



Sixty Years of the NHS: Changes in Demographics, Expenditure, Workforce and Family Services

Emma Hawe, OHE

September 2008

Britain's National Health Service came into being on 5th July 1948. It was established with the aim of providing a comprehensive range of health services to all UK citizens, financed by general taxation and free at the point of use.

The UK health care market is dominated by the National Health Service and according to the World Health Organisation is amongst the largest public health services in the world.

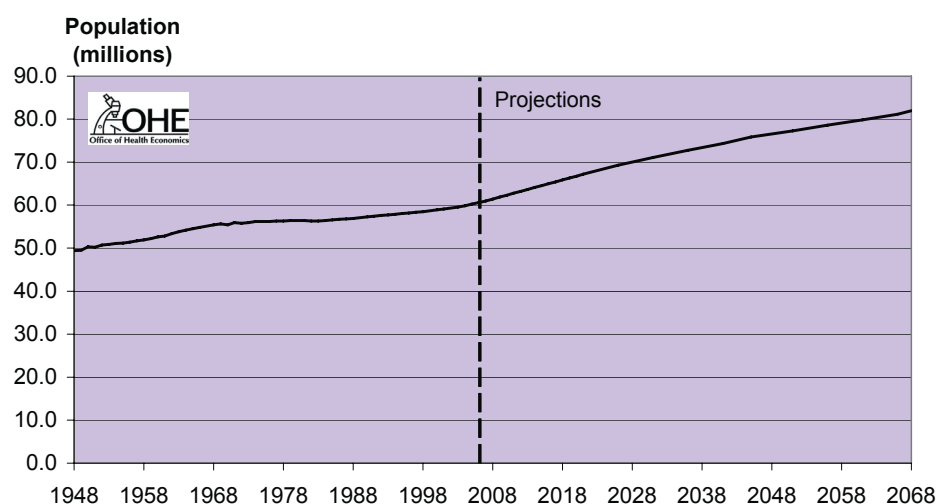
This year the NHS is 60 years old and the OHE has produced a series of short articles which show how certain areas, associated with health, have changed over those years. These are based primarily on information available in the Compendium of Health Statistics, but also draw together other relevant facts and figures.

Sixty years of the National Health Service

The UK National Health Service (NHS) is, according to the World Health Organisation (WHO), amongst the largest public health care services in the world. The NHS was established on 5th July 1948, with the aim of providing a comprehensive range of health services to all UK citizens, financed by general taxation and free at the point of use.

When the National Health Service began in 1948, the UK population was 49.4 million, 60 years later the population stands at an estimated 61.4 million, an increase of 24%. By 2068 the UK population is expected to increase by a further 34% to 82.0 million (OHE estimate based on Government Actuaries Department (GAD) projections).

Figure 1 UK population 1948 - 2068



Notes: Mid-year population estimates from 1982 have been revised based on the results of the 2001 Census. Data from 2002 has been revised due to improved methodology on international migration. Projections from 2007 are based on 2006 mid-year estimates. Projections for 2068 are OHE estimates using polynomial regression and based on population projections for available years.

Sources: Annual Abstract of Statistics (ONS). Population Projections Database (GAD). Population Estimates and Projections (ONS).

Changes in the population have not been consistent across the constituent countries of the UK. In Northern Ireland the increase was 29% and in England & Wales was 24% but in Scotland the population increased by just 2% between 1948 and 2008. The largest increase in population between 2008 and 2068 is predicted to be in England & Wales (approx 37%), Northern Ireland's is predicted to rise by approximately 15% and Scotland's population is expected to fall by around 2.5%. A breakdown of the population by country is shown in Table 1.

Table 1

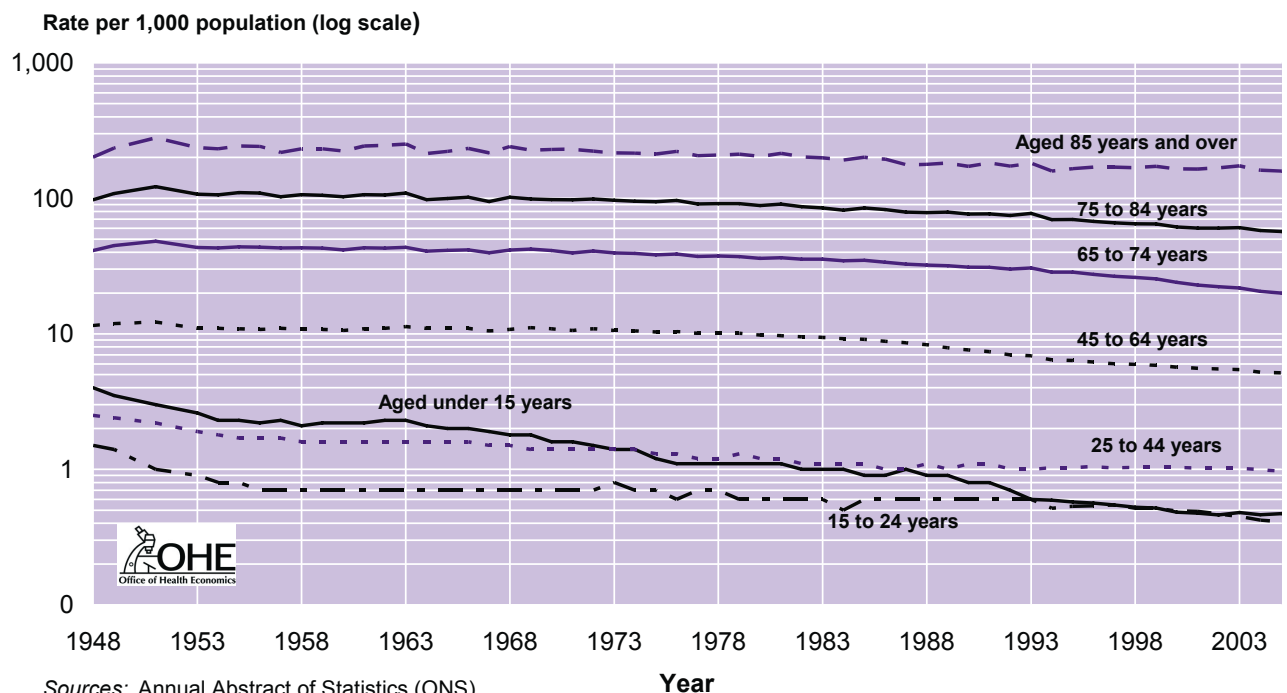
<i>millions</i>	1948	2008 (estimates)	2068 (projections)
UK	49.4	61.4	82.0
England & Wales ¹	43.8	54.5	74.8
Scotland ¹	5.1	5.2	5.1
Northern Ireland ¹	1.4	1.8	2.1

Note: ¹ Data shown in the 1948 column is as at 1951, since data was not available for 1948. Projections for 2068 are OHE estimates using polynomial regression and based on population projections for available years.

Sources: Compendium of Health Statistics (OHE). Government Actuary's Department (GAD). Population Estimates (ONS).

The annual number of live births in the UK has fluctuated over the last 60 years, reaching a high of 946,000 average in the three years 1960-1962, compared with a low of 669,000 in 2001 and 2002. However, the 2006 figure of 749,000 UK births is similar to that in 1940 of 703,000 (*Annual Abstract of Statistics, ONS*). While births are similar in numbers today to the 1940s, there have been dramatic improvements in infant mortality. In 1940 there were around 61 infant deaths per 1,000 live births but by 2006 the figure had dropped to just 5 per 1,000. Infant mortality is often used as a measure of living standards and the effectiveness of health care provision. Although the most marked improvements in mortality have been for infants and children, mortality rates have improved for all age groups in the population (see Figure 2).

Figure 2 Trends in age specific mortality rates, UK, 1948 - 2006

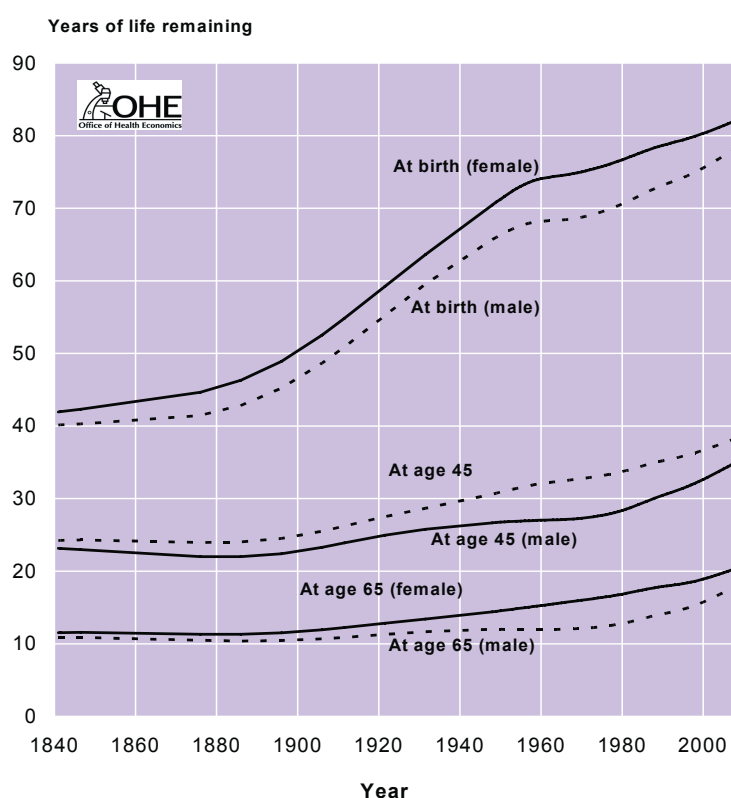


Sources: Annual Abstract of Statistics (ONS).
Population Projections Database (GAD).
Population estimates (ONS).

The main killers in 1948 were circulatory disorders, in particular rheumatic heart disease, respiratory disease and infection. In 2008 the picture is slightly different and the main killers today are heart disease, in particular coronary artery disease, and cancer. Mortality from three major causes of death in England and Wales - heart disease, stroke and infectious diseases - has fallen substantially since the birth of the NHS. However the age standardised mortality from cancer has changed very little and has become the major cause of death in both men and women (*Cancer Trends in England and Wales, 1950 - 1999, Health Statistics Quarterly 08, Winter 2000, Office for National Statistics*). Between 1975 and 2004, the overall age-standardised incidence rate for cancer increased in Great Britain by 25% (*Cancer Research UK*). Cancer is predominantly a disease of the elderly, and as the elderly population has increased the numbers diagnosed with cancer have also increased. However, changes in early diagnosis and treatment have meant that more and more people are surviving cancer. Cancer survival increased steadily for most, but not all, cancers in both sexes in recent years (*Cancer Research UK*).

In parallel with improvements around mortality, life expectancy¹ has improved considerably for both men and women since the start of the NHS. 1948 figures for the UK are not available, but for those born in England and Wales in 1948 the average life expectancy for men was 66 years and 70 years for women. The figures for those born in England and Wales in 2008² are 78.3 for men and 82.1 for women – 12 years greater life expectancy for both (*Source*: Life Tables, Centre for Demography Office for National Statistics). Similar, yet marginally lower, life expectancy figures are observed for the UK with male life expectancy at 78.0 years for men and 81.9 years for women in 2008 (See Figure 3). Projections are not available for the UK reaching forward 60 years, but by 2056 life expectancy in men is estimated to be 85.5 and for women 88.7. This is below the predictions for life expectancy in Japan – the longest lived nation – for the same period, suggesting that life expectancy in the UK may still have further room for improvement beyond this time.

