

Putting people at the heart of digital healthcare

2021 Accenture Health and Life Sciences
Experience Survey – **UK report** 🇬🇧

A healthcare system primed for change

The global COVID-19 pandemic has led to massive change in every area of our lives. Nationwide and localised lockdowns have affected how and where we work, how we shop and even how we socialise.

The race for a vaccine made pharmaceutical companies household names. And a huge, collective national effort to 'Stay home. Protect the NHS. Save lives' saw public services, private enterprise and voluntary bodies come together in service of a public healthcare emergency. The healthcare ecosystem has been expanded and tested in ways we never imagined.

The pandemic has also led to massive changes in how we seek healthcare in the UK and how it is administered. It has accelerated existing trends, as with the shift to virtual GP appointments. It has deepened existing relationships, as the NHS collaborated with pharmaceutical companies to develop and deliver vaccines in record time through initiatives like DigiTrials.¹ It has reaffirmed the critical role of private institutions, with private hospital capacity being turned over to the NHS to manage the spike in cases and private providers taking on the burden of elective surgery.² And it has cemented the importance of high street healthcare providers and seen the emergence of new digital healthcare providers and health tech companies.

With the reforms that will be brought in by the new Integrated Care Systems (ICSs) and the ambitions laid out in the government's Life Sciences Vision³ and new NHS Data Strategy,⁴ more change is on the way.

But what do people think about their recent healthcare experiences?



Our research in brief

Our 2021 Health and Life Sciences Experience survey set out to understand people's attitudes towards healthcare services in the UK and globally. This UK report represents the views of 1,200 people and offers a snapshot of public sentiment about healthcare access, service experience and the outcomes.

People have seen what can be achieved when public and private organisations unite, but how has the pandemic impacted their attitudes to healthcare? How do they now see their relationships with different healthcare providers? And what do these changes mean for the way new treatments are developed and distributed in the UK?

Our research shows how healthcare expectations and experiences in the UK are changing, driven by technology adoption and new healthcare demands. The study also reveals that while people in the UK

have adapted rapidly to incorporate digital technology and utilise new care pathways, today's healthcare experiences and treatment still do not always meet individual expectations.

We believe a more human service for those seeking health advice or treatment is possible through greater collaboration, particularly between providers and pharmaceutical companies. The best way to achieve that vision is to listen to what people themselves say.

What we heard



People are feeling the impact of the pandemic

Our research shows that more than half (56%) of UK respondents feel their access to healthcare services has got worse since the onset of COVID - more than double the average (26%) for the other countries in our global survey. As the UK healthcare system continues to respond to the pressure of the pandemic, taking stock of patient experiences could provide an opportunity to rethink how healthcare is delivered.

Our research identified three key areas where leaders could focus on meeting these new expectations and build on the advances we have seen in digital health technology adoption.

1

Ready to adapt, but on their own terms

2

Looking for reliable information and services

3

Outcome oriented for themselves and others

Ready to adapt, but on their own terms

In today's UK healthcare landscape, people are presented with a complex system of multiple access points across numerous public and private organisations. It can be difficult for individuals to navigate and it can also limit collaboration between healthcare providers and prevent them from connecting to serve individual needs in the best way.

People still primarily use pharmacies (59%) and in-person visits to medical providers (41%) for advice and treatment. But our research shows that the way people access health and wellbeing advice is changing to include new services and providers, including rapidly growing usage of some digital health technologies over the course of the pandemic.

In our pre-pandemic survey, which surveyed England rather than the UK as a whole, 57% of respondents reported using at least one form of digital health technology, such as wearables or health apps. Our most recent survey shows that this has grown to 61% over the last year. While this demonstrates a growing use of digital technologies overall, the rise is most pronounced in the adoption of virtual consultations, surging from 6% pre-pandemic to 35% in our latest research. Equally, the number of patients using electronic health records to access their data has more than tripled (from 4% to 14%).



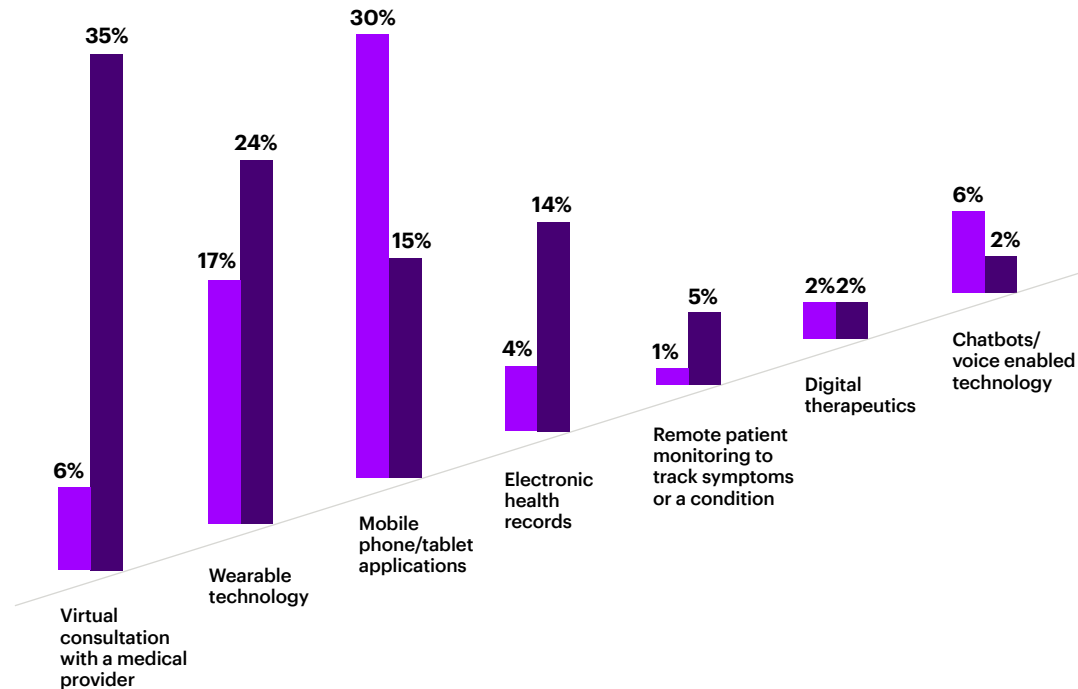
These developments show rapid adoption of digital tools, by both people and providers. This opens the door for more innovative and non-traditional solutions for accessing health and wellbeing services, such as the use of apps to manage access to advice and services or to participate in clinical trials.

