



Covid-19 & My Health : Freedom or Fallout?

Public expectations of Healthcare Delivery in a Post-Pandemic Ireland

Part of the *My Healthcare, My Future* Series

An Ipsos MRBI report, in partnership with MSD Ireland



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Public Expectations of Healthcare Delivery in a Post-Pandemic Ireland

Foreword



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Healthcare in Ireland is at a seminal moment. Since our last *My Healthcare My Future* report in 2019, the world has changed irrevocably. Covid-19 has forced a global reassessment of all aspects of healthcare.

Since the first confirmed case in Ireland, over 500,000 people have returned a positive Covid-19 diagnosis. As of November 2021, almost 6,000 people have sadly lost their lives in Ireland as a direct result of a pandemic which placed a massive strain on our healthcare system and caused immense challenges for our frontline workers and those tasked with responding to the crisis as it emerged.

Many during this period were already dealing with existing symptoms and diagnoses when their routine health procedures, appointments, screenings, vaccinations, and other important interactions with our healthcare system were all significantly impacted. Still today, more than 19 months later there is also widespread concern about the impact of Covid-19 associated lockdowns and restrictions on the mental health of populations and those most isolated and cut-off from important family, social and peer networks.

The Irish health system was placed under further duress with the emergence of a criminal and despicable cyber-attack in May of 2021, which decimated online systems for our healthcare service, and which ultimately further hindered many patients in their ability to access and receive routine services and the care they required.

It is important to acknowledge the extraordinary work undertaken by all healthcare workers during these past two years and we must not forget about the incredible role the frontline staff played in Ireland's response to the various waves of Covid-19 which targeted some of our most vulnerable. On behalf of MSD here in Ireland, I would like to say a special thank you to all frontline workers and all those that we rely on to keep society healthy through an immensely difficult period.

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Our last report, *The Right Click* in 2019, focused on the growth of online resources as a source of information for patients and the advent of virtual doctor consultation services and more. The last 19 months have rapidly accelerated the adoption of digital services, with many of us accessing our local GP services remotely, using apps such as the Covid-19 tracker app to manage our health and access new information online.

Increased familiarity with pharmaceutical companies also emerged from the pandemic as companies like our own have attempted to play our part in the response to the Covid-19 pandemic with a focus on developing solutions and treatments. This is echoed by the research findings with 90% saying it is important that the pharmaceutical industry invests in developing new medicine, while 92% say it is important that the Government and pharmaceutical industry work together to ensure Irish patients get access to new medicines in a timely manner.

This report is intended to continue the important conversations, not just about how Covid-19 will shape how we think about our health into the future, but how we will all collectively think about our healthcare system. Now is a time for reflection and focussing on how we in the healthcare industry and beyond can form partnerships to tackle new and future challenges to better prepare for the next healthcare crisis.

For us at MSD, we believe that the most important thing we make is a difference and we always aim to take a patient-centric approach in all that we do. We also try to challenge ourselves continuously to innovate for the betterment of patients, healthcare providers and the wider healthcare landscape.

MSD is committed to playing a role as a trusted provider in the Irish healthcare landscape and we hope the findings of the research help inform this fascinating, thought-provoking public health debate.

A handwritten signature in black ink, appearing to read 'M. McCaul', written over a horizontal line.

Mairead McCaul, Managing Director, MSD Ireland (Human Health)

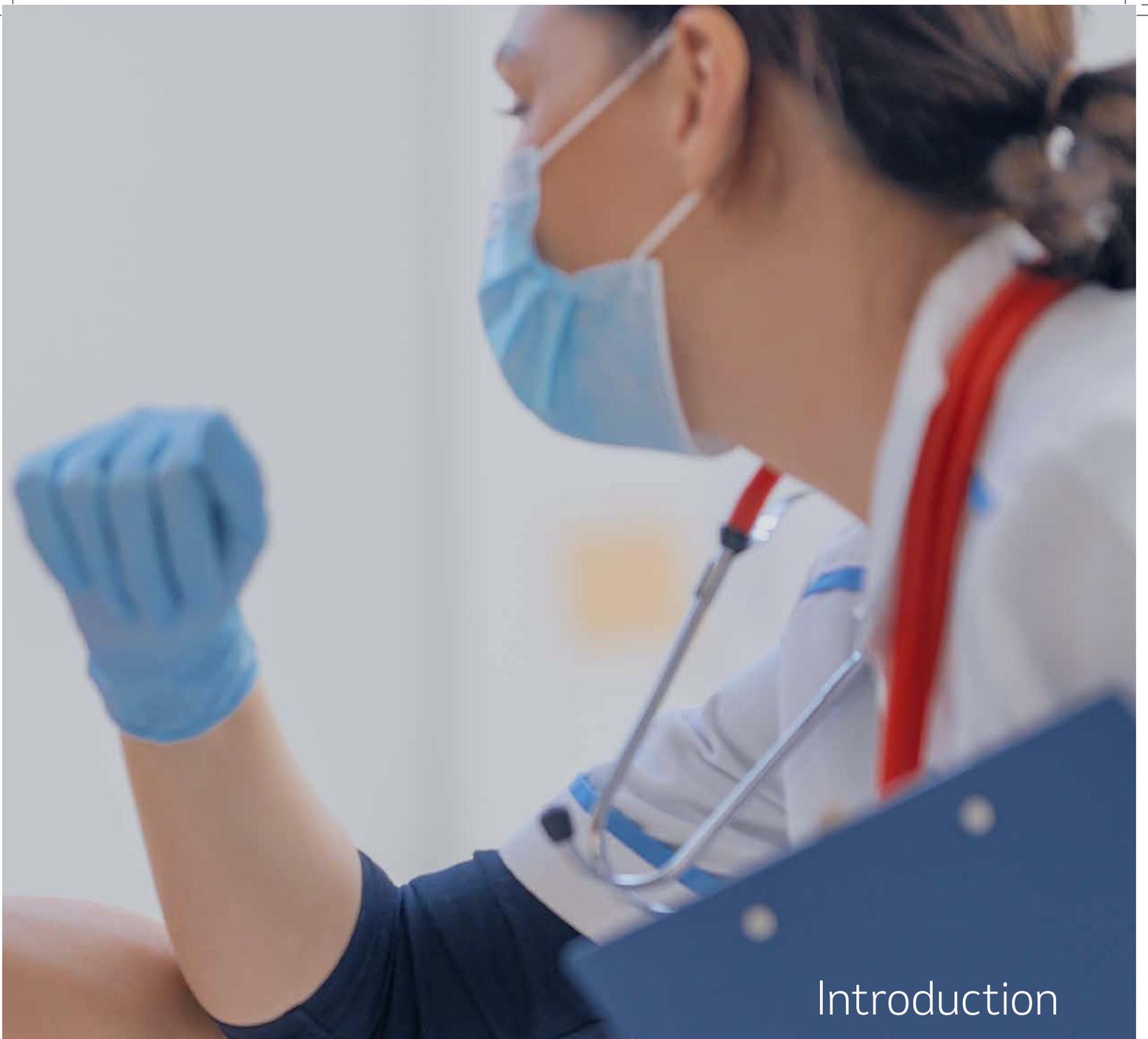
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Research Highlights



Our personal health remains our top priority and we want to be involved in how it is managed



think about their personal health more now than they did before the Covid-19 pandemic



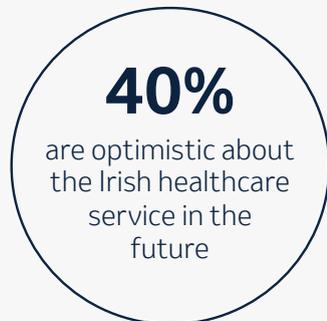
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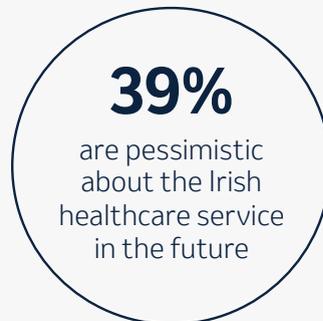
are willing to ask questions if they are unsure of what a doctor or nurse is telling them



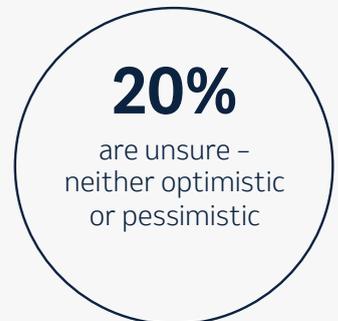
As we emerge from the pandemic, we have varying levels of optimism about our future care



are optimistic about the Irish healthcare service in the future



are pessimistic about the Irish healthcare service in the future



are unsure – neither optimistic or pessimistic



We are open to alternative healthcare channels and are willing to pay a fair price for healthcare services



of Irish adults aged 18 and over currently have private health insurance



are willing to pay a fair price for using healthcare services in the future



are willing to consider using community services rather than hospital services, if appropriate



We believe in the importance of new medicines and want them to be accessible in a timely manner

90%

say it is important that the pharmaceutical industry invests in developing new medicines

86%

say it is important that Irish patients can get access to new treatments early through clinical trials



We are open to using telemedicine in the future, where it is appropriate to our care

80%

are open to seeing a doctor remotely by phone or video if appropriate to their medical needs

41%

have had a remote consultation (phone or video) with a doctor in the past 12 months



We recognise the need for electronic storage of health data but not all of us are confident of its security

81%

believe that they should be able to access their own medical information electronically or online

37%

are confident about the security of any medical files or healthcare information held about them
(but 37% are not confident)

Evolution of *My Healthcare, My Future*



The genesis of the *My Healthcare, My Future* series was a desire from MSD Ireland to place the public at the centre of an open debate on healthcare, focusing on the opportunities available to provide a health system that works better for all.

Conducted in 2015-16, the first study provided a comprehensive exploration and measurement of public perspectives on the future of healthcare in Ireland. It came at a time when public discourse was focused on the development of an all-Party agreed position on healthcare policy.

The research comprised of focus groups, a nationwide survey and in-depth interviews with both healthcare professionals and industry experts, with all participants articulating their hopes and expectations in an open, unconstrained manner.

The report and findings, launched by the then Minister for Health, Simon Harris TD, identified the values that Irish people wanted from services and how they wanted to be treated, which in summary were as follows;

- To have timely and affordable access to healthcare;
- To be treated with dignity and respect;
- To understand their health problems and the proposed solutions;
- To experience a modern, integrated quality system;
- To have access to the best medicines for their care;
- To hear more positive new stories about healthcare in Ireland.



The second study in MSD's *My Healthcare, My Future* series was entitled *The Right Click? Exploring levels of trust in online healthcare information*.

This 2018 study explored the area of online healthcare information, to examine how Irish people were accessing digital and online sources and identify what was driving their levels of trust in those sources.

Three phases of research were conducted as before; focus groups and a survey with the general public, as well as in-depth interviews with key stakeholders.

