

Market based reforms have not harmed equity in the NHS, say researchers

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Recent NHS reforms, such as the introduction of patient choice and provider competition, have not had a deleterious impact on equity with respect to waiting times for elective surgery in England, concludes a study published on BMJ.com today.

Until recently, hospital waiting times were seen as a significant problem for the NHS. However, over the past 10 years, as the government increased the supply of [doctors](#), increased funding for the health service, set rigid waiting time targets, and, more recently, introduced market based reforms, waiting times have dropped considerably.

Yet little was known about whether the drop in waiting times had been equitably distributed with respect to [socioeconomic status](#).

So a team of researchers, led by Zack Cooper and Julian Le Grand of the London School of Economics & Political Science, examined changes in waiting times for patients undergoing three key elective procedures in England between 1997 and 2007 (hip replacement, knee replacement and cataract repair). They then analysed the distribution of those changes between socioeconomic groups.

Waiting times were measured as days waited from referral for surgery to surgery itself. Results were then linked to patient postcodes and socioeconomic status was calculated using a recognised index of deprivation.

They found that average waiting times rose initially and then fell steadily over time. By 2007, there was far less variation in waiting times across the population.

In 1997, those from more deprived areas waited longer for treatment than those from more affluent areas. But, by 2007, this phenomenon had disappeared. In fact, in some cases, patients from more deprived areas were waiting less time than patients from more affluent areas.

While many feared that the government's NHS reforms would lead to inequity or injustice, these findings show that inequity with respect to waiting times did not increase. Indeed, if anything, it substantially decreased, say the authors.

While these findings cannot prove what policy mechanisms led to reductions in waiting times and improvements in equity, they do confirm that these reforms did not lead to the inequitable distribution of waiting times across socioeconomic groups that many had predicted, the authors add.

As the government continues to emphasise the importance of choice and competition, these findings should be incorporated into the discussion of whether these reforms will necessarily lead to greater equity or inequity.

Source: British Medical Journal ([news](#) : [web](#))

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