However, this transformation should be managed in a way that does not leave behind those without access to digital channels or for whom an in-person appointment remains critical. Our survey showed that, in the UK, 39% of people are only willing to use virtual care if it is the only way to see a medical provider, suggesting there is still a significant proportion of the population who are not convinced of the benefits of digital health technologies.

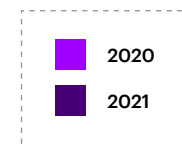
The message is clear: while digital adoption can bring benefits in terms of access and convenience, the public must not feel forced to adopt digital tools just because no other routes to care are available.

Figure 1. People's use of digital health technology is changing

Which, if any, of the following digital technologies have you used to manage your health in the past year?



Sources: 2021 Accenture Health and Life Sciences Experience Survey
 2021 UK N=1,200
 2020 Accenture Digital Health Patient Survey
 England N=1,002



Looking for reliable information and services

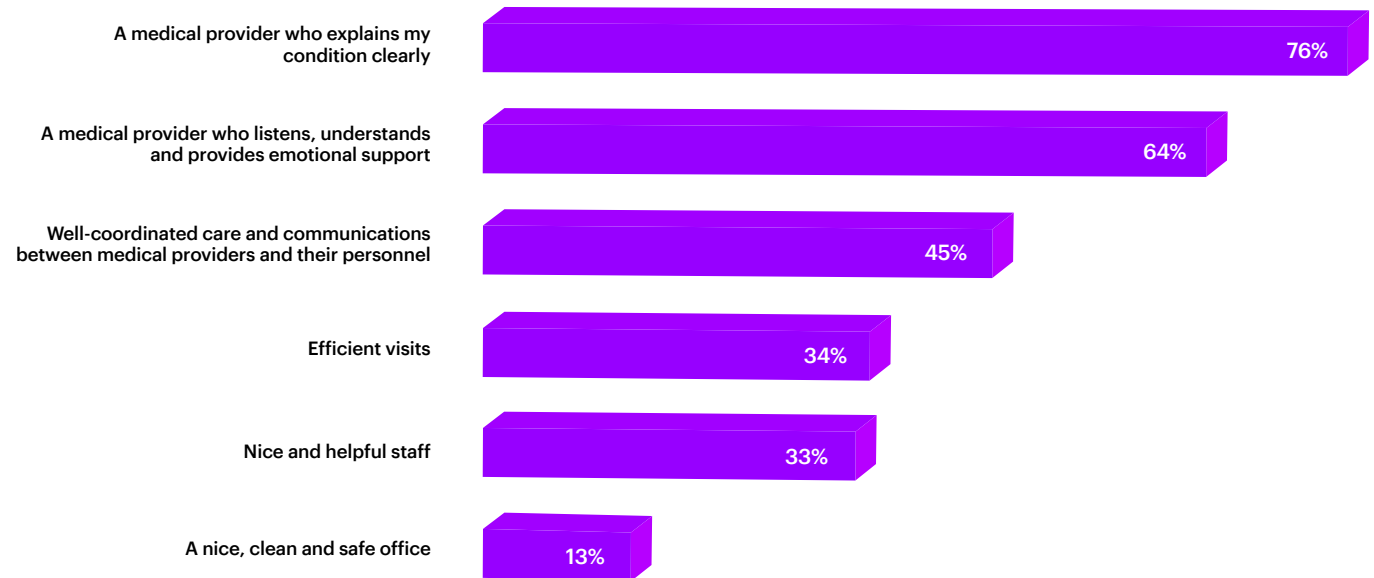
Healthcare needs vary widely. Some people are interested in preventive health services, while others are looking for a quick assessment and treatment of their urgent issue.

For some, this treatment might originate outside of a traditional hospital or GP surgery environment, such as those who are receiving experimental treatments run as a trial with a pharmaceutical company.

