The unique way in which the NHS operates sets it apart from most other health systems in Europe. The over-riding principle is to offer healthcare free at the point of care in a service primarily funded by taxation, and while that has been eroded in some cases in recent years, the core principle remains the same.

Whether the NHS approach is better, or just different, than other systems in Europe and in other parts of the world, is the subject of regular debate and analysis. Within the UK, debate about the NHS is generally about funding, staffing and structure, yet there remains a sense of national pride in the British approach to healthcare.

And UK patients know, and expect, that if they are ill—either because of an unforeseen illness, lifelong chronic condition or sudden trauma—they will not have to check their bank account, consult insurance paperwork or worry unnecessarily before they visit their GP or find themselves in the Accident & Emergency Department.

But just how does the NHS compare with other health systems in terms of performance, service delivery and outcome?

Work by The Commonwealth Fund, published in 2017 gives an indication of that.

The US-based organization, now marking its centenary, was among the first private foundations started by a woman philanthropist. Established by Anna M. Harkness in 1918 with the broad charge to enhance the common good, the mission of The Commonwealth Fund is to promote a high-performing health care system that achieves better access, improved quality, and greater efficiency, particularly for society’s most vulnerable, including low-income people, the uninsured, minority Americans, young children, and elderly adults.

The ‘Mirror, Mirror 2017’ study1 was designed to reflect flaws and opportunities for better healthcare in the US but in doing so also delivered an invaluable insight into other health systems—including the NHS—via an international comparison of the NHS with healthcare systems in the 10 other countries of Australia, Canada, France, Germany, Netherlands, New Zealand, Norway, Sweden, Switzerland, and the United States.

Its method saw 72 indicators selected in five domains—Care Process, Access, Administrative Efficiency, Equity, and Health Care Outcomes—and data sources included Commonwealth Fund international surveys of patients and physicians and selected measures from OECD, WHO, and the European Observatory on Health Systems and Policies.

In its key findings, the report stated: ‘The top-ranked countries overall were the UK, Australia, and the Netherlands. Based on a broad range of indicators, the US health system is an outlier, spending far more but falling short of the performance achieved by other high-income countries. The results suggest the US health care system should look at other countries’ approaches if it wants to achieve an affordable high-performing health care system that serves all Americans’. In reaching that verdict, the study group found the NHS was the most impressive overall and rated the best system in terms of safe care, affordability and equity. Overall, the US was rated lowest in 11th place, with France 10th, and Germany 8th place.

Within the ‘care process’ category, which looked at elements of preventive care, safe care, coordinated care and engagement and patient preferences, the NHS also topped the list. However, in the category of health care outcomes, the NHS was down in 10th place, just ahead of the US, with Australia deemed the best performing system in this respect. Yet what researchers also found was that the UK achieved a larger decline in mortality amenable to healthcare between 2004 and 2014 (37%) than the other countries studied. ‘Experts view that as a key measure, because it captures how well a health system is doing at preventing, detecting and treating illness’, the Commonwealth Fund report noted. It was third out of the 11 nations examined in terms of access and administrative efficiency, which were two categories where France performed particularly badly.

Speaking at the time, UK Health Secretary Jeremy Hunt, said: ‘Ranked the best healthcare system of 11 wealthy countries, the NHS has again showed why it is the single thing that makes us most proud to be British’. Director of policy at the London-based King’s Fund thinktank, Richard Murray, said: ‘The UK’s ranking is welcome and reflects the strong fundamentals of the NHS. Universal access to health services, a founding principle of the NHS, is rightly recognised by the Commonwealth Fund ranking’. But the organization—a widely-respected UK commentator on health issues—also noted that some international comparisons based on measuring the health of the population of the country do not always rank the UK as highly. It also warned of the difficulties of comparing different countries’ health systems, often due to the way data is collected.

In terms of drug efficiency, the NHS has made savings on its pharmaceutical spending and is a leader in Europe on the proportion of drugs that are prescribed in their cheaper generic form instead of the more expensive branded versions.

With planned expenditure for 2018/19 of £126.269bn, current health expenditure in the UK was 9.75% of GDP in 2016 (compared with 17.21% in the USA, 11.27% in Germany and 8.94% in Italy), while average length of stay for inpatient stays in the UK is 7.0 days, compared with 10.1 days in France, 9.0 in Germany, and 6.1 in the USA.

The UK had 2.8 physicians per 1000 people in 2016, compared with 4.1 in Germany (2015), 3.9 in Spain (2015), 3.8 in Italy (2015), 3.5 in Australia (2015), 3.4 in France, 3.0 in New Zealand (2015), and 2.7 in Canada (2015). The UK also has fewer hospital beds than other European countries with 2.7 hospital beds per 1000 population compared with an EU average of 5.2. This is lower than Germany (8.2) and France (6.2) but similar to Ireland (2.6) and Sweden (2.5). But in the UK, the emphasis has been on reducing hospital beds as the model of care changes, combined with medical advances, to see more patients cared for in a community setting with greater integration of health and social care.

Figures show that the UK also has fewer computed tomography scanners (8 per million population compared to an EU average of 21.4) and magnetic resonance imaging scanners (6.1 per million compared to an EU average of 15.4) than most other European countries.
However, this data does not include diagnostic scanners based in non-NHS providers that are used by the NHS.

Britain has also slipped down international league tables for infant mortality and is now 15th out of 19 comparable countries, but there are areas where it is a world leader. Admission rates for congestive heart failure are around a third of the EU average and cancer survival rates continue to improve.

However, the King’s Fund stressed: ‘While we should not rely too much on international comparisons…they do emphasise one of the unique features of the NHS—that access to care does not depend on how much money you earn. The key building blocks of our health system—it's public funding base and the comprehensive range of services provided (mostly) free at the point of use—have made the UK a world leader on equitable access to care’.

What has been more consistent is that the British public rate the quality of their health care highly and are generally satisfied with the overall care they receive from the NHS. In the 2016 Care Quality Commission inpatient satisfaction survey, 86% of some 72,000 respondents rated their overall experience as 7 or more out of 10.

In April 2017, 95.79% of 205,417 inpatients treated by the NHS said they would recommend their provider to friends or family and from the GP Patient Survey results from January to March 2017, 84.8% of respondents rated their overall experience at the GP surgery as ‘very good’ or ‘fairly good’.

Whatever, the international comparisons reveal, in terms of patient experience and public opinion, the British public would be very reluctant to exchange their NHS for any other style of healthcare provision.

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Reference