The findings demonstrated the variability in online searches for healthcare information and how those searches are far from linear and standardised. The public expressed their need for guidance with the role of healthcare professionals proving vital in this regard.

The research also identified the need for a standardised approach to assessing the veracity of health content on the internet, such as the creation of a verified trust mark to help users determine the validity of the information they review.

The published report was presented to a wide range of stakeholders at an event in Dublin, generating considerable debate and discourse.



Background And Objectives



Since 2016, MSD Ireland has partnered with Ipsos MRBI to develop original research to contribute knowledge and insights to the healthcare environment in areas that are most important to the Irish public.

The *My Healthcare, My Future* programme aims to bring the public's voice to the forefront of the discussion. The research does not task the public to create and develop solutions or to determine the specifics of how healthcare should be delivered in the future but is intended to provide an insight into their hopes and expectations in an open, unconstrained manner.

When stories of the coronavirus disease (Covid-19) first started emerging in early 2020, few could have anticipated the enormity of what was to follow. The pandemic that followed has fundamentally changed how we live as a society and potentially, how we think about healthcare in Ireland.

This research study, the third in the *My Healthcare, My Future* series, seeks to explore and examine one over-arching question; what are public expectations of healthcare delivery in a post-pandemic Ireland?

This core objective can be summarised under four pillars of investigation, as follows;

My Personal Health

- As we emerge from Covid-19, how have our personal health priorities changed?
- How involved do we want to be in our own healthcare management?

My Health Service

- What are our perceptions of healthcare delivery in Ireland?
- Are we optimistic or pessimistic about the future?

My Access

- How affordable is it to access health services and how important is health insurance?
- How open are we to considering alternative channels of delivery?
- What do we think of medicines and the pharmaceutical companies that produce them?

My Digital Health

- What has been the experience of telemedicine and how open are we to this?
- Who do we trust for healthcare information and where do online sources sit?
- How accessible should our own medical information be, and do we believe it is secure?

One of the benefits of the *My Healthcare, My Future* series is its ability to benchmark progress and changes in perceptions and attitudes over time. The research questions posed in 2021 sought, where possible, to provide this trend data against the 2016 and 2018 studies.

Though the themes above do not all explicitly look at Covid-19, the fluid nature of the pandemic did serve as the backdrop to the research and each objective was explored through that prism.

How will Covid-19 shape how we think about our health into the future – is it a case of freedom or fallout?

Methodology

Ipsos MRBI conducted a programme of research on behalf of MSD Ireland during the third quarter of 2021, consisting of three inter-related phases as follows;



Phase 1

Focus Group Discussions with the General Public

The initial phase involved a series of in-depth qualitative research with the public, designed to serve two purposes; to comprehensively explore the themes under investigation and to help shape the subsequent general public survey. Four focus groups were held on 13th & 14th July 2021, conducted online to adhere to social distancing guidelines and avoid unnecessary face-to-face contact. The participants were designed to represent a cross-section of Irish society, with a mix of gender, age, social demographics across different counties in urban, suburban and rural settings.



Phase 2

Telephone Survey with the General Public

The purpose of the second phase was to provide robust measurement of public opinion on the objectives. This was carried out via a nationwide telephone survey, with a total of 1,002 adults aged 18 and over interviewed from 30th July – 15th August 2021. Quota sampling and data weighting were both applied to ensure that those interviewed were representative of the Irish population in terms of age, gender, geographic region and social classification.



Phase 3

In-Depth Interviews with Key Stakeholders

In parallel with the above phases, a short series of in-depth interviews was conducted with a sample of key stakeholders with a relevant interest in this subject matter. These interviews were conducted remotely and provided the opportunity for open, free-flowing dialogue to better understand and provide context to the public research findings. Contributors are acknowledged later in the report.

This report combines the results of all phases, focusing predominantly on the views of the public from both the qualitative focus groups and quantitative survey, supplemented where appropriate with contributions from healthcare stakeholders.



My Personal Health

At A Glance

- *Covid-19 has caused us to re-appraise our own health and wellbeing*
 - *We want to work in partnership with those providing our care*
- *Our physical and mental health (and that of our loved ones) is of paramount importance*

Staying Healthy For Myself, Staying Healthy For Others

“The kids are definitely a priority. They always come first with sickness. But then my mother always reminds me, she says if you’re not right yourself, you won’t be able to look after the kids. So I have to make myself number one as well.” [Female, 25-34]

Your health is your wealth. A cliché maybe, but a recurring theme that emerged throughout this research.

At an overall level, one in three (34%) of those surveyed for this research claim to have a long-term medical illness or condition, which was defined as “one that has lasted or will last for at least 6 months or more”. This represents an increase of 11 points since 2018. There is age variation, with 46% of those aged 55 and over saying they have a long-term medical issue, compared to 26% of younger people aged 18-34.

Most people hold a strong belief that it is important to keep healthy, particularly as one ages, for many reasons. Firstly, it is about staying healthy for oneself; it is seen as a form of futureproofing, whereby there is a desire to remain active and involved as one ages and staying healthy will allow one to do that. For example, this might mean enjoying an active retirement including the ability to travel, or to ensure one’s attendance at and participation in family events.

Comparing the findings across different age bands from our focus groups, it is clear that awareness of the need to be healthy increases as one hits “middle age”, which most typically believe is the milestone of turning 40 years of age. One of the key factors making one more personally health-conscious at that age is seeing one’s friends, peers or relatives becoming ill.

The public explain that we are very conscious that as we get older, our physical ability and mobility start to slowly decline. Many of us start trying to make personal health changes around that time, such as improving our diet and stopping smoking, but we also begin to slow down and start to experience aches and pains as our bodies age.

But there is also an altruistic reason why we prioritise our health more as we age. We recognise the importance of staying healthy to look after other dependents, be they children, parents, partners.

“My husband has medical problems. And I have to stay healthy because I have to take care of him.” [Female, 55-64]

The public acknowledge that maintaining one’s mental health is equally important to one’s physical health. This has become more apparent than ever during the Covid-19 pandemic, with many factors placing strain on our mental wellbeing; restrictions on movement, activity and socialisation, periods of isolation, an inability to work and concerns over the virus itself.



How Has Covid-19 Changed How We Think About Our Health?

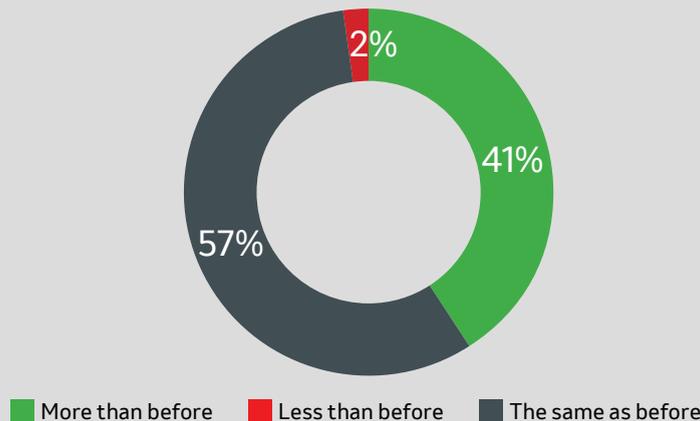
There was no escaping the Covid-19 pandemic. In a figurative sense, it dominated the news media and public discourse across 2020 into 2021. In a literal sense, we stayed at home and minimised social contact and interaction for long periods of time.

It is well documented that the uptake of the Covid-19 vaccine has been very high in Ireland, relative to global norms. At the time of this survey in August 2021, 88% of our survey sample said they had received a Covid-19 vaccine and a further 3% said they would get it when offered.

It is often suggested that Irish people generally feel quite positively about their health, relative to other countries. This research shows that the pandemic has given some people a newfound appreciation for their health. Those who have underlying conditions themselves (or have dependents with medical issues) were particularly cautious of Covid-19, though it is worth noting that there were other research participants that said they did not think about their health any differently.

Our survey shows that in 2021, compared to before the pandemic, 41% say they think about their own personal health more than before. 57% say they think about their health the same amount as before the pandemic and only 2% now think about their health less often. Over half (51%) of young people aged 18-34 say they think about their own personal health more than they did before the pandemic.

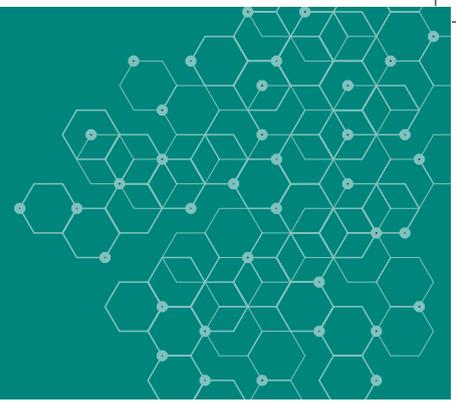
Thinking about now in 2021, compared to before the COVID pandemic, how much do you think about your own personal health. Would that be more, less or about the same as before?



The evidence from this study and other research suggests that during the pandemic, personal fitness and general wellbeing came to the fore for many. Levels of home cooking and exercise increased, particularly among those who were previously inactive, with more time being spent at home and an inability to do much else, all enabled by the fine weather that Ireland enjoyed during the first lockdown of 2020.

“When the lockdown started, I was smoking like a trooper and drinking a lot of wine and stuff. So I packed in the smokes. Then I started cycling which I’d never really done, because there was nothing else to do. And then me and my mates just started working out in the back garden because we found ourselves sitting around for most of the day. So it definitely changed my outlook on my health, big time.” [Male, 35-44]





While all may not have fully succeeded in achieving their goals, many of us at least tried to do better when it came to managing our personal health.

However, many of our research participants admit that their initial enthusiasm around their health has waned and many good habits have slipped. There are concerns over inactivity and pandemic weight gain, with phrases such as “Covid curves” and “pandemic pounds” entering the vernacular.

“I used to swim maybe three or four times a week. But now after Covid, I work from home. So I’m quite conscious of less activity and piling on the weight. So in that kind of way, I am kind of health conscious and I know I need to do a lot more, but I’m not actually doing anything about it at the same time.....” [Female, 35-44]

“.....Don’t worry, we’re all rocking the Covid curves at the moment!” [Female, 35-44]

There is a belief that our care and empathy for others has increased since the advent of Covid-19. However, the significant impact of the pandemic on mental health is also a worry for many people, with concerns over social isolation and spending too much time at home or indoors (whether working or otherwise), not being able to do the things that usually keep us feeling good.

“Everyone was buoyant and there was great spirit of shared adversity in the initial six months...but when it drags on, everyone gets fed up and burnt out.”
[Stakeholder]

Among those that the public believe have been particularly challenged during the pandemic are students, who were unable to go to school or college and arguably deprived of critical years in their lives; and older people who were cocooned, rather than remaining active and engaged while at the same time being protected.