Figure 3 Trends in life expectancy in England and Wales, 1841 - 2008



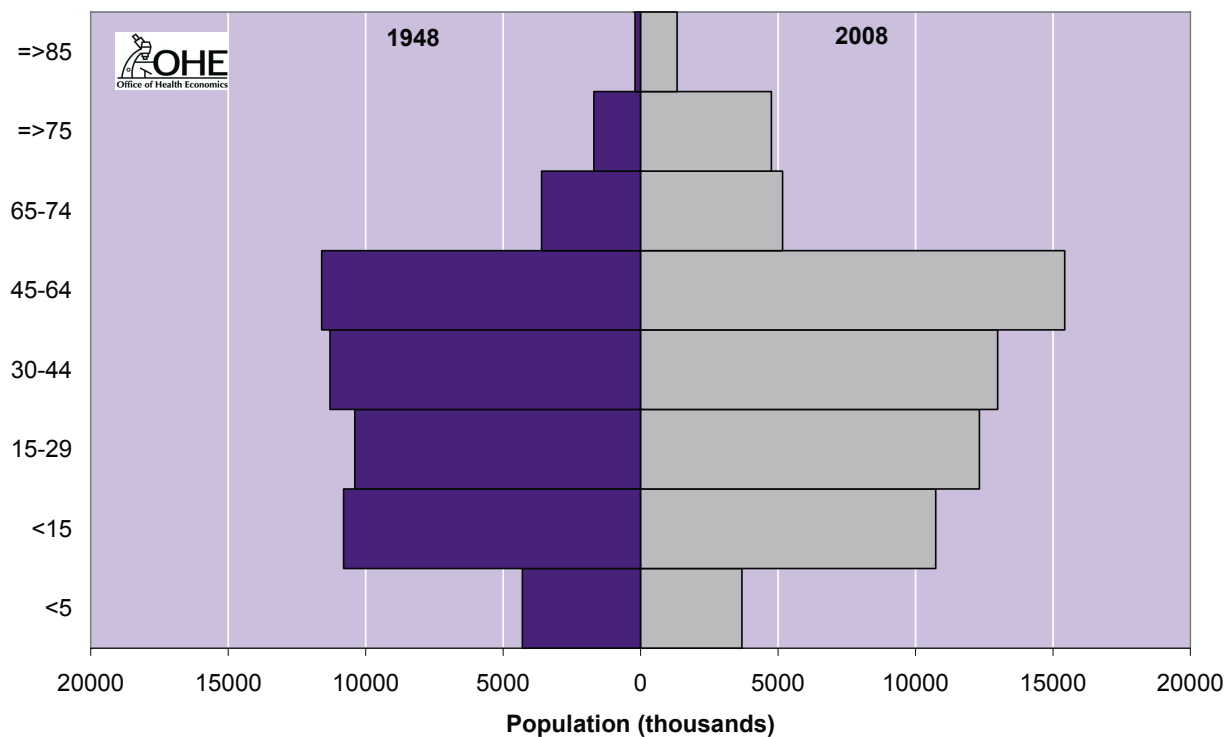
Notes: Data presented is based on the data outlined below and has been smoothed using cubic splines. Projections from 2006 onwards are based on 2006 mid-year estimates. Figures from 1841 to 1932 are based on English Life Tables. Figures from 1948 to 1973 are based on Abridged Life Tables. Figures from 1974 to 1980 are based on future lifetime. Figures from 1981 to 2005 are based on interim life tables using period life expectancy.
Sources: Population Trends (ONS). Life Tables (GAD).

¹ Period life expectancy at a given age for an area is the average number of years a person would live, if he or she experienced the particular area's age-specific mortality rates for that time period throughout his or her life. It makes no allowance for any later actual or projected changes in mortality. In practice, death rates of the area are likely to change in the future so period life expectancy does not therefore give the number of years someone could actually expect to live.

² Figures are based on population estimates and the actual number of births and deaths over a three year period, centred on the year shown (i.e. figures for 2008 cover 2007-2009). These life expectancies have been calculated using historic mortality rates (from 1981 to 2006) and projected mortality rates from 2006-based national population projections (for 2007 onwards).

With more people living longer the numbers of elderly people are increasing steadily. Figure 4 compares the age breakdown of the population of the UK in 1948 and 2008. It illustrates the marked increase in the elderly population, particularly those aged over 85.

Figure 4 UK population 1948 and 2008



The elderly are the heaviest users of the health care system, along with children. For example Table 2 shows the percentage of each age group who consult an NHS GP in an average fortnight.

Table 2 Percentage of population consulting an NHS GP in a two-week period, Great Britain 1975 – 2006

	1975	1980	1985	1990/91	1995/96	2000/01	2005	2006 ²
All	11	13	14	16	16	14	14	13
0-4	13	18	21	24	21	16	15	15
5-15 ¹	7	10	10	12	11	8	7	6
16-44 ¹	10	13	12	14	14	12	12	12
45-64	11	13	14	16	16	16	15	14
65-74	14	17	16	18	20	21	19	20
over 75	18	20	20	23	23	21	21	22

Notes: All figures relate to 14 days before survey interview

1 In 1975, figures relate to age groups 5-14 and 15-44, respectively.

2 Results for 2006 include longitudinal data with approximately 75% of the 2006 sample being re-interviews of the 2005 sample.

From 1988 to 2004 the General Household Survey was on a financial year basis with interviews taking place from April to the following March.

Alternative estimates from 1995 to 2006 based on different methodology are available from the information Centre (IC).

Source: Compendium of Health Statistics (OHE), based on data from GHS.

With the increasing number of elderly people in the UK and women out-living men, combined with a declining marriage rate, the result is an increasing number of people living on their own, with half of those aged 75 living alone in 2006 compared to 2 in 5 in 1973 (General Household Survey 2006) (see Table 3). 61% of women aged 75 and over, lived on their own in 2006 which compares with 32% of men of the same age.

Table 3 Percentage living alone in Great Britain, by age: 1973 to 2006

	Percentage who lived alone									
	1973	1983	1987	1993	1996	1998 ¹	2000	2003	2005 ²	2006 ³
75 and over	40	47	50	50	47	48	50	48	48	50
All aged 16 and over	9	11	12	14	14	17	17	16	17	16

Notes: 1 Figures from 1998 onwards are weighted.

2 2005 data includes last quarter of 2004/5 data due to survey change from financial year to calendar year.

3 Results for 2006 include longitudinal data.

Source: General Household Survey 2006.

Sixty years of the Family Health Services

The UK NHS Family Health Services (FHS) consist of General Medical Services (GMS), General Pharmaceutical Services (GPS), General Dental Services (GDS) and the General Ophthalmic Services (GOS). The FHS are provided in the community by general medical practitioners (GP's), dentists, pharmacists and opticians who, for the most part, are contracted to the NHS rather than being direct employees of it.

Family Health Services

As a percentage of NHS cost, expenditure on Family Health Services decreased from 36% to 22% between 1949/50 and 2006/07 (the most recently available data).

Nevertheless, the gross cost of Family Health Services (FHS) has risen between 1949/50 and 2006/07 in money of the day from £159m to £23,234m, six times the cost in real terms (see Table 1). After taking out the effect of general price inflation, FHS spending in 2006/07 was six times the level in 1949/50. In terms of 2006/07 prices per capita expenditure has risen from £79 in 1949/50 to £383 in 2006/07.

Table 1

Gross cost of hospital services and Family Health Services (FHS), UK, 1949/50 - 2006/07

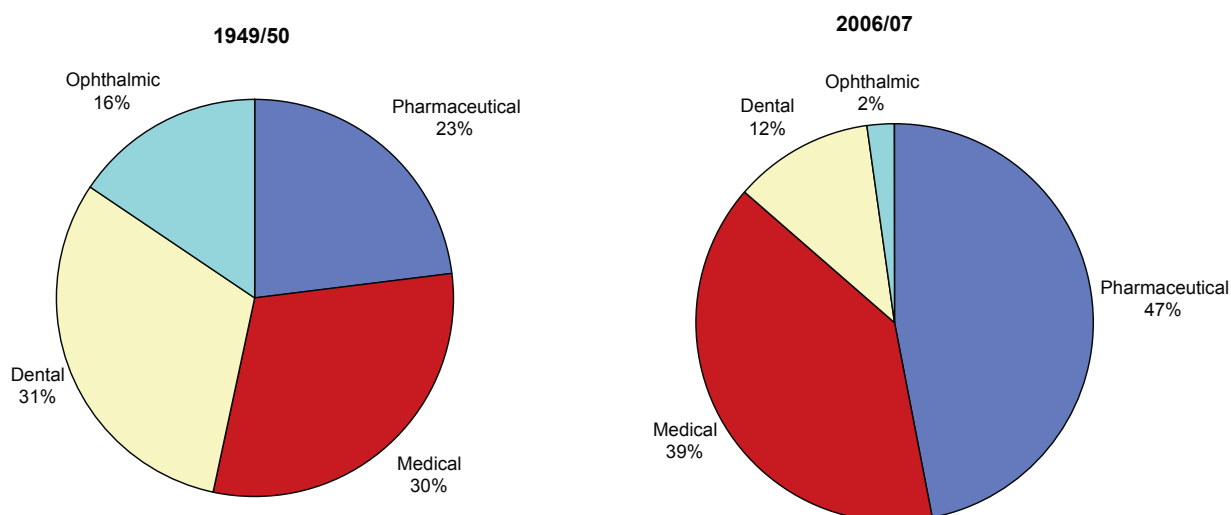
Year	Gross cost: (£ million cash)		Gross cost per capita: (£ cash)		As % of NHS cost:
	FHS	All NHS	FHS	All NHS	FHS
1949/50	159	447	3	9	36
1950/51	158	482	3	10	33
1960/61	248	883	5	17	28
1970/71	544	2,046	10	37	27
1980/81	2,584	11,677	46	207	22
1990/91	6,968	29,178	122	509	24
2000/01	14,199	58,279	241	989	24
2004/05	21,203	89,567	354	1,494	24
2005/06	22,537	98,959	374	1,640	23
2006/07	23,191	104,681	382	1,725	22
Expenditure at constant prices¹ (Index 1949/50=100)					
1949/50	100	100	100	100	100
1950/51	98	105	98	105	93
1960/61	101	127	97	122	79
1970/71	148	197	134	178	75
1980/81	187	300	167	268	62
1990/91	274	408	241	358	67
2000/01	421	614	360	524	69
2004/05	564	845	473	710	67
2005/06	587	915	489	763	64
2006/07	587	941	487	780	62

Notes: All figures relate to financial years and include capital expenditure and charges paid by patients.
1 As adjusted by the Gross Domestic Product (GDP) deflator, at market prices.

