Panel for health and social care - Thirteenth survey
response analysis and profile

Emails sent	943
Number of email responses	321
Email response rate	34%
Number of postal sent	727
Number of postal returned	187
Postal response rate	26%
Telephone surveys	68
Online survey	13
OVERALL RESPONSE RATE	
Response	589
Current number on Panel	1028
Overall response rate	57%

Age	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
16-24	12%	56	5.5%	11	1.9%	20%	-10%
25-44	32%	204	20.0%	90	15.4%	44%	-17%
45-64	33%	375	36.8%	227	38.8%	61%	6%
65+	24%	384	37.7%	257	43.9%	67%	20%
Total	101%	1019	100%	585	100%	57%	

Source: National Records Scotland - Population Estimates 2021. Table 1. Retrieved from: <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/population/population-estimates/mid-year-population-estimates/mid-2021> Data - table 1 05/08/22

Sex	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
Male	48%	468	46%	292	50%	62%	2%
Female	52%	555	54%	293	50%	53%	-2%
Other	-	1	0%	0	0%	0%	0%
Prefer not to answer	-	2	0%	2	0%	100%	0%
Total	100%	1026	100%	587	100%	57%	

[1] Panel members could also describe their sex using any other terms. No Panel members took the opportunity to do so.

Source: National Records Scotland - Population Estimates 2021. Table 1. Retrieved from: <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/population/population-estimates/mid-year-population-estimates/mid-2021> - Data - Table 1 05/08/22

Tenure	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
Own	58%	721	70.76%	458	78%	64%	20%
Rent from Council/ HA	23%	166	16.29%	67	11%	40%	-12%
Private Rent	15%	70	6.87%	33	6%	47%	-9%
Other	4%	62	6.08%	26	4%	42%	0%
Total	100%	1019	100%	584	100%	57%	0%

Source: <https://www.gov.scot/publications/housing-statistics-stock-by-tenure/> 19/08/22

Physical or mental health condition or illness	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
Yes	47%	396	40%	238	42%	60%	-5%
No	53%	601	60%	334	58%	56%	5%
Total	100%	997	100%	572	100%	57%	

Source: Scottish Health Survey – telephone survey – August/September 2020: main report: Chapter 1 General Health, Long Term Conditions and Caring. Retrieved from <https://www.gov.scot/publications/scottish-health-survey-telephone-survey-august-september-2020-main-report/pages/5/> 05/08/22

Religion	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
Church of Scotland	32%	299	32%	192	35%	64%	3%
Roman Catholic	16%	103	11%	51	9%	50%	-7%
Other Christian	6%	65	7%	39	7%	60%	1%
Buddhist	0.20%	9	1%	7	1%	78%	1%
Hindu	0.30%	2	0%	0	0%	0%	0%
Jewish	0.10%	2	0%	1	0%	50%	0%
Muslim	1.40%	26	3%	11	2%	42%	1%
Sikh	0.20%	3	0%	1	0%	33%	0%
Other religion	0.30%	25	3%	11	2%	44%	2%
None	37%	396	42%	233	42%	59%	5%
Prefer not to answer	7%	17	2%	9	2%	53%	-5%
Total	101%	947	100%	555	100%	59%	

Source: Scotland's Census 2011 - National Records of Scotland. Table KS209SCb - Religion. Retrieved from: <https://www.scotlandscensus.gov.uk/ods-analyser/jsf/tableView/tableView.xhtml> NB - No data for 340 Panel members

Sexual orientation	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
Heterosexual or straight	95%	861	90%	510	91%	59%	-4%
Gay or lesbian	1%	42	4%	23	4%	55%	3%
Bisexual	0.60%	20	2%	5	0%	25%	-1%
Other	0.40%	8	1%	4	0%	50%	0%
Prefer not to say	3%	21	2%	16	3%	76%	0%
Total	100%	952	100%	558	98%	59%	

Source: Scottish Government. Sexual orientation in Scotland 2017: summary of evidence base. Figure 4: Sexual Identity in the UK compared with Scotland -2015. Retrieved from: <https://www.gov.scot/publications/sexual-orientation-scotland-2017-summary-evidence-base/pages/3/>