Some authorities suggest there is already an increased demand for mental health support and eating disorder services because of the pandemic and acknowledge that the health service needs to be adequately resourced to respond to this.

Overall, the pandemic has caused many to reappraise their health and the critical role they must play in personally managing it, both physically and mentally. Ongoing and proactive communication from health authorities played a critical role in keeping us informed during this crisis. It is hoped that the public’s appetite for health information is strengthening and increasing as a result.

“There’s an appreciation of what good health means. There’s an appreciation of the importance of your life outside of your work. I think maybe people having to work from home and basically working while living their lives, especially people with family responsibilities, having to work all that around it. I think that people now appreciate more of what they have in life. If they are healthy, they appreciate that and see the benefit of it.” [Stakeholder]

We Want To Be Involved In Decision-Making Around Our Health

As well as recognising the importance of managing our health, our research shows that we want our health journey to be a partnership with those providing our care.

We want to be part of the plan. 91% are willing to be involved in decision-making around their treatment plan, an increase of 6 points since 2016. The public believe that being involved in the discussion means being fully informed and able to decide the best option or treatment approach oneself.

■ *“I think I’m a little bit of a control freak. I want all the information.”* [Female, 45-54]

Some patients will do their own preparatory work before a consultation, by conducting online research, making notes or preparing questions, all of which makes for a more engaging medical consultation. Some patients have two key questions for their doctor; What can you do for me? What can I do differently?

Though trust in the medical profession is high, our experience often tells us we cannot assume they are always right. Some people believe that unless they push for information, it is not always forthcoming or fully understood. In fact, 92% claim that they are willing to ask questions if unsure of what doctor or nurse is telling them.

■ *“I find that it’s very hard to get information from the medical professionals, they literally talk down to you.”* [Female, 45-54]

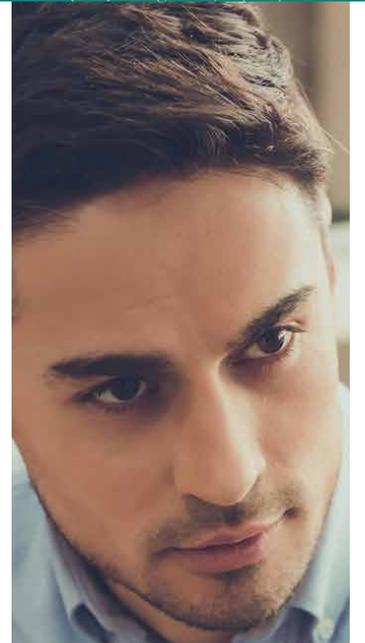
While our survey shows that the majority want to be informed, a minority do not want to fully engage in detailed conversation with their healthcare professional. The reasons for this are usually two-fold; firstly, an implicit trust in everything their doctor says; secondly, some may also have a fear of all things medical and not want to know too much about their health status.

In fact, the patient’s level of interest may depend on the health issue under investigation and the degree to which it is concerning them or impacting on their lives.

■ *“For things I’m interested in, I would ask questions, but things that I don’t want to know about, I’m like, yeah, I know, you’re grand, just give me a prescription.”* [Female, 25-34]

“I think there’s an overall trend for patients to become more informed and we need to equalise it in a way that people feel better ownership of their own care. Because we may lament that patients aren’t doing all the right things.

But then we may be part of that problem, if we’re disempowering patients and just telling them what’s right and what’s wrong. Overall, I think the trend, a very welcome trend, is for people to be better informed and more engaged.” [Stakeholder]



91% are willing to be involved in decision-making around their treatment plan



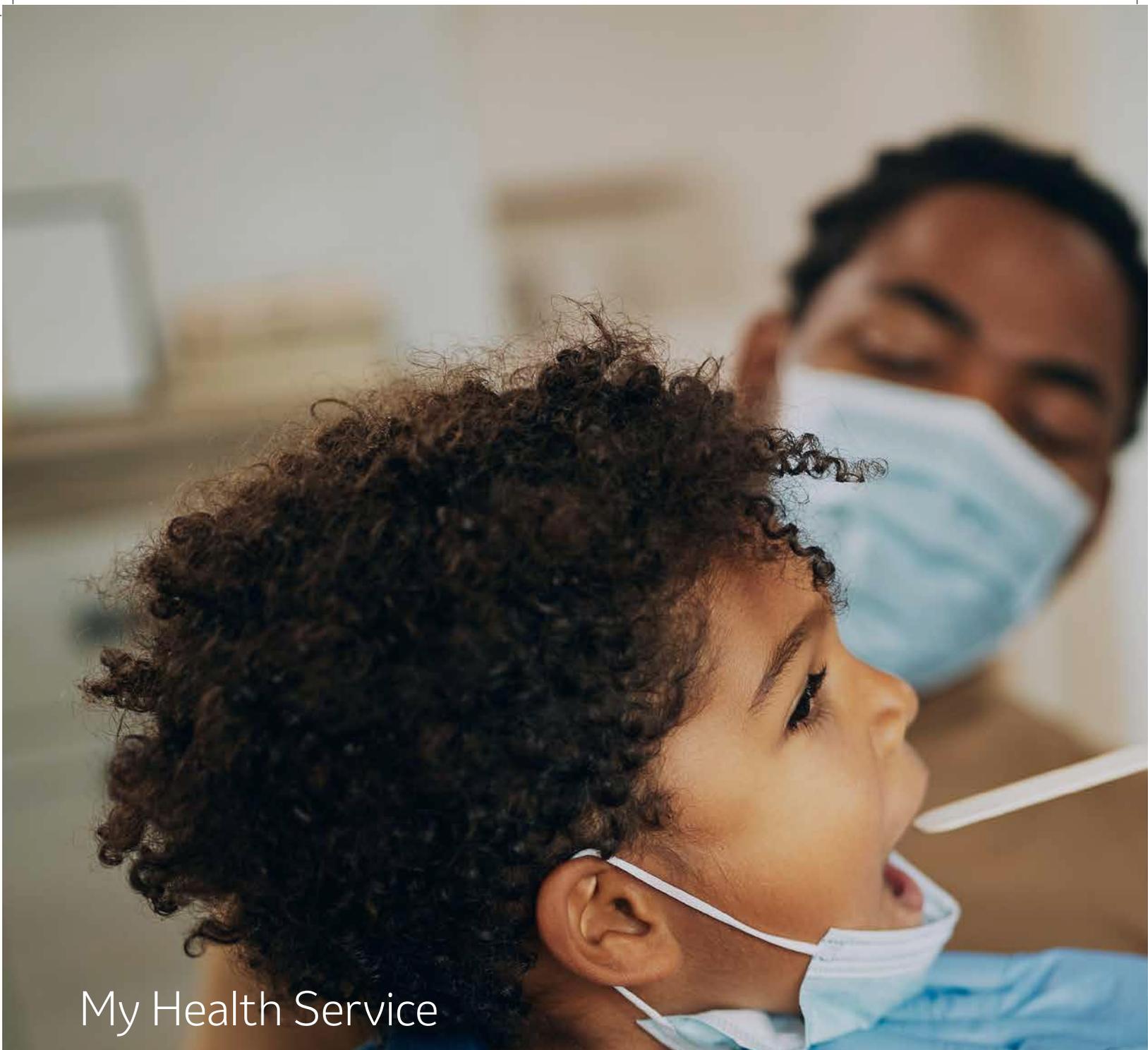
(vs. 2016)