Sources: The Government's Expenditure Plans (DH).
Public Expenditure Statistical Analyses (HM Treasury).
NHS Board Operating Costs and Capital Expenditure, ISD Scotland (ISD).
Department of Health Departmental Report (DH).
NHS Summarised Accounts (House of Commons).
Scottish Health Statistics (ISD).
Health Statistics Wales (NAW).
Annual Abstract of Statistics (ONS).
Population Projections Database (GAD).
Economic Trends (ONS).

The distribution of FHS between the services has altered over the past sixty years (see Figure 1). The proportion spent on GDS and GOS has decreased considerably over the period, whereas proportionately more has been allocated to the GPS and GMS. In 1949/50 31% of the FHS expenditure was spent on General Dental Services but by 2006/07 this had fallen to below 12%. The corresponding figures for General Ophthalmic Services were 16% and 2% respectively.

Figure 1 FHS expenditure distribution by service 1949/50 and 2006/07



Notes: All General Medical figures for England, reported up to and including 2003/04 were based on a former statement of financial allowance (SFA).
 New GMS arrangements are wholly discretionary and are not "comparable against or reconcilable to" the figures shown up to 2003/04 (Departmental Report DH).
 All figures include charges paid by patients. Except Welsh pharmaceutical and dental figures which are net of patient charges.
 1 At constant prices, as adjusted by the Gross Domestic Product (GDP) deflator at market prices.

Sources: Health and Personal Social Services Statistics for England (DH).
 Health Statistics Wales (NAW).
 Scottish Health Statistics (ISD).
 Annual Statistical Report (Northern Ireland CSA).
 Annual Abstract of Statistics (ONS).
 Department of Health Departmental Report (DH).
 Economic Trends (ONS).
 NHS Board Operating Costs and Capital Expenditure, (ISD Scotland).
 Public Expenditure Statistical Analyses (HM Treasury).

General Medical Services

In terms of 2006/07 prices the cost of General Medical Services in 1949/50 stood at £1,200 million by 2006/07 this had risen to £9,103 million. The cost of the General Medical Services over the last 30 years, broken down by country, is illustrated in Table 2. The GMS expenditure per capita for the UK has risen from £6 in 1975/76 to £151 in 2006/07. When these figures are adjusted by the GDP deflator, the equivalent money in 1975/76 is £34, this represents a rise of almost 345% in the UK as a whole. This increase is seen across all countries of the UK, the biggest increase is seen in Northern Ireland (365%) followed by England (350%), Wales (326%) and then Scotland (301%).

Table 2**Cost of General Medical Services (GMS) per capita and per household, UK, 1975/76 - 2006/07**

Year	England	Wales	Scotland	Northern Ireland	UK	England	Wales	Scotland	Northern Ireland	UK
GMS expenditure per capita										
	(£ cash)					At constant prices ¹ (Index 1975/76=100)				
1975/76	6	6	6	6	6	100	100	100	100	100
1979/80	10	10	11	9	10	100	100	109	90	100
1989/90	33	34	36	31	33	163	166	178	152	164
1999/00	70	70	74	64	70	244	247	261	225	245
2000/01	76	74	80	63	76	262	256	276	219	261
2004/05	139	132	124	107	136	429	407	383	332	421
2005/06	153	142	137	123	150	464	429	417	372	456
2006/07	153	145	137	124	150	449	426	402	366	442
GMS expenditure per household										
	(£ cash)					At constant prices ¹ (Index 1975/76=100)				
1975/76	17	17	18	19	17	100	100	100	100	100
1979/80	28	28	31	27	28	97	97	105	86	97
1989/90	83	86	91	91	84	145	147	151	145	146
1999/00	170	172	174	176	171	211	208	206	199	210
2000/01	184	180	185	171	184	224	214	216	190	222
2004/05	329	310	279	281	323	360	331	291	280	350
2005/06	362	331	308	320	355	388	346	315	313	377
2006/07	360	336	305	321	352	374	342	303	305	364

Notes: All figures include salaries, fees, allowances, superannuation, directly reimbursed expenses (e.g. rent and rates) and other expenses, in financial years ending 31st March.

Figures from 2004/05 for England based on new GMS contract figures.

All General Medical figures for England, reported up to and including 2003/04 were based on a former statement of financial allowance (SFA).

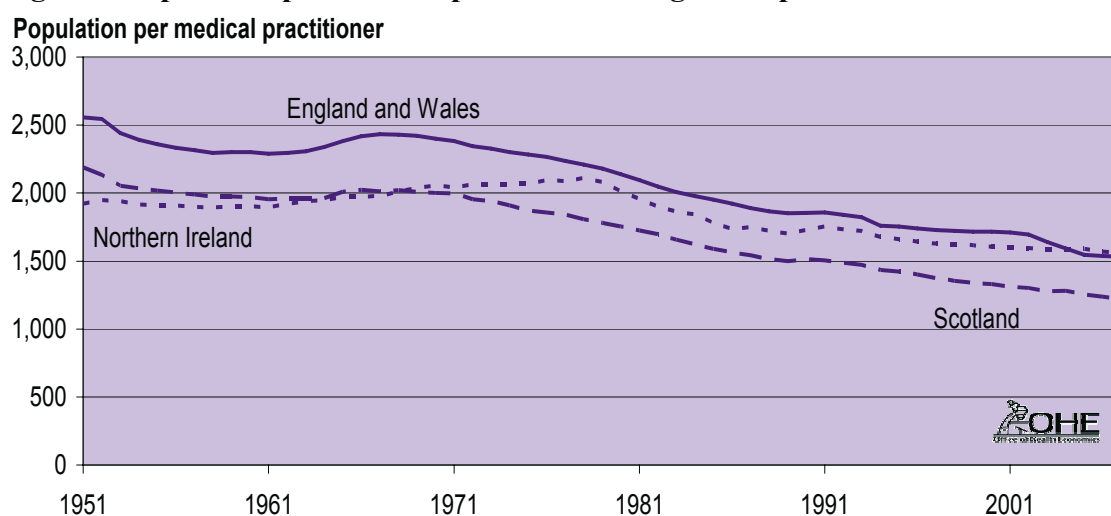
New GMS arrangements are wholly discretionary and are not "comparable against or reconcilable to" the figures shown up to 2003/04 (Departmental Report DH).

1 At constant prices, as adjusted by the Gross Domestic Product (GDP) deflator at market prices.

Sources: The Government's Expenditure Plans (DH).
Health and Personal Social Services Statistics for England (DH).
Scottish Health Statistics (ISD).
Health Statistics Wales (NAW).
Annual Abstract of Statistics (ONS).
Economic Data (HM Treasury).

The increase in the percentage of the FHS expenditure dedicated to the GMS is in part due to the increasing numbers in GPs over the last sixty years. GP numbers have nearly doubled from 22,478 in 1951 to 43,692 in 2007. Consequently the number of patients per medical practitioner has fallen: there were 1,500 patients per GP in 2007, compared to nearly 2,500 per GP in 1951 (see Figure 2, which also provides a breakdown by country)

Figure 2 Population per medical practitioners in general practice 1951 – 2007



Notes: 1 Data for England and Wales are as at 1st October before 2000. Data for Northern Ireland from 1996 to 2002 are as at 1st January, and from 2003 onwards are as at 1st October. Data for Scotland are as at 1st October before 2005.

2 Due to the introduction of the new GMS contract (1st April 2004), some of the definitions and groupings used to represent the GP 'workforce have changed.

Figures presented from 1994 have been revised in light of the new GP contract and correspond to medical practitioners, including all contracted and salaried GPs but excluding registrars and retainers. Prior to 1994 figures relate to unrestricted principals (UPE), the category of UPE is no longer identified apart from in Northern Ireland.

Sources: Health and Personal Social Services Statistics for England (DH).

Scottish Health Statistics (ISD).

Health Statistics Wales (NAW).

Annual Abstract of Statistics (ONS).

Annual Statistical Report (Northern Ireland CSA).

General Pharmaceutical Services

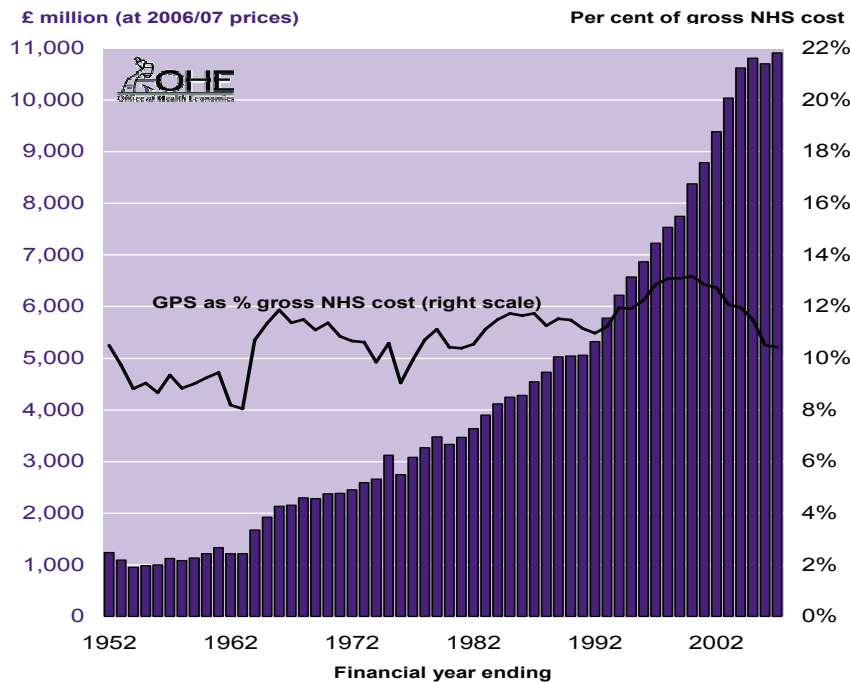
General Pharmaceutical Services expenditure includes the cost of dispensing medicines in the community (i.e. outside hospitals) and the cost of medicines dispensed.

Prescriptions are mainly written by GPs, although small proportions are written by dentists, hospital doctors and nurses. The majority of prescriptions are dispensed by chemists and appliance contractors of the General Pharmaceutical Services, although there are also a small number of GPs who also dispense (so-called dispensing doctors).

The total UK General Pharmaceutical Services cost has risen from £1,236 (2006/07 prices) in 1951/52 to more than eight times that level, namely £10,912 in 2006/07 (see Figure 3). As a percentage of NHS expenditure, the proportion spent on the GPS has fluctuated over the past 60 years, being 11% in 1952 and 10% in 2007 (following a fall in the proportion in recent years)

A contributing factor to this rise is the advances in treatment in the form of medicines that have meant more prescriptions been dispensed since the start of the NHS (see Figure 4). The chart also shows that the total cost of NHS prescriptions dispensed as a percentage of total NHS cost has fallen since 2000.