Whatever their motivations, respondents told us they want two things: communication and efficiency. The two most cited factors for a positive health experience were a medical provider who explains their condition and treatment clearly (76%) and who listens to their needs and offers emotional support (64%). This was followed by care and communications that are well coordinated (45%) and medical visits that are efficient (34%).

Figure 2. UK respondents want a medical provider who communicates clearly with empathy

Which THREE, if any, of the following factors are most important for your positive experience with a medical provider? Select up to 3 options.



Source: 2021 Accenture Health and Life Sciences Experience Survey
2021 UK N=1,200

24%

of people found
accessing medical
care stressful

Unfortunately, current provision does not always meet these demands. Nearly one-quarter of respondents (24%) in the UK told us that trying to access medical care is stressful for them, compared to an average of 18% for other countries surveyed. Advice that was not helpful (20%), inefficient visits (20%) and lack of emotional support (12%) were cited as the main causes of negative health experiences.

These findings are a call to arms for the UK healthcare ecosystem to replicate the communication, collaboration and coordination which made the initial vaccine rollout so effective by applying these principles to everyday healthcare needs.

One example of experience-led collaboration is in the delivery of repeat prescriptions. Boots, the UK's leading pharmacy-led health and beauty retailer, reduced fulfilment times and increased face-to-face contact with in-store staff by designing a repeat prescription service around its users. This experience-led approach to operational change could be equally applied in other scenarios to improve patient journeys.



Case Study

Boots, the UK's leading pharmacy-led health and beauty retailer, aspires to deliver an unparalleled prescription service to help people lead healthier and happier lives.

This example shows how customer needs can be met by human-centric design and technology, delivering benefits for both people and healthcare providers. The solution offers ease, efficiency and peace of mind to people, and could be a model for other non-traditional providers of services such as blood tests, x-rays, and other diagnostics.⁵

Collaborating with Accenture, Boots has delivered a simple-to-use repeat prescription service which offers patients a more convenient, faster experience. It has trebled online prescriptions and fulfilment delivery times have fallen to fewer than seven days. With a more efficient system, Boots pharmacists and members of the healthcare team can deliver an enhanced customer experience. The number of collect-from-store customers also increased, highlighting the value of face-to-face interaction and friendliness of Boots team members. Boots' digital pharmacy now has the platform to build innovative customer services which deliver on its purpose to be the first choice for pharmacy, health and beauty.

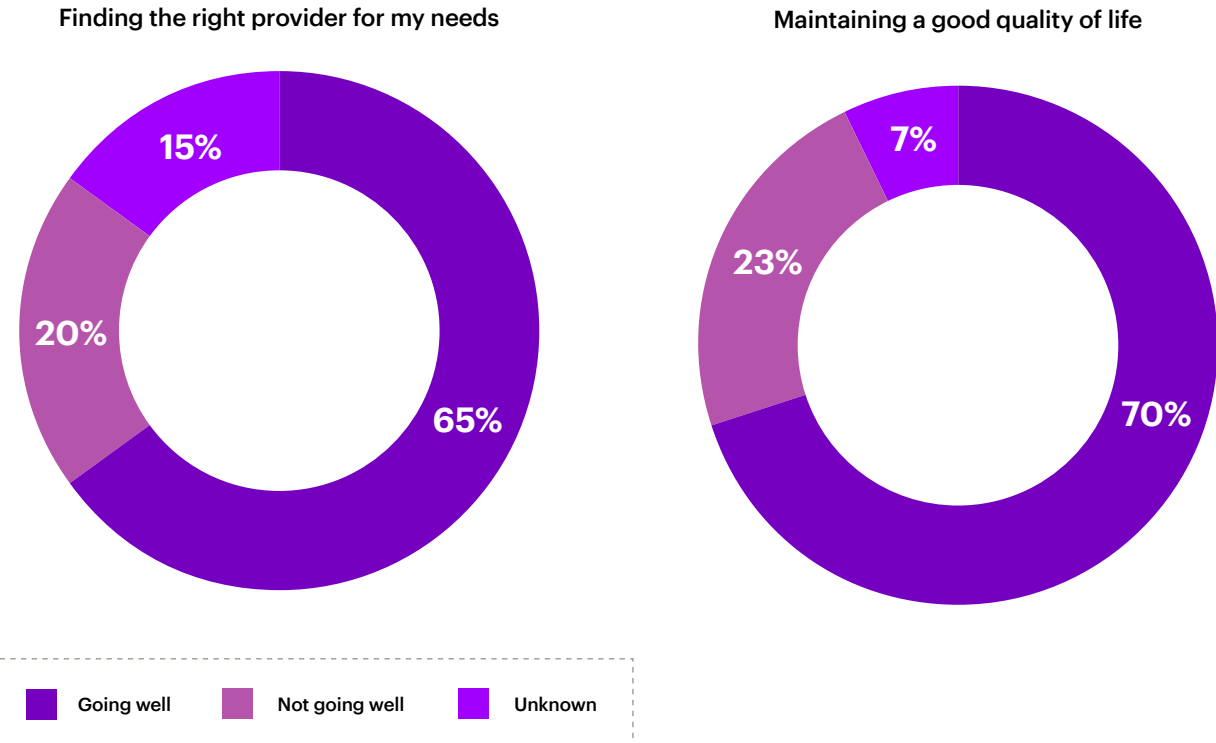
Outcome oriented for themselves and others

The ultimate goal of any healthcare provider is a healthy patient, either through diagnosis and treatment of a condition or prevention of illness in the first place. Unsurprisingly, our research shows that patients are equally motivated by outcomes.