SIMD Quintile (2020)	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
1	20%	208	20%	94	16%	45%	-4%
2	20%	204	20%	107	18%	52%	-2%
3	20%	203	20%	113	19%	56%	-1%
4	20%	198	19%	139	24%	70%	4%
5	20%	204	20%	131	22%	64%	2%
Total	100%	1017	100%	584	100%	57%	

Ethnic group	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate
White Scottish/British/Irish	94%	959	94%	558	95%	58%
Other	6%	61	6%	29	5%	48%
Total	100%	1020	100%	587	100%	57%

Source: Scotland's Census 2011. Table DC2101SC - Ethnic group by sex by age. (2014). National Records of Scotland, Crown copyright. Retrieved from: <http://www.scotlandscensus.gov.uk/ods-analyser/jsf/tableView/tableView.xhtml> 26/10/2016

Urban Rural Classification	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
Accessible Rural	11%	110	11%	64	11%	58%	0%
Accessible Small Towns	8%	91	9%	53	9%	58%	1%
Large Urban Areas	38%	323	32%	201	34%	62%	-4%
Other Urban Areas	33%	357	35%	188	32%	53%	-1%
Remote Rural	6%	86	8%	44	8%	51%	2%
Remote Small Towns	3%	52	5%	35	6%	67%	3%
Total	99%	1019	100%	585	100%	57%	

Source: National Records Scotland - Household Estimates 2021. <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/households/household-estimates/other-geographies-2011-data-zone-based/household-and-dwelling-estimates-by-urban-rural-classification> 05/08/22

Local Authority	Scottish Popn. %	No on Panel	% of Panel	No of respondents	% of respondents	Response rate	Difference response v popn
Aberdeen City	4%	35	3%	22	4%	63%	0%
Aberdeenshire	5%	51	5%	32	6%	63%	1%
Angus	2%	40	4%	24	5%	60%	3%
Argyll and Bute	2%	13	1%	9	2%	69%	0%
City of Edinburgh	10%	93	9%	62	12%	67%	2%
Clackmannanshire	1%	9	1%	5	1%	56%	0%
Dumfries and Galloway	3%	35	3%	21	4%	60%	1%
Dundee City	3%	29	3%	16	3%	55%	0%
East Ayrshire	2%	26	3%	8	2%	31%	0%
East Dunbartonshire	2%	14	1%	8	2%	57%	0%
East Lothian	2%	18	2%	15	3%	83%	1%
East Renfrewshire	2%	15	1%	11	2%	73%	0%
Falkirk	3%	27	3%	22	4%	81%	1%
Fife	7%	25	2%	15	3%	60%	-4%
Glasgow City	12%	100	10%	61	12%	61%	0%
Highland	4%	47	5%	30	6%	64%	2%
Inverclyde	1%	6	1%	2	0%	33%	-1%
Midlothian	2%	27	3%	16	3%	59%	1%
Moray	2%	20	2%	11	2%	55%	0%
Na h-Eileanan Siar	0%	13	1%	9	2%	69%	2%
North Ayrshire	2%	31	3%	13	3%	42%	1%
North Lanarkshire	6%	81	8%	25	5%	31%	-1%
Orkney Islands	0%	7	1%	4	1%	57%	1%
Perth and Kinross	3%	32	3%	17	3%	53%	0%
Renfrewshire	3%	28	3%	14	3%	50%	0%
Scottish Borders	2%	21	2%	14	3%	67%	1%
Shetland Islands	0%	17	2%	10	2%	59%	2%
South Ayrshire	2%	22	2%	9	2%	41%	0%
South Lanarkshire	6%	80	8%	40	8%	50%	2%
Stirling	2%	18	2%	14	3%	78%	1%
West Dunbartonshire	2%	15	1%	8	2%	53%	0%
West Lothian	3%	28	3%	21	4%	75%	1%
Total	100%	1023	100%	588	113%	57%	

Published May 2024

You can read and download this document from our website.

We are happy to consider requests for other languages or formats.

Please contact our Equality and Diversity Advisor on 0141 225 6999

or email his.contactpublicinvolvement@nhs.scot