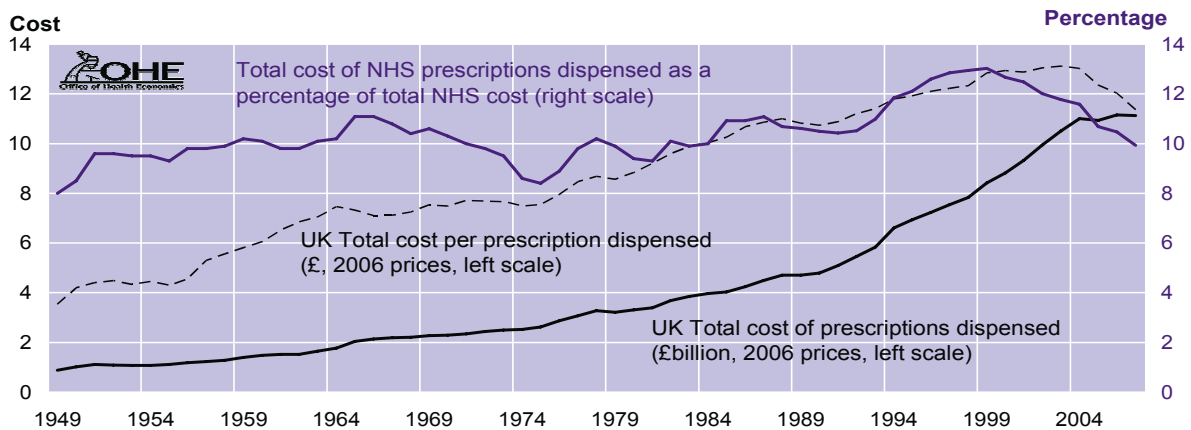
Figure 3 Gross cost of General Pharmaceutical Services (GPS), UK, 1951/52 – 2006/07



Notes: Figures relate to 31st March year ending, i.e. 2000 = 1999/2000.
 1 Figures include dispensing fees, allowances and prescription charges, at 2006/07 prices, as adjusted by the Gross Domestic Product (GDP) deflator at market prices.

Sources: The Government's Expenditure Plans (DH).
 Health and Personal Social Services Statistics for England (DH).
 Scottish Health Statistics (ISD).
 Health Statistics Wales (NAW).
 Annual Statistical Report (Northern Ireland CSA).
 Annual Abstract of Statistics (ONS).

Figure 4 Total cost of NHS prescriptions (Rx) dispensed, as a percentage of total NHS cost and total cost per prescription, UK, 1949 - 2006



Notes: The above data are taken from prescription reports from the various agencies dealing with prescription information in the constituent countries of the UK and relate to the number of prescriptions (number of fees). Total cost shown includes charges paid by patients.
 For the years 1949-1963, total cost for the English and Welsh component of the UK consists of net ingredient cost, less discount, plus on-cost, dispensing fee, container allowance and oxygen delivery allowances. From 1964 total cost includes net ingredient cost, less discount, plus dispensing fee, container and on-cost allowances, oxygen payments and from 1973 value added tax for appliances.
 1 From 1994 onwards figures relate to prescriptions dispensed by community pharmacists and appliance suppliers who are contracted to the NHS and dispensing doctors.

Sources: Prescription Pricing Authority, England. Central Services Agency, Northern Ireland.
 Health of Wales Information Services. Health Statistics Wales (NAW).
 Information Services Division of NHS in Scotland. Scottish Health Statistics (ICD).
 Health and Personal Social Services Statistics for England (DH). Annual Abstract of Statistics (ONS).
 Annual Statistical Report (Northern Ireland CSA).

The number of prescriptions that have been dispensed by community pharmacists and appliance contractors over the last 60 years has increased by over 950%. Table 4 shows that prescriptions dispensed per capita vary, and have always varied, between the four countries of the UK. There are a greater number of prescriptions dispensed per capita in Wales than elsewhere in the UK.

Table 3

Number of NHS prescriptions (R_xs) (based on fees)¹ dispensed by community pharmacists and appliance contractors, UK, 1948 - 2007

Year	(millions)					Per capita				
	England ²	Wales ²	Scotland	Northern Ireland	United Kingdom	England ²	Wales ²	Scotland	Northern Ireland	United Kingdom
1948 ³	83.7	-	6.6	2.3	92.6	-	-	-	-	-
1950	217.1	-	19.5	6.6	243.2	5.0	-	3.8	4.8	4.8
1960	218.7	-	22.0	7.2	247.9	4.7	-	4.2	5.1	4.7
1970	247.7	18.9	28.9	10.5	306.0	5.4	6.9	5.5	6.9	5.5
1980	303.3	23.7	34.3	12.7	374.0	6.5	8.4	6.6	8.3	6.6
1990	360.5	28.3	42.4	15.4	446.6	7.6	9.9	8.3	9.7	7.8
2000	551.5	43.1	63.4	23.7	681.6	11.2	14.8	12.5	14.1	11.6
2001	587.7	46.1	65.5	24.6	723.9	11.9	15.8	12.9	14.5	12.2
2002	619.1	49.0	68.8	25.4	762.2	12.5	16.8	13.6	15.0	12.8
2003	652.7	51.3	71.5	26.4	801.8	13.1	17.5	14.1	15.5	13.5
2004	689.9	54.4	74.3	27.3	845.8	13.8	18.5	14.6	16.0	14.1
2005	724.6	56.7	76.4	28.0	885.6	14.4	19.2	15.0	16.2	14.7
2006	760.1	59.5	78.7	29.2	927.4	15.0	20.1	15.4	16.8	15.3
2007	803.9	62.8	81.5	30.7	979.0	15.7	21.1	15.9	17.5	16.1

Notes: Figures relate to community pharmacists and appliance suppliers who are contracted to the NHS. Figures for 1994 onwards include prescriptions dispensed by dispensing doctors.

1 Figures in this table differ from those shown in Table 4.25 as the above data are taken from prescription reports from the various agencies dealing with prescription information in the constituent countries of the UK and relate to the number of prescriptions (number of fees), as opposed to total count of items written and dispensed as in Table 4.25.

2 Figures from 1948 to 1965 relate to England and Wales.

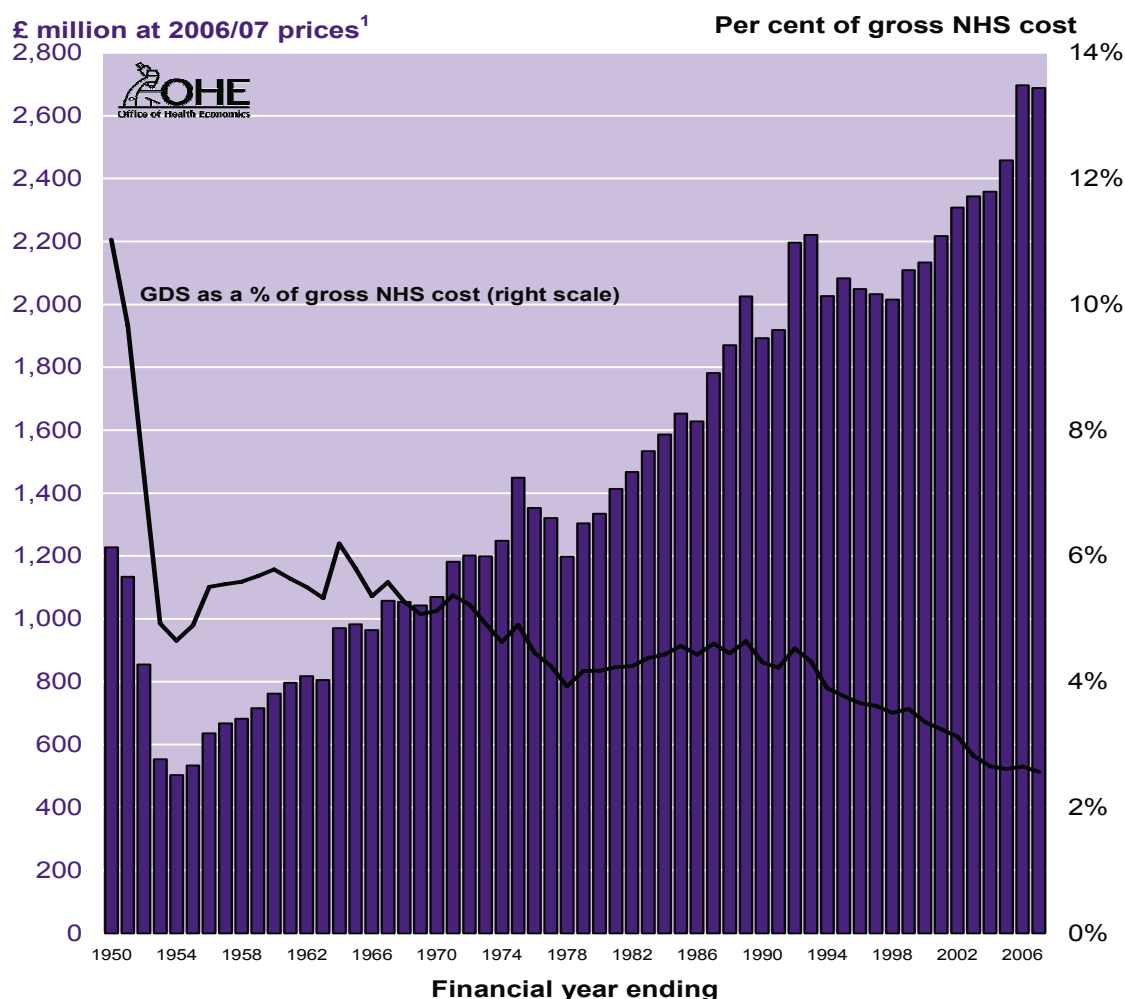
3 From July to December.

Sources: Prescription Pricing Authority, England.
Health of Wales Information Service.
Information Services Division of the NHS in Scotland.
Central Services Agency, Northern Ireland.
Health and Personal Social Services Statistics for England (DH).
Scottish Health Statistics (ISD).
Health Statistics Wales (NAW).
Annual Statistical Report (Northern Ireland CSA).
Annual Abstract of Statistics (ONS).

General Dental Services

Although the gross expenditure of General Dental Services has increased over the years, from £49 million in 1949 to £2,689 million in 2005 (an increase of 119% in real terms), the percentage of total NHS cost that this accounts for has been in steady decline since 1992 (see Figure 5).