Unfortunately, we found that, for many, current provision still misses the mark in some areas. Whilst most respondents with one or more health conditions are satisfied that they can find the right provider for their needs (65%) and that maintaining a good quality of life despite their condition is going well for them (70%), this still leaves a sizeable minority who do not feel they are getting the best outcome.

Figure 3. Patient journey: Most patients are satisfied, but many are still not getting the best outcomes

How well, if at all, have each of the following steps along your patient journey been working for you?



Source: 2021 Accenture Health and Life Sciences Experience Survey

Full question: You previously said that you suffer from a health condition. For the following question, we'd like you to think about your 'patient journey' and by this we mean how you manage your health, treat your condition(s), etc. If you suffer from more than one health condition, please think about your patient journey overall. How well, if at all, have each of the following steps along your patient journey been working for you.

Going well = 'Very well' + 'Fairly well', Not going well = 'Not at all well' + 'Not very well', Unknown = 'Not applicable' + 'Prefer not to say' + 'Don't know'

2021 UK N=730

Although many people remain sceptical about their personal health data being shared with pharmaceutical companies, nearly half (47%) would allow it if they saw improved treatment and health outcomes – the most commonly cited reason for data sharing. Encouragingly, an equal number would be motivated by the development of new medications and treatments in general. Better population health outcomes can be a major motivator for greater data sharing.

It also seems to be a key motivator in the acceptance of digital health technology. Given the chance, more than half (56%) of those surveyed would participate in a programme which helped them manage their health condition digitally, if doing so gave their doctor more useful information about their condition. As with personal health data, people are also motivated by wider health outcomes, with 41% telling us they would participate in a digital health programme if it provided valuable information to researchers – compared to an average of 28% of people surveyed in the rest of the world.

As providers and pharmaceutical companies look to expand access and improve experience, they should not lose sight of the ultimate goal: healthier lives for the patients they serve.



Let's reimagine UK healthcare

Three imperatives for a more people-centred health ecosystem

We believe healthcare providers, pharmaceutical companies and other partners now have an opportunity to help widen access, create more seamless patient experiences and deliver better outcomes by adopting a more connected and people-centric approach. Not only could this be essential for relieving the pressure on traditional providers like the NHS, but it could also offer individuals more choice and control over the care they receive.

We envisage a future healthcare ecosystem which is more personal and impactful. But to make it a reality, healthcare providers and pharmaceutical companies will need to address three considerations.

1

Address the data dilemma

2

Enable healthcare providers to become digital advocates

3

Build a new relationship between pharmaceutical companies and patients

“ We need to bring our citizens closer to their data, so they can be properly involved in their own care.”

Data saves lives: reshaping health and social care with data, UK Government, 2021

Address the data dilemma

The draft NHS Data Strategy⁴ sets out a bold plan for data-powered innovation to improve how the service operates. We share the view that a more integrated healthcare system requires the widespread – but transparent and secure – sharing of data.

At the macro level, access to population health data could power greater clinical innovation by pharmaceutical companies through more sophisticated research and data modelling of therapeutics and more effective clinical trials. For healthcare providers, seamless connectivity could help improve efficiency through intelligent automation of mundane tasks or help identify opportunities for process improvement and redesign. And for individuals, greater control of personal health data could create new and improved care pathways.

However, the increase in virtual care during the pandemic has made people more aware than ever of how their data is used. In the UK, 72% of respondents said it made them consider that they should have the right to approve the collection and use of their personal health information (PHI) for any purpose beyond their treatment. A further 59% said it had made them think about their data privacy needs.

Taken together with the backlash against the sharing of GP data earlier in 2021,⁶ our research is clear; people want more control over how their data is used.

72%
of respondents want to have control over how their personal health information is collected and used