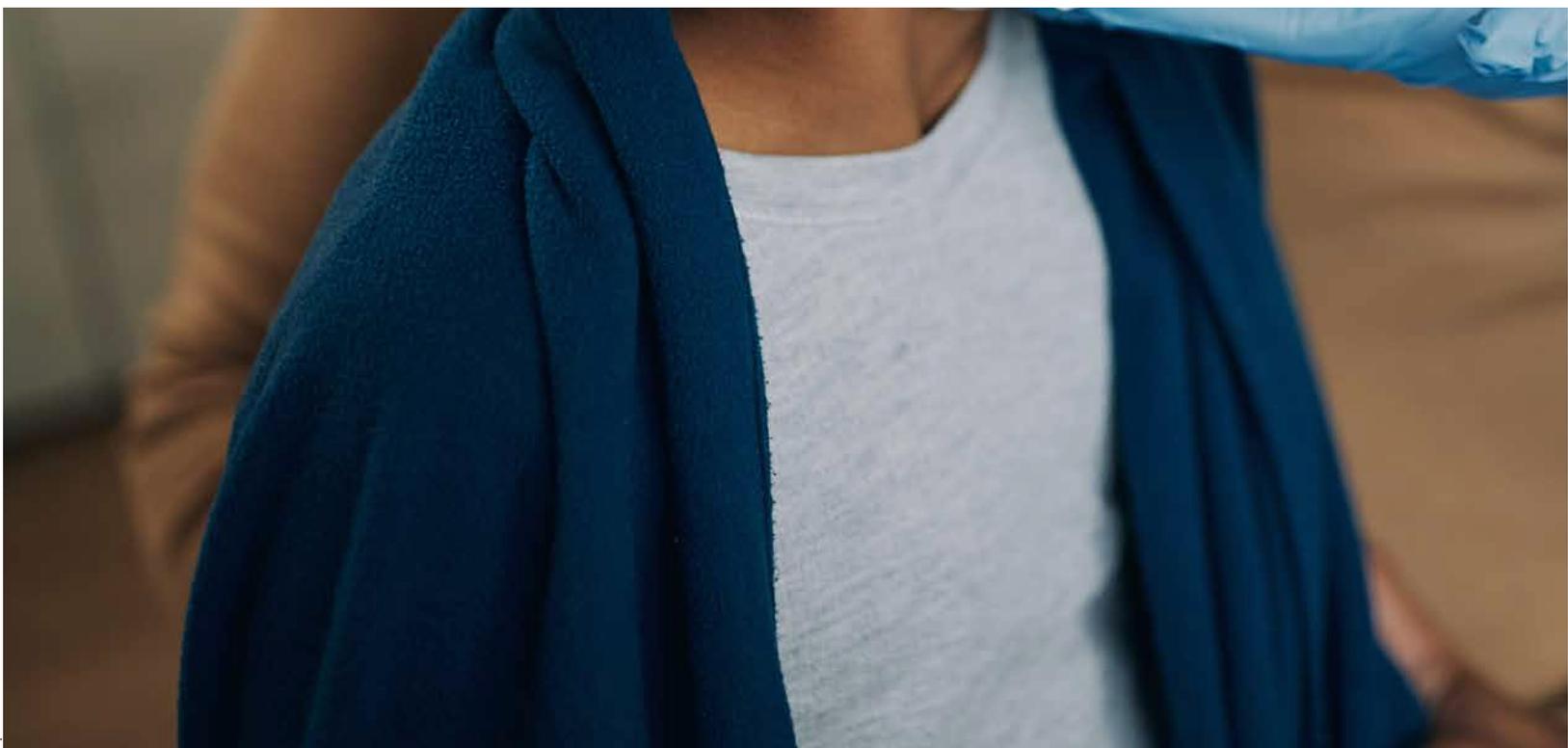
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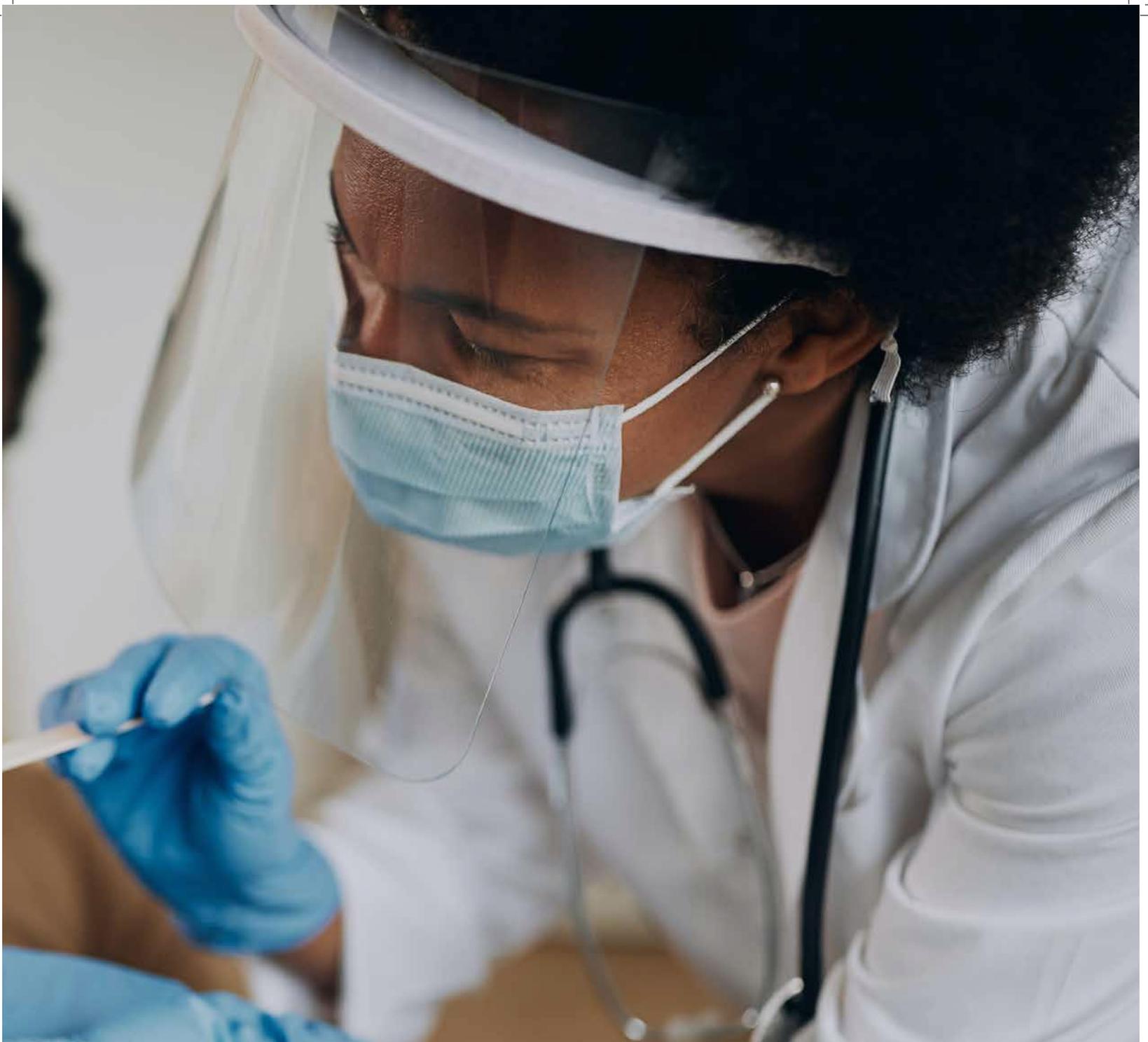


(vs. 2016)



My Health Service





At A Glance

- *We are grateful for the level of care provided by our healthcare professionals and for their dedication during the pandemic*
- *We worry that Covid-19 could exacerbate current waiting lists and cause further delays*
- *Concerns exist around how our health system is structured, financed and administered*
- *We are both optimistic and pessimistic about the future of the health service in Ireland*

We Salute Healthcare Staff As The Heroes Of Covid-19

Most people in Ireland have relatives or friends who work in healthcare, either directly or indirectly. Your local doctor or pharmacist. A care worker in a nursing home. A nurse working in a hospital. A paramedic. We often hear first-hand about the challenges they face on a daily basis.

Our research participants give prominent recognition to the significant pressure that healthcare professionals have always been under, which the public believe has been exacerbated during the pandemic. When this research asked participants to spontaneously suggest what the best thing is about healthcare in Ireland, there was one unanimous response: the staff.

All praise of the health service ultimately comes back to those who deliver it. This research elicited many examples of fantastic patient experiences, particularly in the public health system.

“Everyone I dealt with in the hospital was so lovely, from the moment I went in until the moment I left, I got top notch care. They were absolutely fabulous.” [Female, 55-64]

The public are keen to praise the quality, compassion and excellence of the majority of healthcare professionals they have encountered.

“I think our doctors are very good. I think once you get seen and you’re in the system, it’s very good.” [Female, 45-54]

Furthermore, the public are keen to acknowledge the exceptional dedication and extraordinary sacrifices made by healthcare workers during the Covid-19 pandemic.

“What they had to deal with during Covid was inhumane, and fair play to them.” [Female, 35-44]

Of course, our perceptions of healthcare professionals in Ireland are not universally positive. There are a minority of bad experiences where the public express dissatisfaction with the manner in which they have been dealt with, which are often put down to “the human factor”, e.g. a healthcare worker who, for whatever reason, did not meet the expectations of the service user. However, based on this research, those negative perceptions are rare.

Furthermore, there is clear separation between those delivering healthcare services (who are positively perceived in the main) and the health system itself (which is more likely to be criticised). This is examined further overleaf.

“I think the pandemic overloaded a system that was already not fit for purpose in any event. I think it’s a miracle that they got through the whole Covid-19, or that we’re nearly through it.” [Male, 55-64]

How Do The Public Think The Health Service Could Be Improved?

While there is undoubtedly praise for many aspects of the health service in Ireland, many members of the public appear to display an underlying perception that as a nation, we could be better.

Among the points of criticism observed during this research are perceptions of systemic problems in the Irish health service, e.g. concerns around finance, infrastructure, administration and a sense of bureaucracy. The potential cost associated with the Covid-19 pandemic is a significant concern.

■ *“I can’t imagine the debt mountain that’s coming down the road, potentially, after Covid.”* [Male, 45-54,]

There are perceptions that the administration of healthcare can appear disorganised. For example, the public cite cases of being given multiple appointments on different days to attend hospital (for the same medical condition), rather than those appointments being coordinated for the same day which to them would make more sense.

Some also cite their perception that senior officials within the health service are being paid salaries which they believe are excessively high, which can cause frustration. This can particularly antagonise when juxtaposed against the view that some staff in the health service are perceived to be underpaid for the work they do and, in the case of some student nurses, the belief that they sometimes work for free while gaining their experience!

■ *“I think our hospitals are understaffed, I think the staff are underpaid.”* [Female, 45-54]

Some of our research participants suggest there is a degree of financial wastage within the health system, with resources not being channelled in the right direction. A lack of adequate human resources is often mentioned, with perceptions of overworked staff working disproportionately long hours. A lack of physical resources such as hospital beds are also a concern, particularly the closure of beds in smaller local hospitals which remains a contentious issue for those living in rural areas.

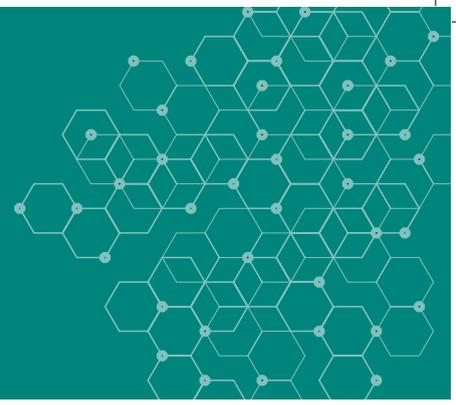
■ *“When the pandemic hit, the lack of beds really began to matter.”* [Male, 25-34]

A recurrent theme at the time of this research is the building of the new National Children’s Hospital, with the public often accusing those involved of poor decision-making. This huge infrastructure project appears to be particularly symbolic and is spontaneously cited across all focus groups as being emblematic of wider health service problems, due to its excessive cost and extended delivery timeline.

■ *“The whole way through this pandemic, we’ve been under the worst lockdown in Europe because they’re terrified of the hospitals being overrun. It’s a disgrace. And I’m just reading tonight that the Children’s Hospital is now going to cost two billion! It doesn’t give you any confidence at all, you know?”* [Male, 35-44]

When the public are asked about what they desire in a health service, three values emerge strongly; we want healthcare delivery that is:

- accessible
- consistent
- efficient



“When it’s a number of people on trolleys, it’s a very abstract thought, whereas when it’s the hospitals are full and we have to stop surgery, it becomes very relevant. I think people are starting to realise why you need redundancy built into a health service now. This phrase that everyone’s now learning, surge capacity, needs to be there.” [Stakeholder]

Issues around access to healthcare have always played their part in undermining confidence in our health service. The well-documented waiting lists for appointments, particularly in secondary care in our hospitals, are frequently cited by the public during this research. Examples are provided of patients having to wait significant periods of time for appointments, often while continuing to experience the symptoms of a medical condition. Long waits in crowded emergency departments can also cause frustration and distress.

“I’m on medication for that problem. And it’s working perfectly. But if I could have got that two years ago, I wouldn’t have had to go through what I went through for two years.” [Male, 55-64]

There is significant concern that further delays in consultations, scans, blood tests and other non-urgent procedures are likely, because of appointments being postponed due to the Covid-19 pandemic. Examples of this were in evidence among our research participants and their families.

The public are worried that Covid-19 will extend the already long waiting lists further and consequently have a negative impact on patient health, as their medical conditions may continue to progress. Furthermore, these delays can sometimes contribute to the perceptions of negative patient experiences cited earlier. Some recognise that they need to take ownership of their health management and ensure they are doing everything within their own power to receive the care they need.

“I do think you need to stay on top of your own stuff to make sure you’re getting the treatment you need, that you are seeing the consultants you need. I think if you leave it up to the system, you can fall between the cracks.” [Female, 45-54]

Difficulties in getting appointments within our health service are not unique to the hospital setting. While many of our research participants are full of praise for their General Practitioner, others give examples of difficulties in getting appointments in the community in a timely manner. Many practices are advertising for more GPs. Furthermore, out of hours GP services have been inundated with questions around Covid-19 placing a further strain on capacity.