Figure 5 Gross cost of General Dental Services (GDS) and per cent of Gross NHS cost, UK, 1949 – 2005

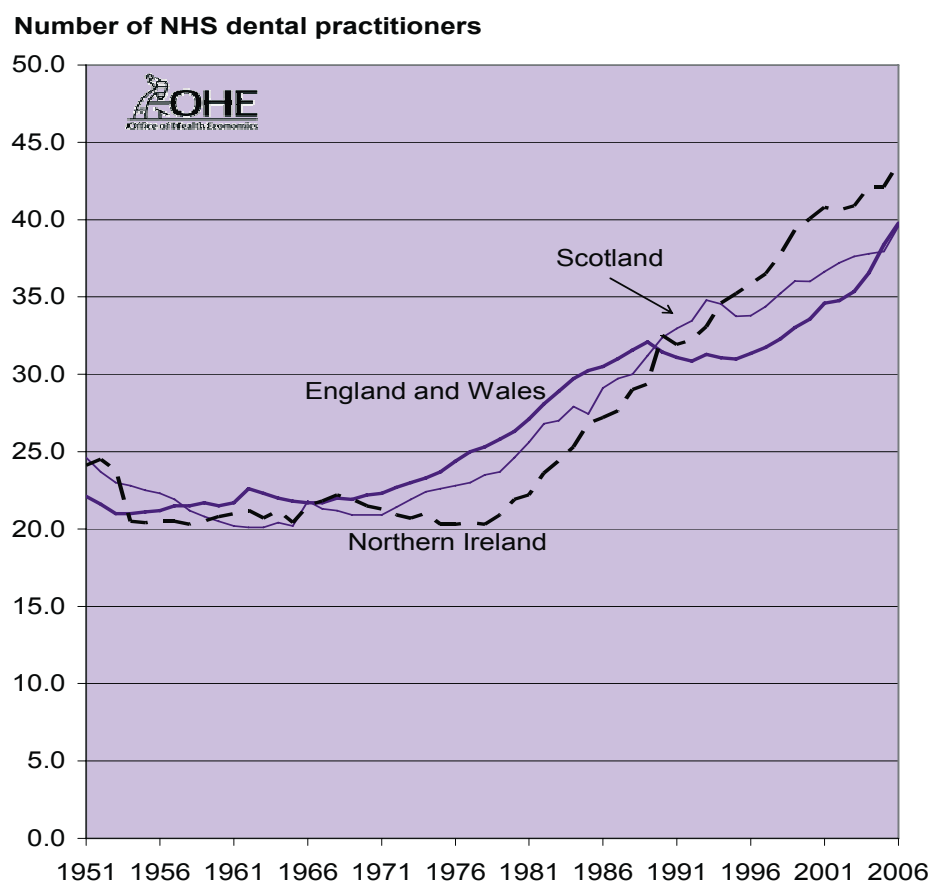


Notes: Gross cost includes patient charges.
 Figures are for financial year ending 31st March e.g. 2000 = 1999/2000.
 1 As adjusted by the Gross Domestic Product (GDP) deflator at market prices.

Sources: Health and Personal Social Services Statistics for England (DH).
 Health Statistics Wales (NAW).
 Scottish Health Statistics (ISD).
 Annual Statistical Report (Northern Ireland CSA).

At the start of the NHS dental care was to be included, although there were too few dentists at that time to provide a full service to all members of the population, consequently priority was given to expectant and nursing mothers and young children. The availability of NHS dentists has doubled since then (Figure 6) but difficulties in accessing NHS dentists appear to remain in some parts of the UK.

Figure 6 Number of NHS dental practitioners per 100,000 population, by country, 1951 - 2006



Note: Figures exclude assistants.

Sources: Annual Abstract of Statistics (ONS).
 Health and Personal Social Services Statistics for England (DH).
 Health Statistics Wales (NAW).
 Scottish Health Statistics (ISD).
 Annual Statistical Report (Northern Ireland CSA).
 NHS dental statistics (IC).
 Statswales (NAW).

General Ophthalmic Services

In terms of 2006/07 prices the expenditure on NHS General Ophthalmic Services has fallen by 20% from £612 million in 1949/50 to £488 million in 2006/07. The following table shows the breakdown of expenditure by country. In 2006/07 Scotland has the largest expenditure per capita - partly due to ophthalmic services being made free to all in Scotland from 1st April 2006.

Table 4**General Ophthalmic Services (GOS) expenditure per capita and per household, UK, 1975/76 - 2006/07**

Year	England	Wales	Scotland	Northern Ireland	UK	England	Wales	Scotland	Northern Ireland	UK
GOS expenditure per capita										
	(£ cash)					At constant prices ¹ (Index 1975/76=100)				
1975/76	1.00	1.00	1.00	1.00	1.00	100	100	100	100	100
1980/81	2.00	2.00	2.00	2.00	2.00	101	101	101	101	101
1990/91	2.32	2.65	2.70	2.60	2.38	64	73	74	72	66
2000/01	5.92	7.24	6.54	7.11	6.08	123	150	136	147	126
2001/02	6.10	7.50	6.66	7.39	6.25	124	152	135	150	127
2002/03	6.12	7.41	6.91	7.93	6.30	120	145	136	156	124
2003/04	6.45	7.50	7.10	8.20	6.61	123	143	135	156	126
2004/05	6.77	7.79	7.94	8.40	6.97	126	145	147	156	129
2005/06	7.10	8.01	8.97	9.18	7.37	129	146	163	167	134
2006/07	7.49	8.10	13.03	9.32	8.04	132	143	230	165	142
GOS expenditure per household										
	(£ cash)					At constant prices ¹ (Index 1975/76=100)				
1975/76	2.83	2.90	2.97	3.10	2.85	100	100	100	100	100
1980/81	5.46	5.57	5.63	6.10	5.50	97	97	96	99	97
1990/91	5.84	6.74	6.73	7.57	6.00	57	64	62	67	58
2000/01	14.39	17.55	15.17	19.18	14.74	105	126	106	128	107
2001/02	14.68	18.01	15.32	19.81	15.03	105	126	105	130	107
2002/03	14.64	17.65	15.77	21.08	15.05	101	120	104	134	104
2003/04	15.38	17.76	16.08	21.61	15.72	104	117	103	133	105
2004/05	16.10	18.38	17.89	21.98	16.52	106	118	112	132	108
2005/06	16.82	18.72	20.11	23.90	17.39	108	118	123	140	111
2006/07	17.66	18.82	29.06	24.10	18.90	110	115	173	138	117

Notes: Figures prior to 1986 include patient charges.

Figures for GOS expenditure per capita prior to 1988/89 are not available to a greater level of accuracy.

1 At constant prices, as adjusted by the Gross domestic Product (GDP) deflator at market prices.

Sources: Annual Abstract of Statistics (ONS).

Health and Personal Social Services Statistics for England (DH).

Health Statistics Wales (NAW).

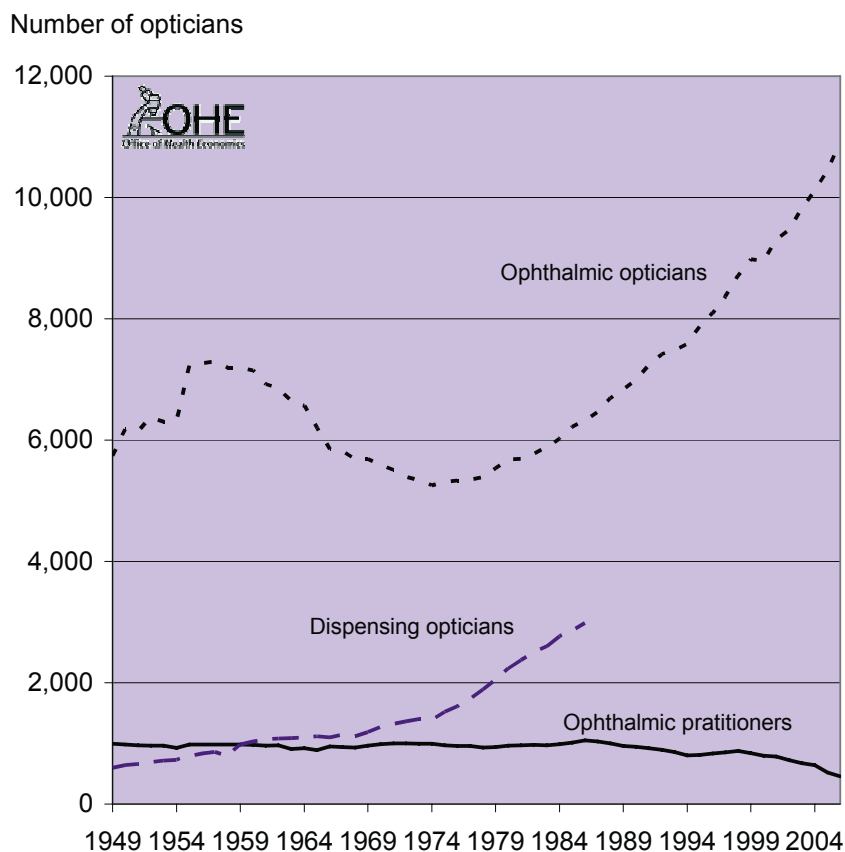
Scottish Health Statistics (ISD).

Annual Statistical Report (Northern Ireland CSA).

Economic Data (HM Treasury).

There are two types of practitioners working under contract to the NHS ophthalmic services. These are ophthalmic practitioners (doctors who test sight and prescribe spectacles) and ophthalmic opticians who are not doctors but are qualified to test sight, prescribe and supply glasses. The combined total of these is growing steadily, with ophthalmic opticians being the large majority.

Figure 7 Number of opticians by type, UK, 1949 – 2006/07



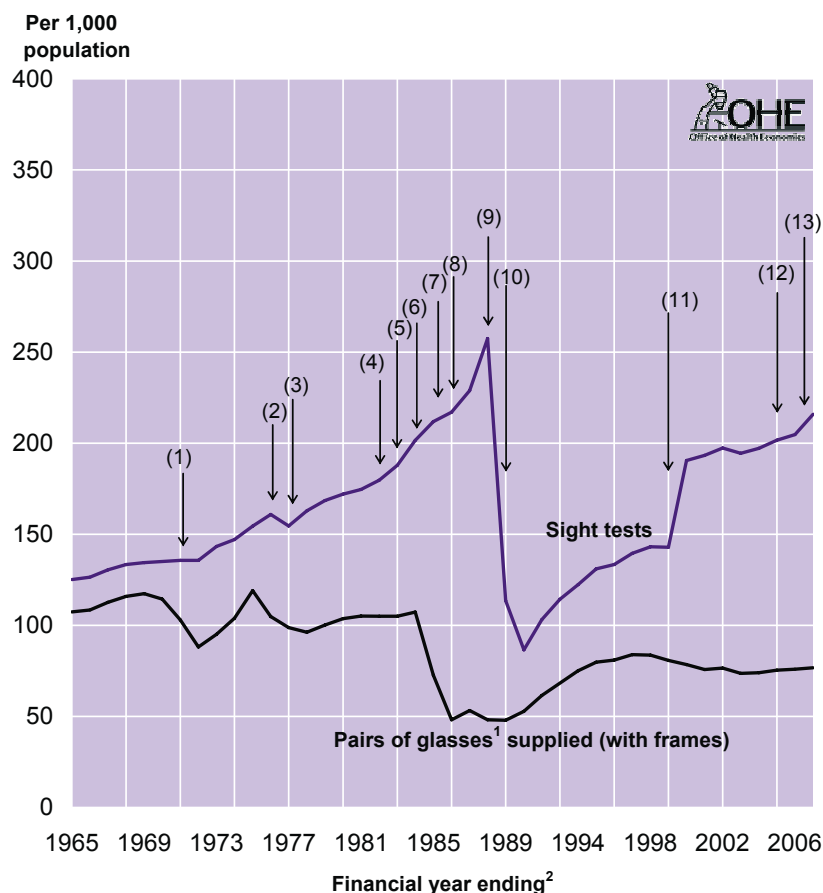
Notes: Figures for 1949 and 1954 relate to England and Wales only.
 Figures from 1955 to 1968 relate to Great Britain only.
 An ophthalmic medical practitioner is a medically qualified optician who is entitled to test sight and prescribe (but not dispense) glasses.
 An ophthalmic optician is entitled to test sight and dispense glasses.
 A dispensing optician is entitled only to dispense glasses. As a result of the introduction of voucher scheme on 1st July 1986, which led to the cessation of dispensing opticians' contracts, figures are no longer available for the UK from 1987 onwards.