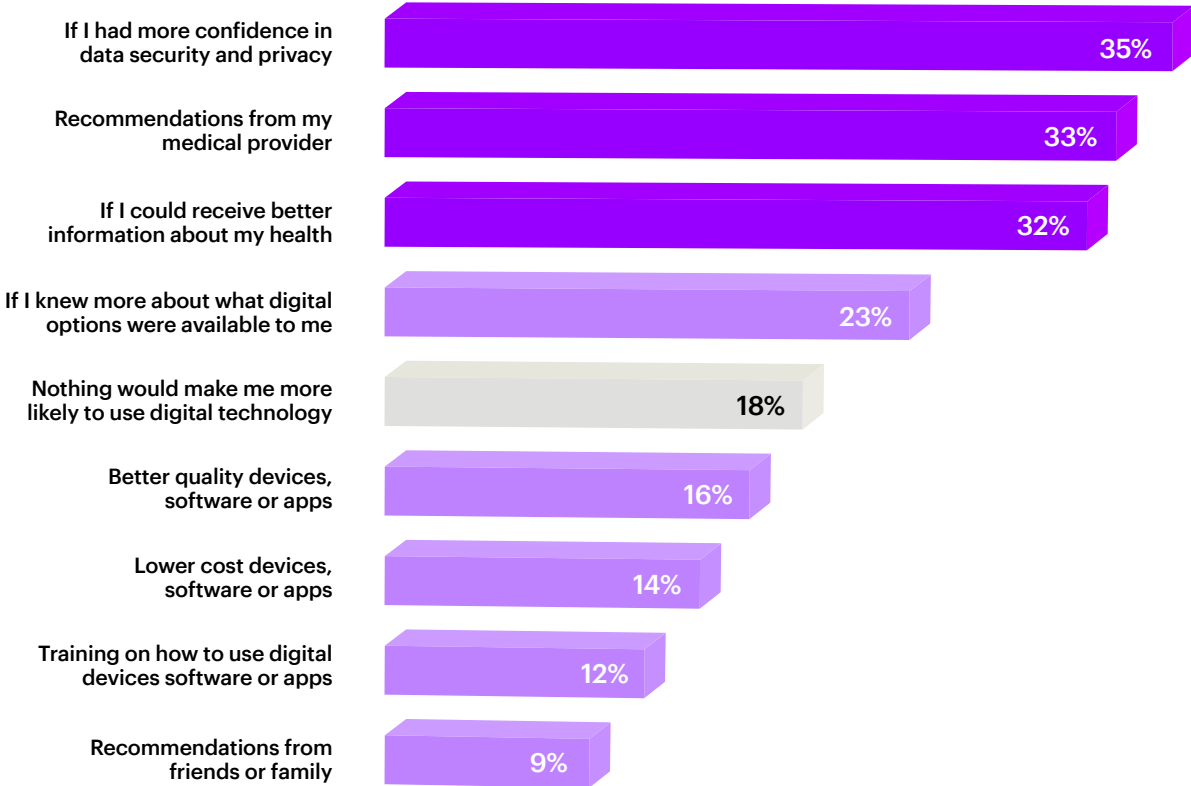
Figure 4: Data privacy and recommendations from trusted sources could boost digital health technology adoption

Which THREE, if any, of the following would make you more likely to use digital technology to manage your health?

Rather than treating this as a challenge, this could be embraced as an opportunity to engage people proactively in their healthcare journey and build broader acceptance of digital health technology in general. When asked which factors would encourage participation in a digital health management programme, 43% of UK respondents cited reassurance about the privacy and security of their data. Separately, 35% said they would be more likely to use digital technology to manage their health if they had more confidence in the data security and privacy measures.

One way to approach this privacy question could be to deepen people’s relationships with their personal health data, giving them more control over how it is used. Despite rising use during the pandemic, our research shows that only 14% of UK respondents had reported using Electronic Health Records (EHRs) over the last year. Whilst broadening the use of EHRs won’t directly give people greater control over their data, the low uptake does demonstrate the limited engagement people currently have with their personal health data.

A new model with a single health ID could enable people to manage the data held by the NHS, on personal health devices and by private or non-traditional healthcare providers. This could streamline the process for accessing these different services by providing one secure digital health identity for use across a range of services. For pharmaceutical companies, it could power the shift to precision medicine by providing a secure way of accessing individual health data in order to tailor treatments. And it could enable the next generation of intelligent health apps by combining multiple data sources in one place to help people proactively manage their health or illness.



Source: 2021 Accenture Health and Life Sciences Experience Survey
2021 UK N=1,200



Case Study

As part of the Global Digital Exemplar programme, the Imperial College Healthcare NHS Trust trialled a number of digital and data-enabled innovations to improve outcomes and experience as well as deliver financial savings.⁷

These innovations included the wireless and automatic entry of patient vital signs into patient records and clinical data analytics to identify opportunities for improvement. Importantly, many of these innovations were built using the Electronic Patient Record system that shares data between hospitals in the trust and with the nearby Chelsea and Westminster Hospital NHS Foundation Trust. This new connected system covered seven hospitals and over two million patient contacts each year.

Those involved have seen the impact of this digital enabled integration. Wireless patient vitals entry has saved 23,000 hours of nursing time annually, and improvements brought in through data analytics have led to a 24% reduction in the risk of sepsis. The trust is now playing a role in defining the digital technology that will underlie the move to the North West London Integrated Care System (ICS).

Enable healthcare providers to be digital advocates

Work is already underway to realise the vision of a less siloed health ecosystem with greater interoperability between providers. The upcoming ICS model⁸ aims to remove the boundaries between different care providers and create a more joined-up care experience for patients.

If successful, this transformation could go a long way to meeting the demands of our respondents for better coordination and communication, by putting them at the heart of the process. It could also lead to major improvements in patient outcomes and increase efficiency, as demonstrated by the Imperial College Healthcare NHS Trust.