Furthermore, it is observed that GPs themselves face many challenges at present, which have been magnified during Covid-19. Many practices are at capacity, with GPs conducting as many as 50 or more patient contacts a day, while trying to keep themselves and their patients safe. General practice is having to be constantly re-imagined and reconfigured. Patients can sometimes sense that their GP may be under pressure and as a result, both parties can feel time constrained and rushed during a consultation.

“I do think all GPs are very conscious of the amount of time they have available, which isn’t good for patient care, but it’s never going to be an ideal situation.” [Male, 55-64]

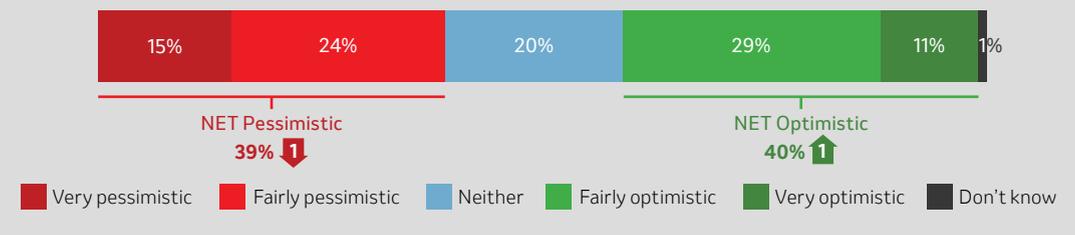
How Optimistic Are We About The Irish Healthcare Service In The Future?

“Covid-19 is now part of mainline healthcare. It’s no longer a unique separate issue.”
[Stakeholder]

Many believe that the health service was in a fragile position before the pandemic and that it may be difficult to know the true impact of Covid-19 for many years. Some would also argue that the Irish narrative has always been around how poor the health service was, even when it was not. Yet as a society we accepted the idea of staying at home during pandemic, to protect our health service.

So with these current perceptions in mind and with the Covid-19 pandemic still very much present in Irish society, how do we feel about the future of healthcare in Ireland? Our survey asked the public to what extent they were optimistic or pessimistic about the Irish healthcare service in the future.

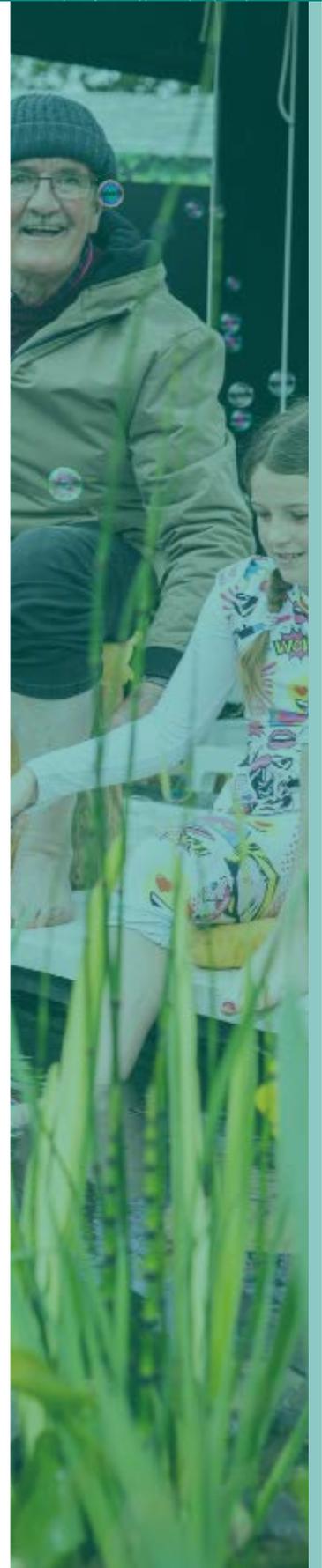
To what extent are you optimistic or pessimistic about the Irish healthcare service in the future?

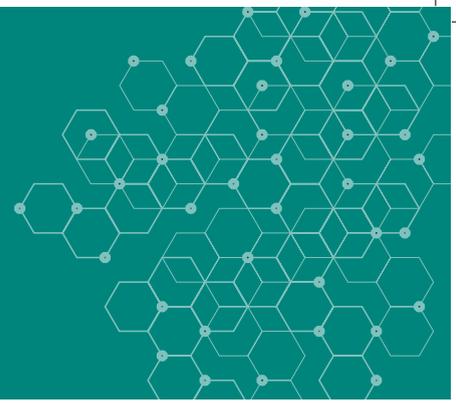


The results show a public divided. Almost equal proportions are optimistic (40%) and pessimistic (39%). A further one in five are neutral in their views. The reasons for both optimism and pessimism were explored in detail in our focus group research.

The reasons for public optimism about the Irish healthcare service in the future include;

- There is a belief that the health service can learn from the mistakes of the past and a sense from some people that things are going in the right direction;
- There is an expectation that the pandemic provides a unique opportunity for both healthcare professionals and service users to think differently about how our health system operates and explore new ways of delivering and receiving the service (such as alternative channels of delivery and telemedicine, both of which are covered later in this report);
- The way in which the pandemic was managed gives reason for confidence and a belief that this has brought the issue of capacity constraints within our health service to the fore;
- It is hoped that appropriate investment will be forthcoming to deliver improvements in both access and capacity within the health service;
- The proven quality and perceived brilliance of healthcare staff gives cause for optimism;





- A minority of people are aware that significant medical breakthroughs are taking place;
- Some members of the public are naturally optimistic by nature and simply want to retain a mindset that the service will improve.

“It’s remarkable what progress is being made in the health service behind the scenes.”

[Male, 45-54]

In contrast, why are others more pessimistic about the future?

- Some believe that a fundamental overhaul of the health service is required and there is a lack of faith that lessons have been learnt from past mistakes;
- Many members of the public do not believe the changes needed and investment required in staffing and capacity are readily addressed or will ultimately happen;
- There is concern over perceptions of current “wastage” in the system and a worry that the financial burden resulting from the pandemic (and other factors such as the National Children’s Hospital) will be too great to allow for the implementation of the changes that are perceived to be needed;
- The likely effect of appointment delays and missed diagnoses resulting from Covid-19 disruption is a worry for many;
- A minority believe the health system is “top-heavy” with too many senior staff and also an imbalance between the resources allocated to administrative roles and those in direct patient care.



My Access

At A Glance

- *We are willing to pay a fair price for healthcare services, though our views around health insurance are divided*
 - *There is strong openness to alternative and community-based channels of care*
- *The Covid vaccines have made the public more conscious of how we access medicines, and how we feel about the pharmaceutical industry that produces them*

A Two-Tier System? How Important Is Health Insurance?

Is private health insurance considered discretionary or essential for those living in Ireland? Is it too expensive and too complicated? Has Covid-19 changed how important we believe it is? Public discourses make frequent reference to Ireland's two-tier health service and that same phrase is often used by participants in this research. There is a belief that particularly for specialist elective care, those with private insurance can use it as a "leapfrogging mechanism" to access care more efficiently.

"With the pandemic, while there were some procedures cancelled and all that, they got the public and the private sector working together. It was a great achievement.... Does it have to be public or private? It's two-tier all the time." [Female, 55-64]

"It's a bit like steerage versus corporate class." [Male, 45-54]

According to this survey, just over half (55%) of Irish adults currently have private health insurance, a decrease of 5 points since 2018. So why do some people value it?

Those with health insurance believe it facilitates quicker and easier access to care, in theory. Otherwise, one is relying on when one can be seen and treated in the public system, without any sense of control.

"You're seen quicker. So in public, you're put on a waiting list down the line and it could be a year before you get to see a consultant. But when you are paying the money, you will see them within a month." [Female, 55-64,]

Most of those who hold private health insurance consider it to be essential to protect themselves and their family. In fact, some of the participants in our focus groups were at times incredulous that others would not contemplate having this cover. For example, they are reassured that it will cover health eventualities in the future, such as paid maternity cover (where one's employer does not).

"It's a necessity. You have insurance for your car, you have insurance for your house. You yourself are the most important thing. Why not have insurance for your health? It's so important, especially with small kids." [Female, 25-34]

"There were times where we thought about giving it up. But I am glad we have it now." [Female, 55-64]

However, there are many others who do not believe that having private health insurance is essential and the reasons for holding this view are often multi-faceted.

In practical terms, some people simply cannot afford health insurance, even if they would like to have it. This view is prominent among younger people, who can sometimes consider it an unnecessary luxury, particularly if they are in good health themselves. Many believe it does not give them value for money now (while they are healthy). Insurance is often perceived as something for young people to consider later in life, when age will warrant its consideration.



55%

of adults aged 18 and over have private health insurance

down
5

(vs. 2018)



■ *“When I’m older and more financially stable, it’d be so nice to have.”* [Female, 25-34]

■ *“When you go to the doctor, it’s like €60, and then when you go and get your prescriptions, it’s a fortune for that. But that’s once in a blue moon, because I wouldn’t be sick that often. But the insurance is just a lot of money every month coming out. It’s so expensive.”* [Female, 35-44]

During our research, some participants not only held a strong objection to the cost of health insurance, but also had a principled resistance to the idea, on the basis that they were already paying taxes to the State to cover their healthcare requirements.

Although many refer to a two-tier system, not all necessarily believe that private healthcare is better. Those without private health insurance are often content to trust the high quality care they expect to receive in our public hospitals, with some pointing out that the same doctors often work in both the public and private system. Though access is challenging in public health, there is also a strong belief that the standard of care received, once accessed, is excellent.

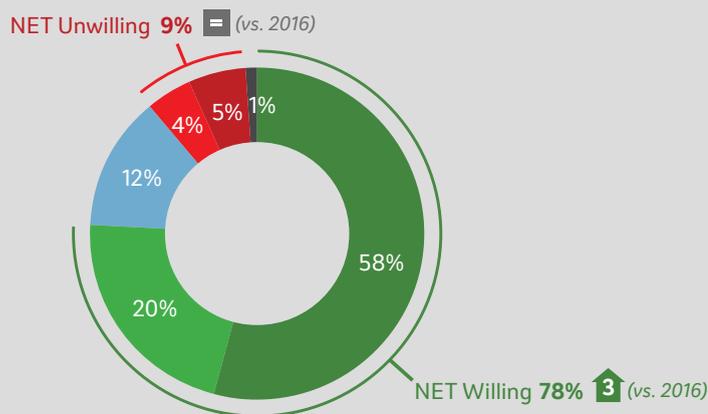
■ *“I’m only going to my own experience that they didn’t ask me going in the door - are you public or private? And they treated me regardless of what I had. You’re not going to be left outside the door.”* [Female, 55-64]

■ *“You’ll get seen a bit quicker (in the private system), that’s about it.”* [Male, 35-44]

Our survey asked the public about their willingness to pay for services. Over three in four (78%) said they were willing to pay a fair price for using healthcare services in the future. Furthermore, while there was higher willingness among those with health insurance (85%), seven in ten (70%) of those without private health insurance also said they were willing to pay. Overall, only a minority of 9% overall indicated they were not willing to pay a fair price for using healthcare services in the future.