Sources: Health and Personal Social Services Statistics for England (DH).
 Health Statistics Wales (NAW).
 Scottish Health Statistics (ISD).
 Annual Statistical Report (Northern Ireland CSA).
 Annual Abstract of Statistics (ONS).

Until April 1989, the NHS General Ophthalmic Services (GOS) provided free sight test to the whole population. The access to these free services was restricted to certain groups including children under 16 years, full-time students aged under 19 years and people receiving income support. Free sight tests were reinstated from 1st April 1999 to those aged 60 and over throughout the UK, and reinstated in Scotland to all ages from 1st April 2006.

The following graph illustrates the dramatic effect that the abolition of free sight test had. From 1990 the trend has been an upward one but has not reached the peak seen in the 1980s.

Figure 8 Number of NHS sight tests and pairs of glasses supplied per 1,000 population, UK, 1965 – 2006/07



Notes: 1 From April 1989, figures relate to numbers of vouchers paid for.
 2 From 1993/94 onwards figures relate to financial year, ending 31st March of year shown on the x-axis (e.g. 2000 = 1999/2000).

Sources: Annual Abstract of Statistics (ONS).
 Health and Personal Social Services Statistics for England (DH).
 Health Statistics Wales (NAW).
 Scottish Health Statistics (ISD).
 Annual Statistical Report (Northern Ireland CSA).

- (1) 1 Jan 1971, charges increased to full cost for all types, max £3.50
- (2) 1 Jan 1976, charges increases to £2.25 per single-vision & £4.55 per bi-focal
- (3) 1 Apr 1977, charges increases to £2.90 per single-vision & £5.50 per bi-focal
- (4) 1 Apr 1982, charges increased to £3.70 per single-vision & £7.90 per bi-focal
- (5) 1 Apr 1983, charges increased to £4.00 per single-vision & £9.20 per bi-focal
- (6) 1 Apr 1984, charges increased to £4.25 per single-vision & £9.20 per bi-focal
- (7) 1 Apr 1985, charges abolished
- (8) 1 Apr 1986, voucher scheme introduced
- (9) 1 Jul 1988, voucher scheme extended to cover contact lenses
- (10) 1 Apr 1989, free NHS sight tests abolished except for children under 16 etc.
- (11) 1 Apr 1999, free NHS sight tests restored for people aged 60 or over

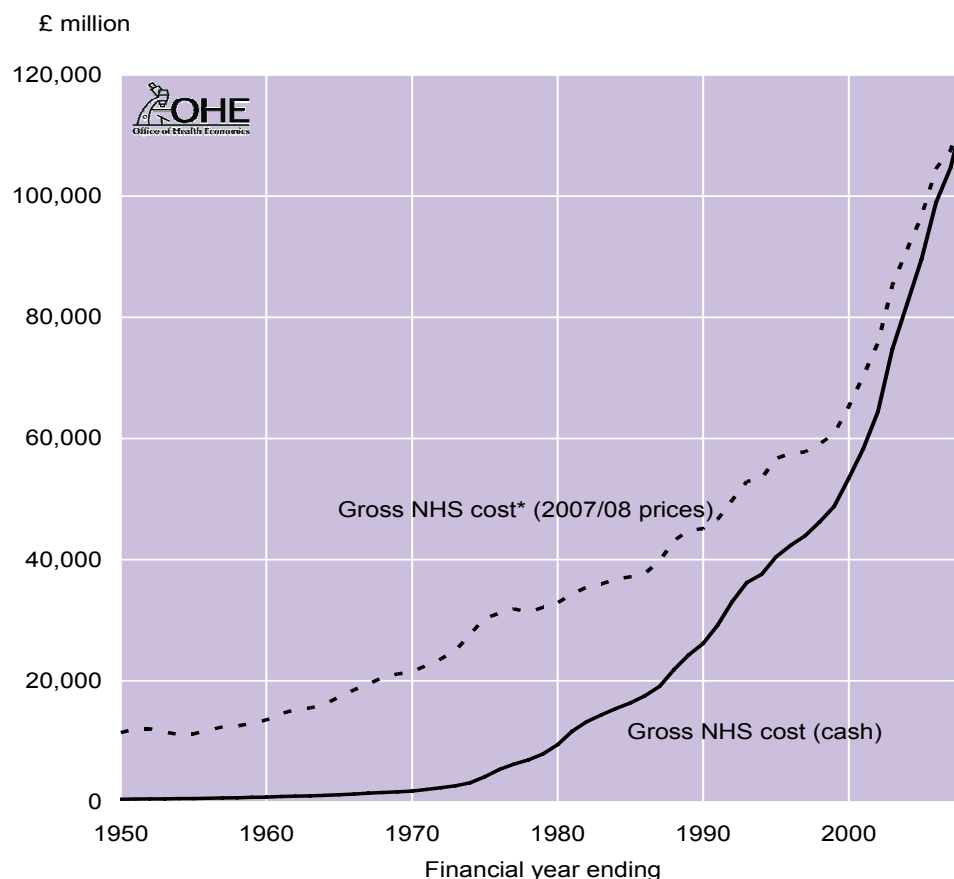
Maximum sight test fees increased between £15.52 in 2001 and £18.39 in 2005

- (12) Apr 2006, maximum sight fee test set to £18.85 in England, Wales and Northern Ireland. Free sight tests reinstated in Scotland
- (13) Apr 2007, maximum sight fee test set to £19.32 in England, Wales and Northern Ireland (see point (12))

Sixty years of NHS expenditure and workforce

Since the start of the National Health Service in 1948, its cost has risen enormously. In 1949/50 (the first full financial year of data) gross NHS expenditure was £447 million pounds in the UK as a whole, compared to an estimated £114,541 million in 2007/08. In terms of 2007/08 prices the figure in 1949/50 would have been £11,429 million, just one tenth of the current expenditure (see Figure 1).

Figure 1 Gross cost of NHS, in cash and real terms, UK, 1949/50 – 2007/08



- Notes: All figures include charges paid by patients.
Figures are for financial year ending 31st March (e.g. 1990 = 1989/90).
2007/08 figures are OHE estimates.
* As adjusted by the GDP deflator at market prices.
- Sources: Consumer Trends (ONS).
Annual Abstract of Statistics (ONS).
Economic Trends (ONS).
The Government's Expenditure Plans (DH).
Department of Health Departmental Report (DH).
Health Statistics Wales (NAW).
NHS Board Operating Costs and Capital Expenditure, ISD Scotland (ISD).
Public Expenditure Statistical Analyses (HM Treasury).
Laing's Healthcare Market Review (Laing and Buisson).
Population Projections Database (GAD).

In 1949/50 NHS expenditure took up 4% of GDP, but this proportion had doubled to 8% of GDP by 2005/06. In parallel, NHS cost per person rose from £9 in 1949/50 (equivalent to £227 in 2007/08 prices) to £1,875 in 2007/08 (see Table 1).

Table 1 NHS expenditure, UK, 1949/50 - 2007/08

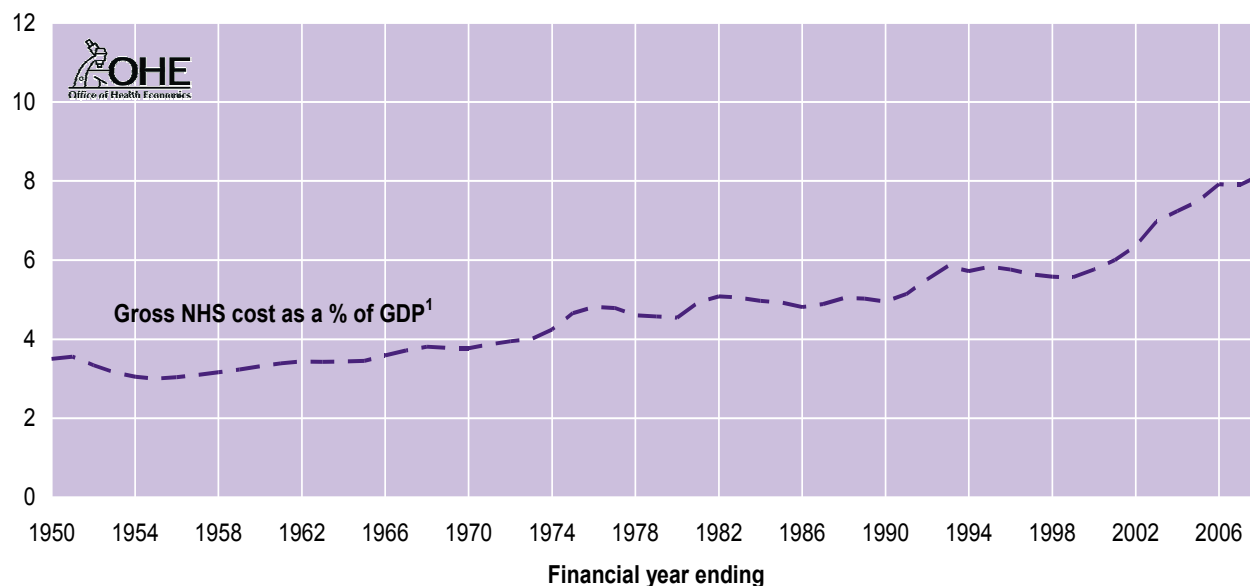
Year	Total NHS expenditure ^{1,2} (£m)	Total NHS as % of GDP	Total NHS cost per capita (2007/08 prices ³)	Total NHS cost £m (2007/08 prices ³)	Index ³ 1949=100
1949/50	447	3.50	227	11,429	100
1950/51	482	3.56	239	12,045	105
1960/61	883	3.39	277	14,523	127
1970/71	2,046	3.87	405	22,565	197
1980/81	11,677	4.93	609	34,288	300
1990/91	29,178	5.14	814	46,629	408
2000/01	58,279	6.00	1,191	70,198	614
2001/02	64,430	6.36	1,281	75,793	663
2002/03	74,741	6.98	1,436	85,254	746
2003/04	82,202	7.23	1,528	91,124	797
2004/05	89,567	7.49	1,612	96,620	845
2005/06	98,959	7.92	1,733	104,543	915
2006/07	104,672	7.90	1,771	107,495	941
2007/08e	<i>114,541</i>	<i>8.15</i>	<i>1,875</i>	<i>114,541</i>	<i>1,002</i>

Notes: 1 Excluding patient charges.
 2 Figures relate to NHS charges paid by patients for prescription medicines etc. Data on patient charges from 2004/05 onwards are not strictly comparable with earlier years.
 3 Figures have been adjusted by the GDP deflator at market prices.
 e = OHE estimates, based on published data shown in italics.
 GDP = Gross Domestic Product.

Sources: Consumer Trends (ONS). NHS Board Operating Costs and Capital Expenditure, ISD Scotland (ISD).
 Annual Abstract of Statistics (ONS). Public Expenditure Statistical Analyses (HM Treasury).
 Economic Trends (ONS). Laing's Healthcare Market Review (Laing and Buisson).
 The Government's Expenditure Plans (DH). Population Projections Database (GAD).
 Department of Health Departmental Report (DH). Health Statistics Wales (NAW).