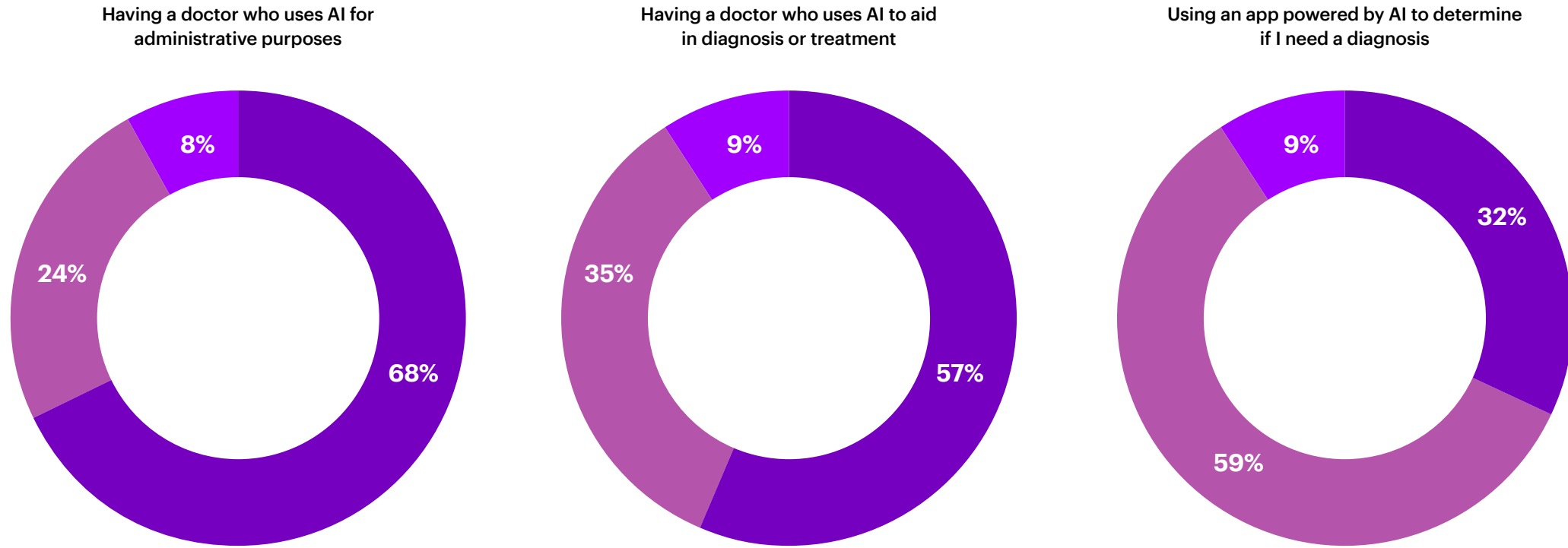
It is essential that people are bought into the process as the ICSs undertake the technical changes necessary to enable “the use of digital and data to drive system working, connect health and care providers, improve outcomes and put the citizen at the heart of their own care”.⁸ Our research suggests that some still have reservations about the use of digital technology in healthcare. In addition to those who would only use virtual care if it were the only option, we also found that people in the UK were particularly reticent about relying on health advice from artificial intelligence (AI). When asked, 53% of UK respondents said they would be uncomfortable using digital technology and AI to get a diagnosis, treatment or take part in a clinical trial, compared to an average of only 40% for the rest of the world.

So, how can providers convince patients to embrace the benefits of digital health technology?

39%
are only willing
to use virtual
care as a last
resort

Figure 5: People are open to AI enabled doctors

Overall, how comfortable or uncomfortable would you be with each of the following healthcare options?



Source: 2021 Accenture Health and Life Sciences Experience Survey

Full Question: For the following question, by “artificial intelligence (AI)”, we mean a collection of technologies that can enable a machine or system to sense, comprehend, act, and learn. Applied in healthcare it can perform clinical diagnoses, suggest treatments, and automate administrative processes. Overall, how comfortable or uncomfortable would you be with each of the following healthcare options?

Comfortable = ‘Very comfortable’ + ‘Fairly comfortable’, Uncomfortable = ‘Very uncomfortable’ + ‘Fairly uncomfortable’

2021 UK N=1,200



Percentages may not always add up to 100% due to rounding

Our research suggests that healthcare practitioners could be key. Currently, 89% of respondents trust information provided by their traditional healthcare providers such as doctors and hospitals, putting them in a unique position to help boost the adoption of digital technologies that could help deliver integrated care. In fact, 35% of UK respondents said that recommendations from a trusted provider would make them more likely to participate in a digital health management programme, so their word carries significant weight.

However, this should mean more than simply encouraging practitioners to promote new digital health technologies. Our research suggests that people in the UK are most convinced when they can see the benefits which digital health technology can offer their trusted provider. As mentioned previously, most would be more likely to take part in a digital health management programme if it gave their doctor useful information about their condition. Taking this approach might even help overcome concerns about the use of AI in care, with 56% of UK respondents saying they would be comfortable having a doctor who uses AI to aid treatment decisions or diagnoses.

The goal should therefore be to make practitioners advocates, by giving them tools to do their job more effectively and thereby demonstrate the impact of digital health technology to patients. This could be accompanied by programmes to build capabilities in these new technologies and help practitioners to get the most out of them. Tools like [Accenture's Intelligent Skills Accelerator](#) could aid in this process by helping leaders identify the skills that their teams will need in both the near and long-term.



“Data needs to be accessible, but to build trust providers must be transparent about the way they secure data and why they hold it.”