How willing are you to pay a fair price for using healthcare services in the future?



Very willing Fairly willing Neither Not very willing Not at all willing Don't know

There Is A Strong Openness To Community-Based Alternatives For Health Services

88%

are willing to consider using community-based services in future, such as GPs & pharmacists, rather than hospital-based services, if appropriate to their medical needs

down
5

(vs. 2016)

This research sought to briefly explore the experiences of the public when using GP services in the community, with the evidence suggesting that both access and experiences are variable across the country. Many were full of praise for the excellence of care they receive in general practice, while others had some points of contention.

The experiences of our research participants suggests that the ease with which one can access a GP appointment can vary both across and within counties, depending on demand and specific location. While some can readily receive either same or next day appointments, others gave examples of having to wait up to two weeks in extreme cases. Though some of those difficulties can be put down to the impact of the pandemic, some members of the public suggest that their access challenges pre-date this. Out of hours access either late at night or at weekends also appears variable by location, with good and bad experiences in evidence.

“I never have a problem, nor does my husband. I know a lot of the consultations are over the phone, they’re pretty timely and pretty good. It could be seven o’clock at night when you ring, but they do respond.” [Female, 55-64]

“Getting an appointment with them, you could ring up and next thing you’re told it’s two weeks’ time for the appointment and sure that’s no good if you’re sick today!”

[Female, 55-64]

Most people are open to receiving their care in the community rather than being over-reliant on the hospital system. When asked, the majority of the public (88%) are willing to consider using community-based services in future, such as GPs and pharmacists, rather than hospital-based services, if appropriate to their medical needs. Though down slightly on our previous measure in 2016, there remains a strong willingness to consider such alternatives which can offer high-quality convenient care in a timely manner.

“If it is a serious thing and I need to be referred, fine, but there’s no reason why I should go into a hospital if my local doctors can do the same job.” [Female, 25-34]

Furthermore, there is a positive acknowledgement that the breadth of community services that are now available have improved, with larger Primary Care Centres now offering additional services that were historically only available in hospitals.

“When I had my problem, the GP sent me straight over to get an ultrasound. I didn’t even know they did ultrasound in the Primary Care Centre. I was amazed that I was able to go in so quickly and I didn’t have to drive miles.” [Female, 55-64]

The majority may not want to attend hospital unnecessarily, but they are not sent by GPs unless it is deemed necessary. GPs may have access to better resources in the community but what they really need is access to time, given the need to manage their consultation load at a safe and responsible level.

The Prominence Of The Community Pharmacist Continues To Grow

It is not only GPs that offer accessible healthcare expertise in the heart of our society. Community pharmacies deliver a well-regarded service, with our research participants quick to recognise and praise their expertise and accessibility. Pharmacists expanded their role during the pandemic and the positive public perceptions of pharmacists that already existed intensified with their increased prominence in people's lives.

Covid-19 saw a dramatic increase in the pharmacy workload, as they remained open throughout this period, serving and advising customers. This meant pharmacists were not only contending with having to adapt their premises accordingly to ensure guidelines were adhered to, but also had to demonstrate their resilience against additional challenges such as a lack of personal protective equipment (PPE) and panic buying of medicines, while at times being short staffed themselves. More recently, pharmacists have begun to administer Covid-19 vaccines, a role they were willing to do throughout the pandemic.

"The regulations were changed to allow pharmacists to repeat and extend prescriptions and to dispense against expired prescriptions or whatever it took to protect people's access to medicines." [Stakeholder]

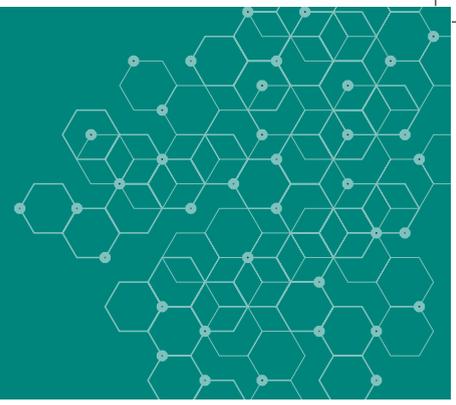
Pharmacists are perceived to offer a viable and free health advisory service while also knowing when the GP's direct input is needed. They are seen to have built strong relationships in the community and are often praised for their customer-oriented approach, with long opening hours and the provision of extended delivery services during Covid-19. Pharmacists are considered by many as a "first port of call" for minor ailments, with parents of young children in particular valuing the medical advice they can provide.

"I find the pharmacists excellent for minor things. And they're great for giving advice, say the side effects from tablets. They're really excellent." [Female, 55-64]

While clearly well-respected, valued and trusted in the community, our focus group research revealed some queries from the public about the potential limitations of the service offering that can be provided by pharmacists.

"I'm not 100% sure where the threshold of the pharmacist is. I would just have that reservation about the doctor and pharmacist and a nurse, about where the overlap is?" [Male, 25-34]





85% are willing to consider using alternatives to GPs, such as their local pharmacist, when they require non-urgent healthcare services in the community



up 5 (vs. 2016)

There is some confusion and at times frustration that pharmacists cannot prescribe simple medications which the public believe would not only utilise their expertise in a practical way, but also alleviate some of the pressure on General Practitioners. The type of advice often received from the pharmacist when dispensing medication is considered illustrative of their expertise, though some people may express minor concerns around the ability to discuss sensitive personal health issues privately in busy pharmacies (despite the acknowledged availability of consultation rooms).

“They should be able to prescribe some of the minor stuff because they’re so well educated, they are brilliant, they know all of the viruses going around in the community. They’re not given the credit they are due really.” [Female, 45-54]

“When you get a prescription, they often spend more time than the doctor explaining how you use it, when to use it, they take more care of you. They actually talk to you on a one-to-one.” [Male, 55-64]

One criticism that emerges from some participants in our research is that community pharmacies can be expensive and some would argue that their retail mandate could arguably be in conflict with being given the ability to prescribe.

Confusion also abounds as to why prices differ between pharmacists across jurisdictions, with medications perceived to be more expensive in the Republic of Ireland than both Northern Ireland and other European countries. Interestingly, while some blame pharmacists for the high price of medicines, other members of the public find fault with the pharmaceutical industry in this regard.

“The mark-up seems to be huge for the pharmacies. Since the crash, the main street was decimated but all the pharmacies remained!” [Male, 45-54]

Our survey shows that the majority of people (85%) are willing to consider using alternatives to GPs, such as their local pharmacist, when they require non-urgent healthcare services in the community. This result has increased 5 points since 2016, perhaps indicative of the fact that the emergency nature of the pandemic has triggered a reappraisal in how we use community-based healthcare services.

The Importance Of Medicines In Our Current & Future Lives

Evidence from this and other research suggests that the public can have a variety of perceptions about prescribed medicines and that individuals can sometimes hold conflicting views. What is almost certain and supported by the findings of this research is that medicines are highly valued by the majority of the public, even many of those who are often reluctant to take them.

■ “[Medicines] They’re keeping people alive and keeping people going.” [Female, 55-64]

Those who have benefitted from medicines either directly or indirectly tend to see their true merit. Many have witnessed the positive and often life-changing impact of medicines on their personal health or the health of loved ones and consequently are strong believers in their value. In fact, nine in ten (90%) of us believe it is important that the pharmaceutical industry invests in developing new medicines.

“Science is coming to the fore. People are recognising that their medicines are scientific discoveries. People are much more appreciative of the fact that medicines are controlling their blood pressure, their COPD, or asthma or diabetes, or whatever it might be, where they may have taken it for granted.” [Stakeholder]

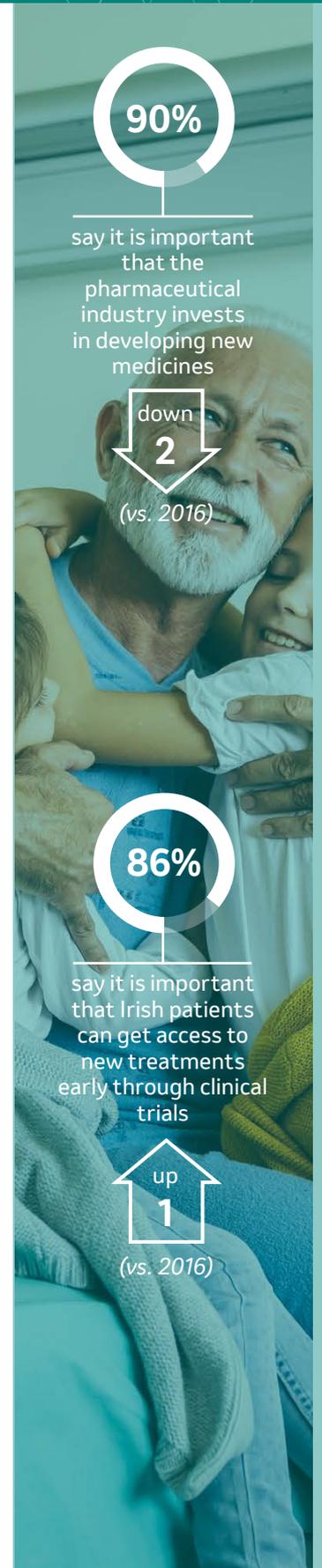
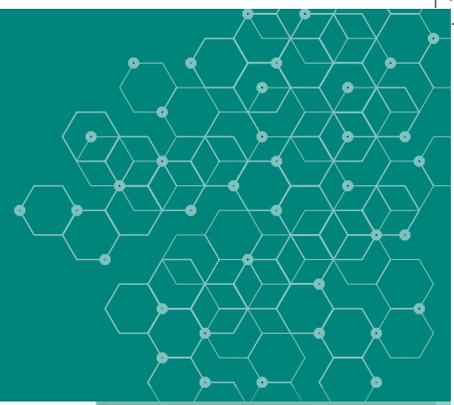
A minority in our research express some reservations around having to take medicines with a degree of frustration that prescribed treatments may sometimes only control the more challenging medical problems, rather than cure them.

While some people would simply rather not take tablets if they can avoid doing so, particularly for primary prevention, at the same time most also tend to trust their doctor and as a consequence, the medicines they are prescribed.

■ “I would hope that I don’t have to be on them (medicines) for the rest of my life. I’m told I will be, but there must be an alternative.” [Female, 55-64]

The path that a medicine must take before it can be readily prescribed in Ireland is a long and arduous one and its complexity is rarely understood by most members of the public. For example, a minority have a sense that some newer medicines are available in other countries and not here in Ireland due to funding difficulties, but in general most only have a superficial understanding of the intricacies of medicine pathways.