Figure 2 Relationship between NHS cost as a percentage of GDP, UK, 1949/50 – 2007/08

As per cent of GDP

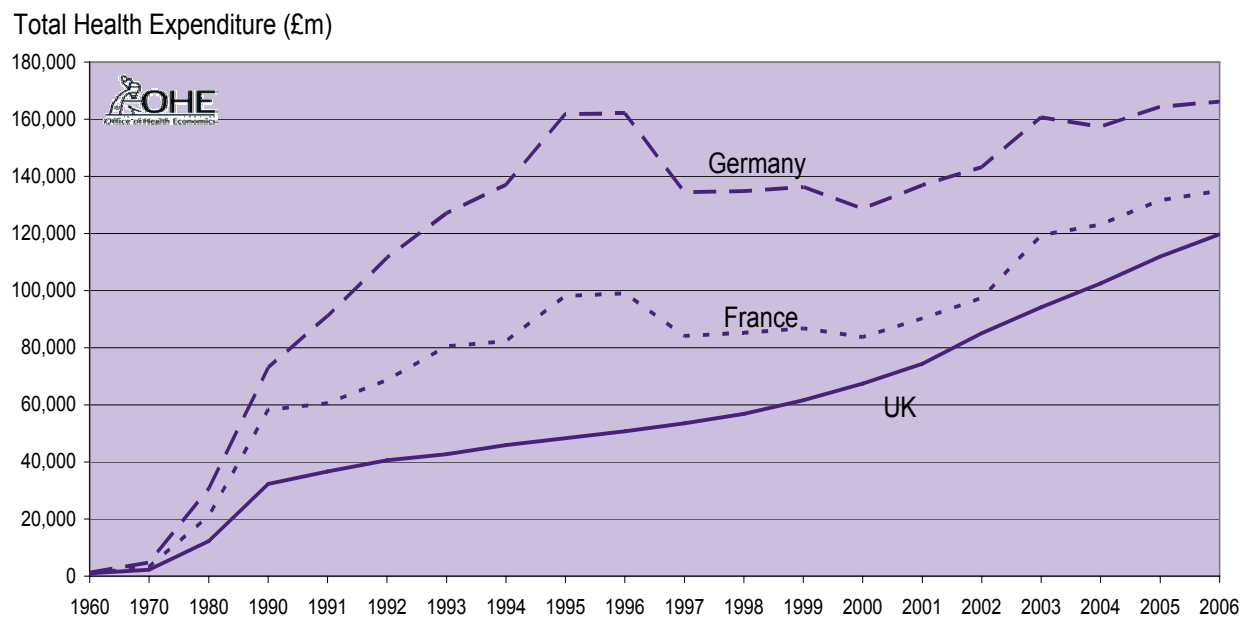


Notes: All figures include charges paid by patients.
 Figures are for financial year ending 31st March (e.g. 2006 = 2005/06).
 2007/08 figures are OHE estimates.
 1 GDP = Gross Domestic Product at market prices.

Sources: Consumer Trends (ONS). Annual Abstract of Statistics (ONS).
 Economic Trends (ONS). The Government's Expenditure Plans (DH).
 Department of Health Departmental Report (DH). Health Statistics Wales (NAW).
 NHS Board Operating Costs and Capital Expenditure, ISD Scotland (ISD). Public Expenditure Statistical Analyses (HM Treasury).
 Laing's Healthcare Market Review (Laing and Buisson). Population Projections Database (GAD).

While total health expenditure in the UK, public and private, has increased over the past 60 years, it has remained behind the level in Germany and France (see Figure 3).

Figure 3 Total (Public and Private) Health Spend in UK versus Germany and France, 1960 - 2006



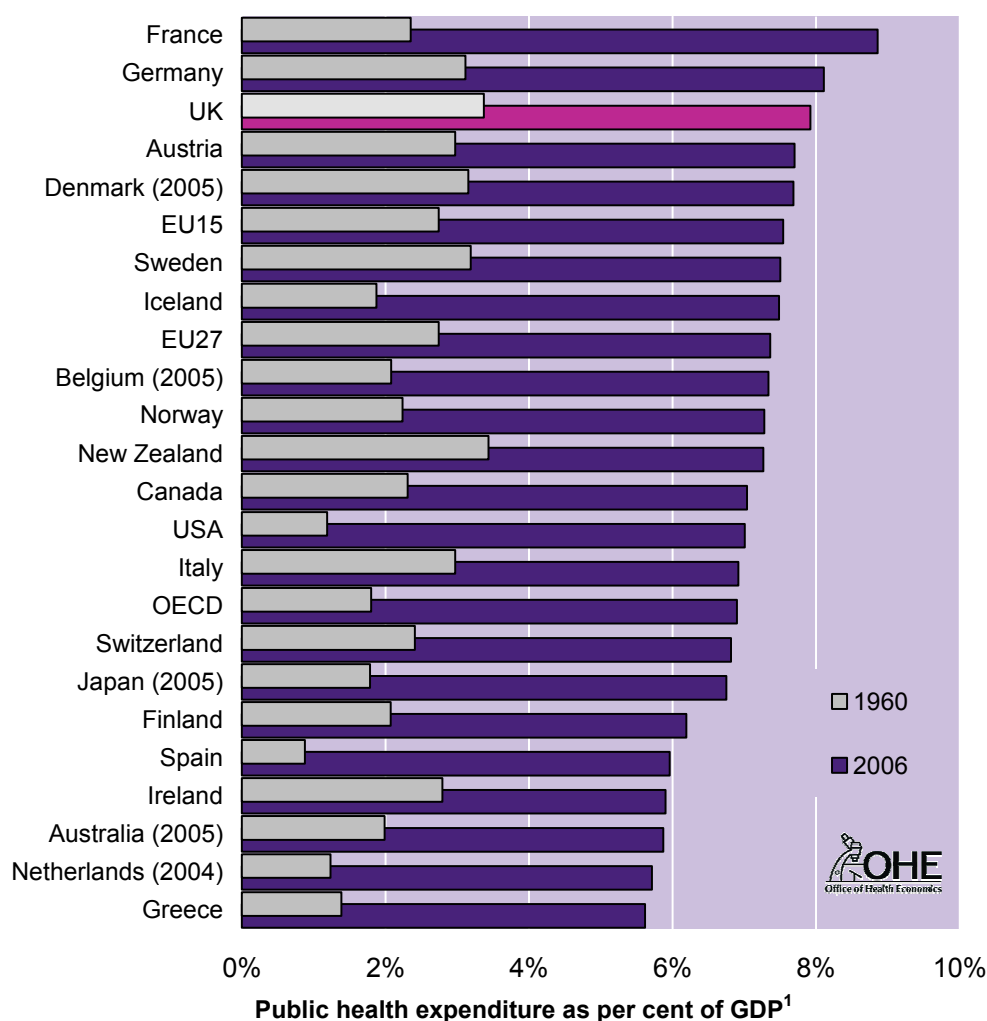
Notes: Figures are dependent on exchange rates between national currencies and £ sterling over time. Trends over time should be interpreted with caution as there are several breaks in series (see OECD Health Database for further information). Total health expenditure figures relate to public and private spending.

Sources: OECD Health Database (OECD).
 Annual Abstract of Statistics (ONS).
 Department of Health Departmental Report (DH).
 Public Expenditure Statistical Analyses (HM Treasury).
 UK dentistry market research report (MBD).
 NHS Board Operating Costs and Capital Expenditure, ISD Scotland (ISD).
 Consumer Trends (ONS).
 The Government's Expenditure Plans (DH).
 Health Statistics Wales (NAW).
 Laing's Healthcare Market Review (Laing and Buisson).

Comprehensive data across the EU and OECD countries is available since 1960 and over this period the weighted average of OECD countries expenditure on total health per capita has risen from £26 per person in 1960 to £1,928 in 2006, with the EU population weighted average over the same period haven risen from £16 per person to £1,849, compared to a rise from £19 to £1,976 in the UK.

The percentage of total health expenditure that is dedicated to public health the UK remains one of the highest at 87%, above Germany and France whose figures are 77% and 80% respectively. The average percentage of total health expenditure dedicated to public health for EU15 countries in 2006 was 77 % (weighted by total health expenditure). Figure 4 illustrates public health expenditure as a percentage of GDP and compares 1960 and 2005.

Figure 4 Public health expenditure as a percentage of GDP in selected OECD and EU countries, 1960 and 2006



Notes: 1 GDP = Gross Domestic Product at market prices.
 Figures for OECD, EU27 and EU15 are weighted averages for countries for which data is available.
 EU15 as constituted before 1 May 2004 and EU27 as constituted since 1 January 2007.
 Those countries with no health care expenditure information for 1960 have not been included,
 Where 2006 data was not available the most recent data is shown, as indicated in brackets.
 Including patient payments (e.g. prescription charges).

Sources: OECD Health Database (OECD).
 World Health Reports: Core Health Indicators (WHO).
 For sources of UK health expenditure data refer to Figure 1.
 Economic Trends (ONS).
 World Development Indicators (World Bank).

In 2006/07, the latest data available, Hospital services gross expenditure accounted for 43% of NHS cost, while the Family Health Services (FHS) accounted for 22%. This compares to 52% and 36% respectively in 1949/50, equating to a five fold rise in hospital expenditure per capita and four fold rise (in real terms) in FHS expenditure per capita over the same period (see Table 2). Further information on expenditure between the different sectors of the NHS will be presented in the final OHE article on the NHS at 60 years.

Table 2 Gross cost of hospital services and Family Health Services (FHS), UK, 1949/50 - 2006/07

Year	Gross cost: (£ million cash)			Gross cost per capita: (£ cash)			As % of NHS cost:	
	Hospital	FHS	All NHS	Hospital	FHS	All NHS	Hospital	FHS
1949/50	234	159	447	5	3	9	52	36
1959/60	483	210	811	9	4	16	60	26
1969/70	1,200	472	1,795	22	9	32	67	26
1979/80	5,840	2,060	9,456	104	37	168	62	22
1989/90	14,173	6,165	26,169	248	108	458	54	24
1999/00	26,193	13,288	53,429	446	226	910	49	25
2000/01	28,669	14,199	58,279	486	241	989	49	24
2001/02	30,935	15,268	64,430	523	258	1,089	48	24
2002/03	33,934	16,440	74,741	571	277	1,259	45	22
2003/04	36,945	17,980	82,202	620	302	1,379	45	22
2004/05	40,993	21,203	89,567	684	354	1,494	46	24
2005/06	44,863	22,537	98,959	744	374	1,640	45	23
2006/07	45,436	23,191	104,672	749	382	1,725	43	22
Expenditure at constant prices¹ (Index 1949/50=100)								
1949/50	100	100	100	100	100	100	100	100
1959/60	135	86	118	130	83	114	114	73
1969/70	247	143	193	224	130	175	128	74
1979/80	375	195	318	336	174	284	118	61
1989/90	431	276	416	380	243	367	104	66
1999/00	546	407	582	467	349	498	94	70
2000/01	588	429	625	502	366	533	94	69
2001/02	624	454	680	531	386	578	92	67
2002/03	665	474	766	564	402	649	87	62
2003/04	700	502	814	591	423	687	86	62
2004/05	754	574	861	633	482	723	88	67
2005/06	805	595	928	671	497	774	87	64
2006/07	797	598	959	661	496	795	83	62

Notes: All figures relate to financial years and include capital expenditure and charges paid by patients. From 1991/92, hospital expenditure includes capital charges.