Life Sciences Vision, UK Government 2021³

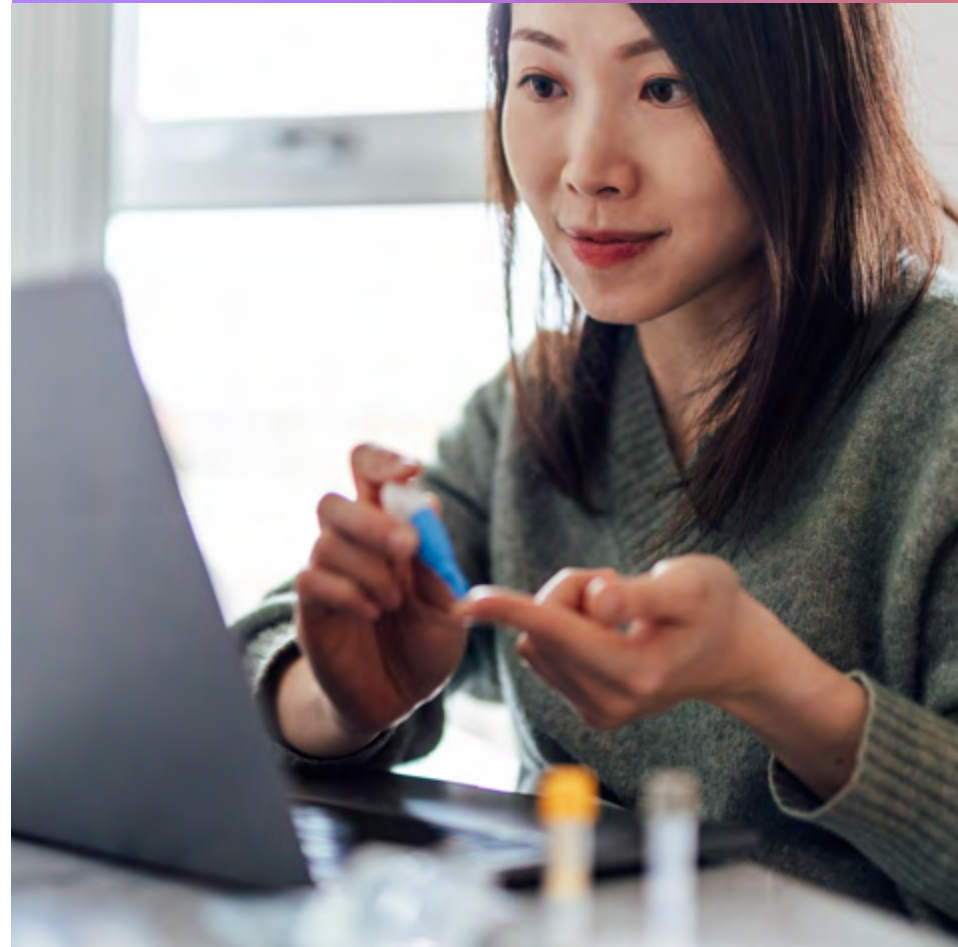
3

Build a new relationship between pharmaceutical companies and patients

It is no surprise that people are most comfortable using traditional and local healthcare routes for in-person medical advice and treatment.

Trust between doctors, nurses, pharmacists and their patients has been built over decades. Perhaps more surprising, despite the role of pharmaceutical firms in offering a way back to some normality during the pandemic, only 12% of respondents trust pharmaceutical companies more now than they did pre-COVID. Only 33% would trust pharmaceutical companies to keep their health data secure.

Pharmaceutical companies play a critical role in the healthcare system and we expect this relationship will become increasingly important as we continue to navigate the effects of the pandemic. Digital technology not only introduces greater connectivity between different players in delivering healthcare services, but the upstream application of [New Science](#) – combining leading-edge technology, data and scientific methods – also offers the opportunity for more precise and effective new treatments to be developed. Unfortunately, the patient trust gap could hamper progress on both fronts.



32%
of people said lack
of awareness stops
them participating
in clinical trials

Only 20% of people in the UK told us they would let pharmaceutical companies manage a chronic illness in collaboration with a medical provider and 62% of patients suffering from chronic conditions had not considered taking part in a clinical trial to access new medicines. And yet, as we have seen, there is willingness to share health data where the purpose for doing so has a clearly explained patient outcome.

When asked what would increase their trust in pharmaceutical companies, clear information was the top priority. People in the UK cited: more transparency in research and development (43%, vs. 36% globally); clearer communication about medications'/treatments' effectiveness and their side effects (41%); and more transparency into pricing (42% vs. 35% globally) as the main factors. Equally, when asked about the factors stopping them from participating in clinical trials, 32% of respondents cited lack of awareness as a barrier, second only to health concerns (47%).

Rather than pulling back from direct engagement with patients, these findings should encourage pharmaceutical companies to develop clearer and more direct connections with their end users.