Our survey says that 86% of people believe it is important that Irish patients can get access to new treatments early through clinical trials. However, most participants in our research confess that they do not fully understand the time and complex path that medicines can take to get to market, or to be reimbursed for use.



say it is important that the pharmaceutical industry invests in developing new medicines



say it is important that Irish patients can get access to new treatments early through clinical trials



Our Views On The Pharmaceutical Industry In Ireland

“Ireland is known for its pharmaceuticals and technology. Obviously Ireland is doing a great job because I think we’re recognised worldwide.” [Female, 25-34]

Similar to our views on medicines, there are conflicting opinions of the pharmaceutical industry, with many seeing both positive and negative aspects to the activity of these companies. On the one hand, industry is acknowledged to invest significantly in research and science, even if some believe the ultimate goal of the companies involved is primarily a commercial one. The pharmaceutical industry in Ireland has a strong reputation as a good employer that values its staff, as well as a considerable reputation internationally for its expertise in this space.

“Those are the very same companies that are pumping the money into research. And of course, it’s a business, and they have to make money, but they’re there and invest the money in research.” [Female, 55-64]

On the other hand, there are a minority of people who do not fully trust the pharmaceutical industry and believe that it is primarily driven by financial objectives. The twin goals for industry of delivering life-changing medicines to patients while also delivering commercial targets to stakeholders are sometimes difficult for some members of the public to reconcile. However, by their own admission, many do not know the industry well enough to comment.

“I think when something gets so big and so powerful like that, it’s natural to have a distrust of it, you know?” [Male, 35-44]

One question that was posed during our research discussions with the public was whether the emergence of the Covid-19 vaccines has changed how we view the pharmaceutical industry? Given the pandemic challenge has been all-consuming for so many people in recent times, opinion of industry is positive in the main and the majority of our research participants stress their appreciation at how quickly a vaccine was developed and made available to the public. A minority, however, remain unwilling to praise industry and retain an air of suspicion.

“Me and my friends were just on about how quickly they were able to get a vaccine. It is fairly remarkable, in almost a year or maybe even less than a year, that so much of the country’s already vaccinated so it is obviously fantastic.” [Male, 25-34]

“A lot of people were worried about how quickly this vaccine was rolled out. It’s not really quick. It’s a huge amount of man hours put in and then a potential research pool of seven billion people, that’s how you get it done so quickly, it’s not surprising in any way.” [Stakeholder]

Nonetheless, there is widespread support for access to treatments in general. 91% say it is important that the Government and Health Service Executive (HSE) invest in making new medicines available to Irish people, while 92% say it is important that the Government and pharmaceutical industry work together to ensure Irish patients get access to new medicines in a timely manner. Support for both beliefs is largely unchanged since 2016, despite the Covid-19 pandemic.



91%

say it is important that the Government and HSE invest in making new medicines available to Irish people

down

2

(vs. 2016)

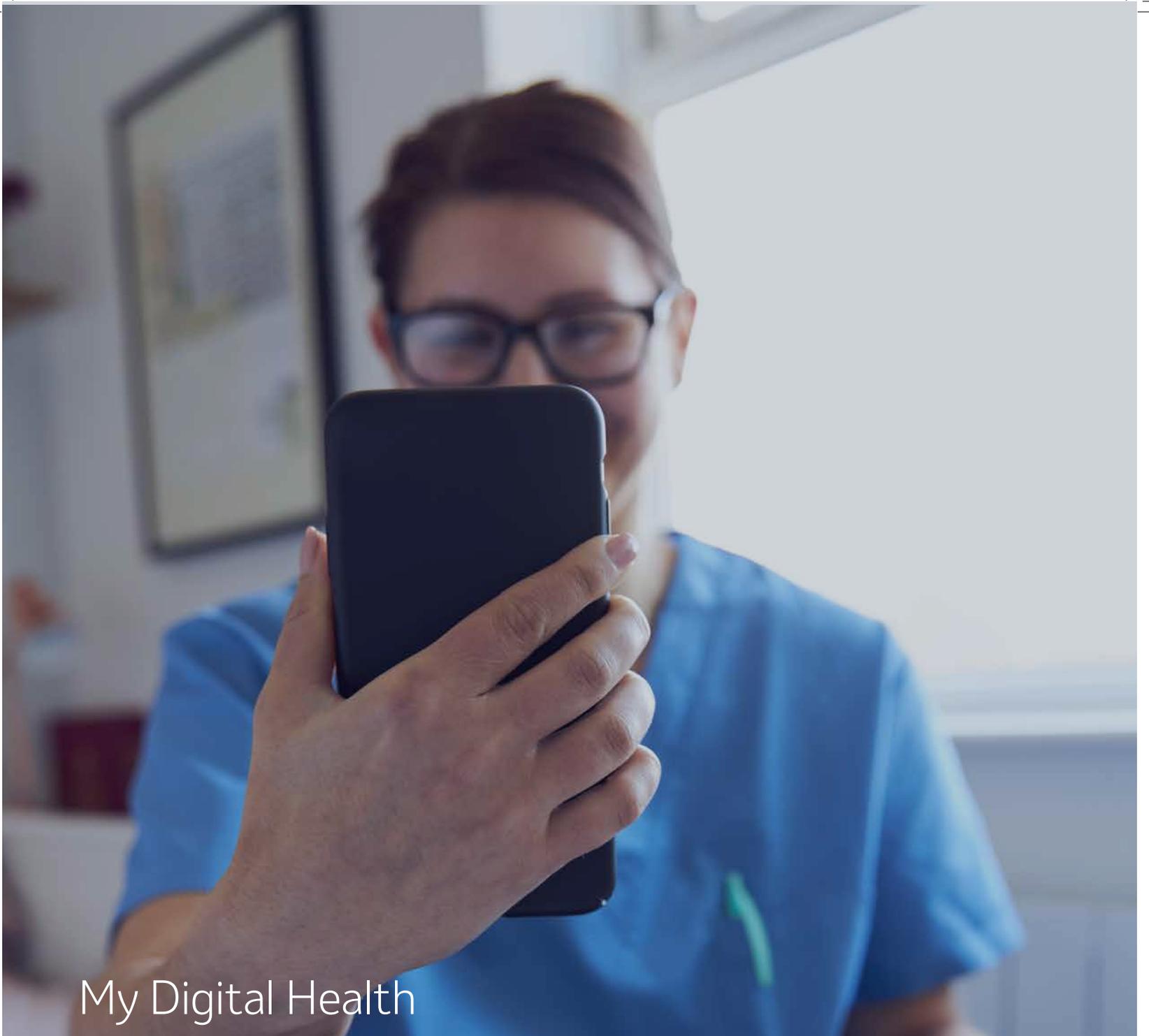
92%

say it is important that the Government and pharmaceutical industry work together to ensure Irish patients get access to new medicines in a timely manner

down

1

(vs. 2016)

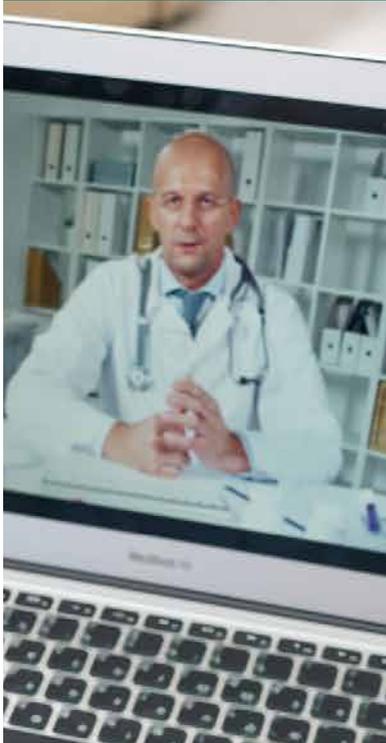


My Digital Health

At A Glance

- *A majority are open to telemedicine, whilst acknowledging its limitations*
- *Our healthcare professionals are the most trusted sources of information on our health, though we often consult a variety of sources*
- *We want easy access to our personal health information but have some concerns around privacy and security*

Telemedicine May Be Here To Stay – Are The Public Open?



Remote Consultations
Past 12 Months



Phone
38%



Video
5%

NET
Any Remote
Consultation
41%



None
59%

One of the biggest changes in healthcare delivery as a result of Covid-19 was the more widespread use of telemedicine, also referred to as telehealth or e-medicine. Though not unheard of prior to the pandemic, the remote delivery of healthcare services has become more prominent in recent times. Our survey shows that over four in ten (41%) people had availed of a remote medical consultation, either by phone or video, in the previous 12 months.

Many perceive telemedicine to be an efficient way to deliver healthcare which saves time for the patient (e.g. no delays in the waiting room), particularly for non-urgent reviews or when the issue is relatively minor.

“I thought it was very efficient. But then I wasn’t looking for anything to be diagnosed. I knew it was just on my pre-existing condition.” [Female, 45-54]

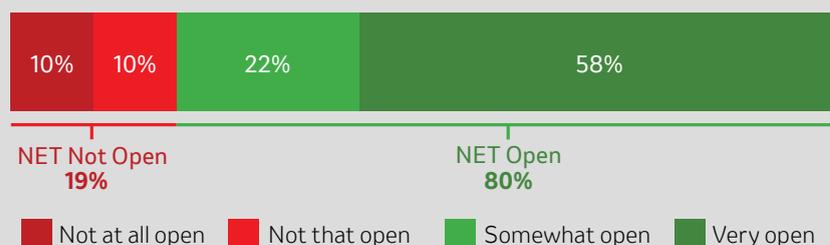
However, a minority express some concerns that the quality of care may somehow be diminished when delivered remotely; for example, a fear that a suspected or opportunistic diagnosis may be missed or that a comprehensive examination is not possible; or a worry that older generations may not be as comfortable with the technology involved. Some of our research participants also queried whether a full consultation fee should still be charged if delivered remotely!

“On a phone, they can’t check someone’s blood pressure, or a mole abnormality or whatever it might be, that could suddenly be spotted at a GP visit.” [Female, 45-54]

The pandemic has also forced healthcare professionals to review how they work and spend their time. Most believe that telemedicine will suit some but not all patients, and arguably perceive the same benefits as the public while also sharing the same concerns. Telemedicine can be mentally more tiring for both healthcare professional and patient, while face-to-face consultations, when wearing masks necessitated by the pandemic, can make it more difficult to engage and truly read facial expressions which can inhibit understanding. Therefore, in-person delivery of care will retain its critical role, for example when delivering a difficult diagnosis or information of concern.

But telemedicine appears to be here to stay and there is an appetite for it among the public. Four in five (80%) are open to seeing their doctor remotely in the future if appropriate to their medical need (with younger age cohorts being particularly open), while almost one in five (19%) are somewhat reluctant.

How open are you to seeing a doctor remotely by phone or video in the future if it is considered appropriate to your medical need?



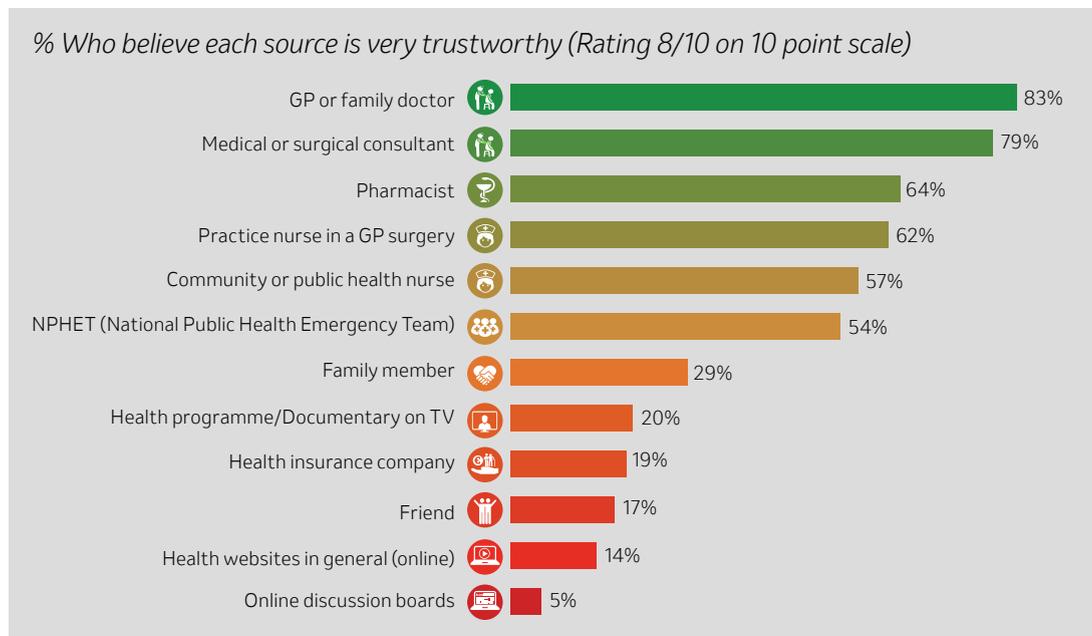
What Sources Do We Trust For Our Healthcare Information?

The public can have an insatiable appetite for healthcare information. Our internet literacy has improved and we have numerous sources we can call upon.

“I kind of go to Google, then my mam, then the doctor - that’s the priority!”

[Female, 25-34]

Our survey sought to measure the degree of trust the public has in a variety of healthcare information sources, regardless of how often or not they are being used. Each named source was rated on a scale of 1-10, with a score of one meaning very untrustworthy and a score of ten meaning very trustworthy. The results herein show the proportions that gave a “top-three box” rating of 8, 9 or 10 indicating a high level of trust.



Though online information is regularly used by many, it tends to be less trusted. Our research participants cite numerous examples of both the positive benefits and negative impact of online healthcare information. It is quick and easy to access, with most of us having a computer or smartphone at arm’s reach. The public believe that online health information can help them both prepare for medical consultations and better understand a health issue once it has been diagnosed.

Others, however, are less likely to believe in their ability to find the right information online and would rather trust their healthcare professional for their content. There is a fear of being misinformed due to the sheer volume of content online and the lack of a filter on its quality. Some research participants cite the Covid-19 vaccine as an example of conflicting views from different health information sources, particularly those online. Encouragingly, many also know to seek out accredited sites from trusted sources rather than rely solely on user-created content.

“I don’t think I would have the experience. I think I would confuse myself and work myself into a sweat. I think the GP is the guy with the knowledge and that is who I would put my faith in.” [Male, 55-64]



Access And Security Of Our Personal Medical Information Online



82% believe that their doctor (GP/Hospital) should have access to their medical information through one online system



The public recognise that technology can help us better manage our own health. Many young people (or those who are technologically savvy) use smartphone apps related to their health, wellbeing and fitness. Some of our research participants were using activity or step trackers, or in some cases specific apps, to manage diagnosed conditions such as diabetes.

It is generally considered beneficial and useful to be informed about one's health through technology, though even users observe that one must be careful not to obsessively check data all the time, believing that it should enhance rather than dictate how they manage their health.

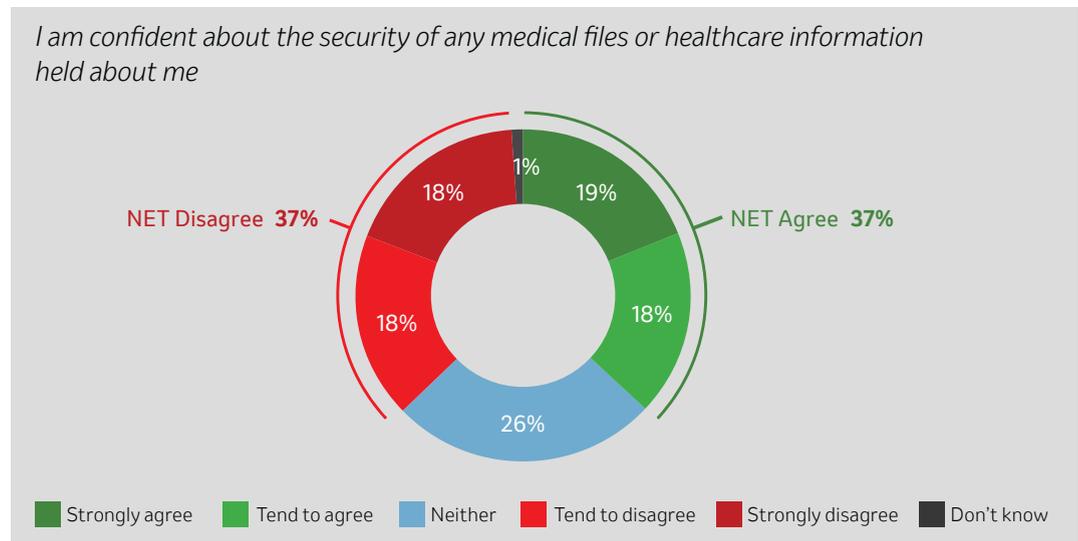
How our personal medical information is managed online is of high importance to many. The public recognise the need for healthcare professionals to be able access patient-specific medical information in order to be able to work efficiently. In fact, 82% of the public say their doctor (GP/Hospital) should have access to medical information through one online system.

But we also want to be able to access our personal medical information ourselves, if we wish to. Over four in five (81%) agree that as a member of the public, they should be able to access their own medical information electronically or online. This result has increased by seven percentage points since 2016.

How confident are we about how information about our personal health is stored and managed? Bearing in mind this survey took place not long after a highly publicised cyberattack on the Health Service Executive, it is perhaps not surprising opinions are split. While 37% of the public are confident about the security of any medical files or healthcare information that is held about them electronically, the same proportion (37%) are not confident and a further 26% are uncertain in their views either way.



81% believe that they should be able to access their own medical information electronically or online



"We should push for improved technology, whereby the patient be master of their own destiny, or be in control of the data that is there about them."
 [Stakeholder interviewee]



What Have We Learned



What Have We Learned

- ***Covid has caused a re-appraisal of our own personal health.***

However, the unexpected length of the pandemic has led to a sense of fatigue among the public, with the positive behavioural changes that were improving our health now starting to wane.

- ***Public support for healthcare workers remains strong.***

We are grateful for the extraordinary work our healthcare professionals have done during this most challenging of times and acknowledge the enormous pressure they are under.

- ***We recognise the significant challenges that lie ahead for the health service.***

Views on the health service are mixed, with equal levels of optimism and pessimism about the future. Issues of capacity, finances and organisation are recognised as key challenges to overcome. Whether the pandemic results in freedom or fallout remains to be seen.

- ***We worry that Covid-19 will exacerbate delays.***

Access to healthcare remains a key concern, as the public fear that the existing waiting lists will grow and that scans, tests and non-essential procedures will be delayed, risking the health of patients.



- ***Most of us are willing to pay a fair price to use health services in the future.***

Though not all hold or believe in health insurance, the majority are willing to pay a fair price for services.

- ***We are overwhelmingly open to availing of medical care in the community.***

We acknowledge that we can relieve the burden on our hospitals by using GPs and pharmacists where appropriate, either in person or remotely via telemedicine, though there is a worrying trend in the ability to access GP services in some parts of the country.

- ***Covid-19 has made people appreciate the value of medicines.***

We recognise the importance of research and development and feel it is important that the Government and HSE invest in making new medicines available to Irish people.

- ***A vast majority recognise the need for healthcare professionals to access our personal medical information.***

We want to have access to our medical information, but there is an even split between those who are confident about the security of any electronic medical files and those who are not.



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- Darragh O’Loughlin (Secretary General, Irish Pharmacy Union)
- Over 1,000 members of the Irish general public who participated in focus groups and telephone interviews.

About Ipsos MRBI



Ipsos is a global independent market research company ranking third worldwide among research firms. At Ipsos, we are passionately curious about people, markets, brands and society. We make our changing world easier and faster to navigate, and inspire clients to make smarter decisions. Ipsos is represented in Ireland by Ipsos MRBI, Ireland's longest established research firm.

With a heritage stretching back nearly seventy years, Ipsos MRBI is renowned for delivering high quality, insight-driven, actionable research. We employ 35 full time employees, who are supported by a staff of over 200 experienced interviewers nationwide.

Ipsos MRBI interviewers abide by strict fieldwork quality standards set by the ESOMAR International Code of Marketing and Social Research Practice and AIMRO (Association of Irish Market Research Organisations). We are dedicated to ensuring quality throughout all elements of our research, and in order to demonstrate this we became the first research agency in Ireland to be certified to ISO quality standards.

About MSD Ireland



MSD Ireland is one of the country's leading healthcare companies, having first established here over 50 years ago.

We currently employ approximately 2,700 employees across six sites in Ballydine, Co Tipperary, Brinny, Co. Cork, Carlow, Dublin and Meath and in addition, MSD Ireland operates substantial Human Health and Animal Health businesses.

In total to date, we have invested approximately \$3 billion in our Irish operations and our annual turnover ranks us as one of Ireland's top 20 companies.

At MSD, we have and always will be...Inventing for Life. These three powerful words reflect our commitment to inventing new medicines and vaccines that save lives by preventing and fighting disease. MSD has dedicated researchers trained in many different scientific disciplines who work tirelessly to find cures for significant diseases that still afflict millions around the world and we will continue on this path.

At MSD Ireland we firmly believe that the most important thing we make is a difference - to patients, to our employees, to our communities and to the Irish healthcare landscape generally. MSD Ireland is 100% committed to putting the patient at the heart of everything we do. Significantly, our Irish sites manufacture approximately half of MSD's top twenty products, saving and enhancing lives in over sixty countries around the world.



MSD

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