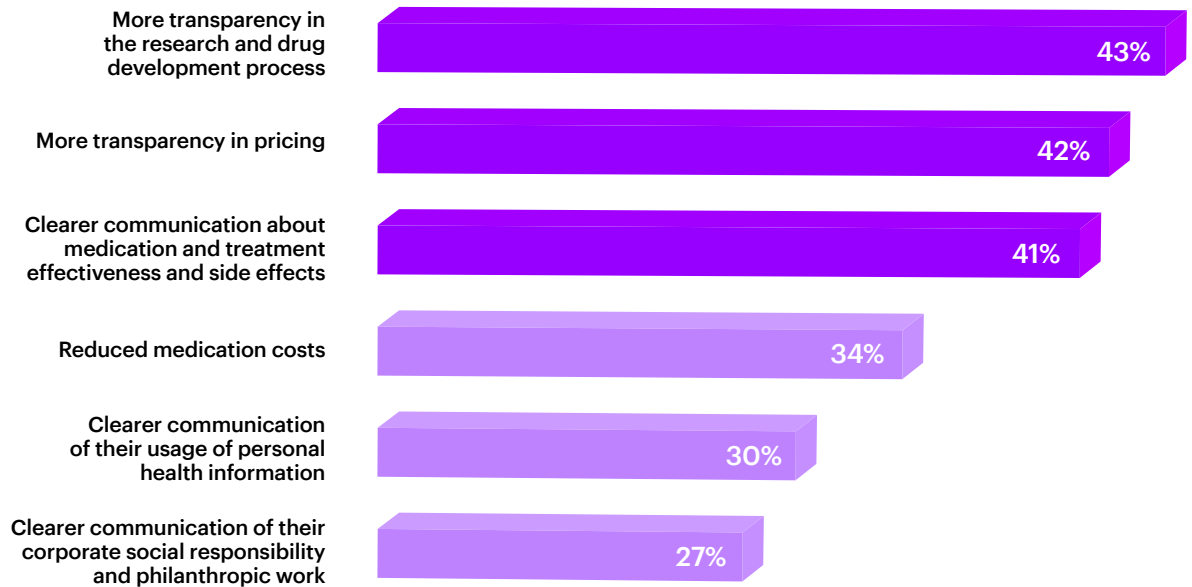
In this context, it is important to strike the right balance between empathetic and authoritative communications. Most patients are not doctors or scientists and they should not be expected to have health literacy on a par with these groups. Respondents told us they value clear communication and transparency, so complex terminology or information which requires explanation could erode patient trust and confidence – the very commodities needed to further advance our understanding of new treatments and health conditions.

Giving accurate information that resonates with an individual on a human level is a critical component to building a more people-centred healthcare experience. It could also help improve outcomes, since understanding their medication and medication plan was cited as the most important factor in following that plan by UK respondents (57%).

It's clear, therefore, that patients are willing to engage more with pharmaceutical companies, as long as those companies meet their expectations on transparency and the information they share. The relationship is a two-way street and if the industry cannot overcome this hurdle, the deep collaboration needed to tackle future health challenges could be difficult. Perhaps, therefore, the pandemic has offered a window of opportunity for pharmaceutical companies to go all-out to capitalise on the positive momentum achieved over the past 18 months and establish a new relationship with patients.

Figure 6: Transparency and communication are key drivers of trust in pharmaceutical companies

Which, if any, of the following would increase your trust in the pharmaceutical industry? Select all that apply.



Source: 2021 Accenture Health and Life Sciences Experience Survey
2021 UK N=1,200

The time is right for next-generation healthcare

As we take steps to recover from the aftershocks of the pandemic and new healthcare reforms come into effect, it is more important than ever to explore the role of technology in creating a more integrated and resilient UK healthcare ecosystem. The pandemic has accelerated this mission, with people embracing digitisation out of necessity. Recovery and resilience go hand in hand, and it is vital that all players within the healthcare ecosystem – traditional, non-traditional and new – collaborate effectively to help improve health outcomes and experiences overall.

We believe this should start with the individual, and design healthcare provision around their needs. In parallel, providers should work together to build trust in digital technologies and non-traditional providers through open communication, demonstrating that each person retains control over their own experience.

It is time to shape a new future. One that puts people at the heart of healthcare to improve their access, experience and outcomes.

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About the 2021 Accenture Health and Life Sciences Experience Survey

Accenture commissioned a survey of 11,823 people aged 18+ to assess their attitudes toward the healthcare system in terms of access, equity, service experience, digital technology adoption and trust. The online survey included people across 14 countries: Australia (649), China, (806), Finland (662), France (822), Germany (872), India (873), Ireland (657), Italy (718), Japan (833), Norway (648), Singapore (653), Spain (675), United Kingdom (1,200) and the United States (1,755). Forty percent of the sample represent patients with current conditions in the following therapeutic areas: Oncology, Cardiovascular, Respiratory, Immunology, Gastroenterology and Neurology. The survey was fielded and analyzed during May and July 2021.

Thanks to **Oxford Economics** for its assistance in developing the survey, analyzing the data and establishing key narratives.

Thanks to **YouGov** for carrying out the fieldwork.

References

¹ [NHS DigiTrials, 10 November 2021](#)

² [England private hospitals turned over to NHS, 24 March 2020](#)

³ [Life Sciences Vision, 6 July 2021](#)

⁴ [Data saves lives: reshaping health and social care with data \(draft\), 8 September 2021](#)

⁵ [Boots: Prescription for success](#)

⁶ [NHS data grab on hold as millions opt out, 22 August 2021](#)

⁷ [Using digital, data and technology to improve the outcomes of patient care in North West London](#)

⁸ [Integrating care: Next steps to building strong and effective integrated care systems across England, 26 November 2020](#)

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