1 As adjusted by the Gross Domestic Product (GDP) deflator, at market prices.

Sources: The Government's Expenditure Plans (DH).
Public Expenditure Statistical Analyses (HM Treasury).
NHS Board Operating Costs and Capital Expenditure, ISD Scotland (ISD).
Department of Health Departmental Report (DH).
NHS Summarised Accounts (House of Commons).
Scottish Health Statistics (ISD).
Health Statistics Wales (NAW).
Annual Abstract of Statistics (ONS).
Population Projections Database (GAD).
Economic Trends (ONS).

Estimated total expenditure on pharmaceuticals in the UK accounted for 8.3 % of the total NHS cost in 1969, increasing to 12.3% in 2002 but since then falling back to 10.5% in 2006. (Further information on community prescribing and expenditure in the UK is included in the upcoming Family Health Services article.)

Table 3 Estimated total NHS expenditure on pharmaceuticals at manufacturers' prices¹, UK, 1969 - 2006

£ million (cash)							
Year	Pharmaceutical services ¹	Dispensing doctors	Hospital ¹	Total NHS medicines	NHS medicines cost:		
					Per capita ²	% total	%
					£ (2006 prices)	NHS cost	GDP
1969	113	5	26	144	29.98	8.3	0.31
1970	124	6	29	159	30.39	8.0	0.31
1980	613	35	178	826	41.88	7.3	0.36
1990	1,918	121	495	2,533	68.68	8.9	0.45
2000	5,244	336	1,390	6,969	139.53	12.2	0.73
2001	5,728	365	1,552	7,645	148.40	12.2	0.77
2002	6,409	407	1,764	8,580	160.31	12.3	0.82
2003	7,024	445	2,041	9,510	171.49	12.1	0.86
2004	7,540	480	2,340	10,360	181.21	12.0	0.88
2005	7,376	471	2,409	10,257	174.32	10.8	0.84
2006	7,657	491	2,575	10,723	176.98	10.5	0.83

Notes: All figures exclude dressings and appliances.
GDP = Gross Domestic Product at market prices.

1 These figures have been obtained by deflating the net ingredient cost (before discount) of prescriptions dispensed during the year with a standard manufacturers' discount rate of 12.5 per cent (15 per cent prior to 1980). They are also known as 'NHS sales at manufacturer's prices'. These figures are representative of NHS expenditure on medicines, although the discount rate may differ slightly to that used by the NHS, which varies from year to year.

2 At 2006 prices, as adjusted by the GDP deflator at market prices.

Sources: Prescription Pricing Authority Annual Reports.
Annual Abstract of Statistics (ONS).
Health and Personal Services Statistics for England (DH).
Health Statistics Wales (NAW).

Scottish Health Statistics (ISD).
Economic Trends (ONS).
Hospital Prescribing (IC).

Taxation accounted for 100% of NHS finance in 1949, when there were no patient charges. Today, patient charges fund 1.3% of the total NHS budget, with 98.7% paid from tax and national insurance contributions, see Table 4.

Table 4 UK NHS sources of finance, 1949 – 2006

Year	Taxation		NHS contribution		LHA ¹		Patients' payments ²		Total NHS income	NHS income as a % of UK government receipts ³
	£m	%NHS	£m	%NHS	£m	%NHS	£m	%NHS		
1949	437	100.0	-	-	-	-	-	-	437	8.2
1950	477	100.0	-	-	-	-	-	-	477	8.7
1960	671	77.5	118	13.6	77	8.9	43	5.0	866	9.8
1970	1,635	82.6	209	10.6	135	6.8	60	3.0	1,979	8.7
1980	9,951	88.4	1,042	9.3	-	-	264	2.3	11,257	11.5
1990	22,992	80.9	4,288	15.1	-	-	1,146	4.0	28,426	12.9
2000	49,103	86.0	6,905	12.1	-	-	1,058	1.9	57,067	15.2
2001	54,116	86.0	7,610	12.1	-	-	1,166	1.9	62,892	16.1
2002	62,169	86.2	8,732	12.1	-	-	1,263	1.7	72,164	18.3
2003	62,599	77.9	16,389	20.4	-	-	1,349	1.7	80,337	19.4
2004	67,576	77.0	18,861	21.5	-	-	1,288	1.5	87,726	19.8
2005	75,819	78.5	19,515	20.2	-	-	1,276	1.3	96,611	20.3
2006	82,916	80.3	18,997	18.4	-	-	1,331	1.3	103,244	20.3

Notes: All figures relate to calendar years.

%NHS refers to the percentage of NHS funding from each source.

1 LHA = Former Local Health Authorities. From 1974 onwards, services provided by LHAs were transferred to the NHS.

2 Patient charges for 2004 onwards are not comparable to earlier years. Figures prior to 2004/05 are taken from the Annual Abstract of Statistics and relate to payments by patients for pharmaceutical services, these data were last published for 2003/04.

As such, comparable data is not available since 2003/04. Data shown relate to prescription charge revenue, including income received by pharmacists and dispensing doctors and income from the sale of pre-payment certificates.

3 UK government receipts include taxes and social security contributions.

Sources: Economic Trends (ONS).

Annual Abstract of Statistics (ONS).

Economic and Labour Market Review (ONS).

The Government's Expenditure Plans (DH).

The largest source of patient charge income currently comes from dental charges, with a marginally lower income from prescription charges and about half the amount from hospital charges, which include fees for additional services such as car parking.

Table 5 NHS patient charges, UK, 1950/51 - 2007/08

Financial year	Hospital1 £m	Prescriptions2 £m	Dental3 £m	Ophthalmic £m	Total charges	
					Cash (£m)	Index4 (1951/52=100)
1950/51	4	-	1	2	7	40
1960/61	7	21	11	7	46	174
1970/71	11	19	19	12	61	155
1980/81	57	88	106	34	285	192
1990/91	510	247	441	-	1,198	440
2000/01	138	425	506	-	1,069	296
2001/02	155	478	565	-	1,198	324
2002/03	172	528	584	-	1,284	337
2003/04	194	596	581	-	1,371	349
2004/05 ^{2,3}	216	513	561	-	1,290	320
2005/06	238	522	512	-	1,271	309
2006/07	260	526	564	-	1,350	319
2007/08	282	531	616	-	1,429	328

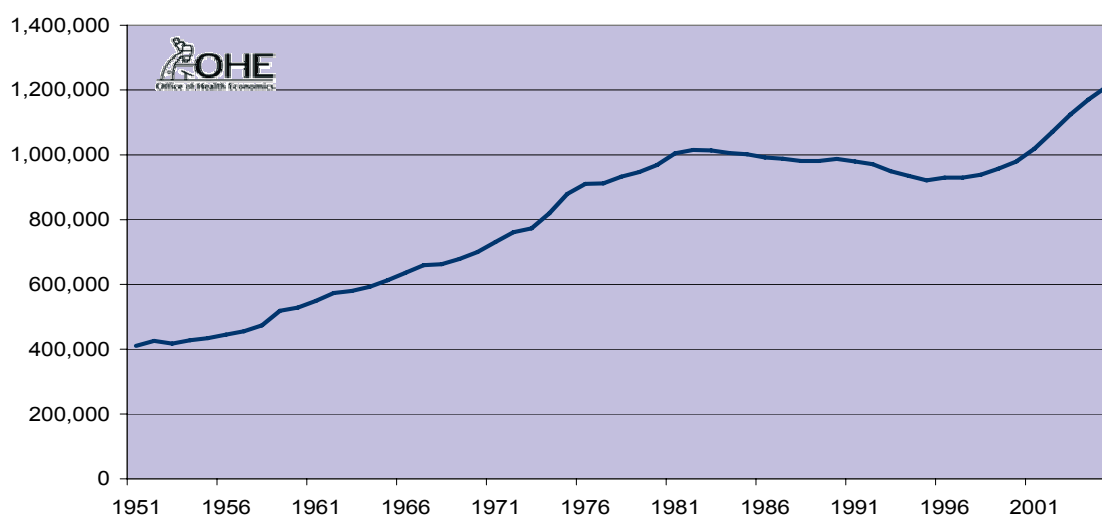
Notes: Figures relate to year ending 31st March.
Prescription charges were not introduced until 1952, then temporarily abolished in 1966 - 1968.
The Ophthalmic Services were part-privatised in 1985.
1 From 1994 pay bed and similar income collected locally by NHS trusts no longer included under hospital charges.
2 Figures prior to 2004/05 are taken from the Annual Abstract of Statistics and relate to payments by patients for pharmaceutical services. These data were last published for 2003/04. Comparable data are not available since 2003/04. Data shown relate to prescription charge revenue, including income received by pharmacists and dispensing doctors and income from the sale of pre-payment certificates.
3 Data for 2004/05 onwards are not strictly comparable with earlier data, as reliable data for Personal Dental Services (PDS) in England and Wales are not available before 2004/05 and therefore data prior to 2004/05 is based on GDS patient charges alone. In 2005/06 there was a shortfall in patient charge income, in part attributable to PDS pilots income being based on the old GDS system of patient charges in England and Wales.
4 At constant prices, as adjusted by the Gross Domestic Product (GDP) deflator at market prices.

Sources: Annual Abstract of Statistics (ONS).
Economic Data (HM Treasury).

A contributing factor to the rise in NHS expenditure over the years has been the increase in the NHS workforce, which has trebled in size over the last 60 years from 410,000 to over 1.2 million (see Figure 5).

Figure 5 Total UK NHS workforce 1951 to 2005

Total NHS Staff



Notes & Sources: See footnotes to Table 6

The number of nurses has increased by almost 170% from 1951 to 2005 (see Table 6 and Figure 6). However, as a proportion of the total NHS staff, nurses have fallen from 46% in 1951 to 41% in 2006. Medical and dental staff numbers have increased by over 690% between 1951 and 2006, and as a proportion of total NHS staff they have risen from 4% to 8% over the same period. (Further information on staffing in the Family Health Services will be presented in the final OHE article on the NHS at 60 years.)

Table 6 Number of staff employed in NHS hospitals and community services by category, UK, 1951 - 2006

30th September

Year	Medical and dental ¹	Nursing and midwifery ²	Professional and technical ³	Admin. and clerical ⁴	Domestic ancillary ¹	Total ⁵
1951	15,102	188,580	14,110	29,021	163,666	410,479
1961	21,184	249,571	27,460	40,877	210,308	549,400
1971	29,944	361,980	43,089	60,050	235,642	730,705
1981	42,562	493,700	78,269	130,221	259,765	1,004,517
1991	57,187	500,300	106,580	172,964	142,600	979,631
2001	78,934	449,950	142,931	218,422	128,732	1,018,969
2005	100,357	506,215	177,117	280,692	144,406	1,208,787
2006	105,293	500,206	180,082	274,581	139,655	1,199,818

Notes: All figures are based on aggregates of England, Wales, Scotland and Northern Ireland, and may be based on different definitions and timing of coverage. The totals include staff working in the personal social services in Northern Ireland.

1 All figures relate to full-time equivalents, medical and dental staff include Hospital and Community Health Services staff from 1990 onwards.

2 Full-time and part-time, including Community Health Services staff in England. The exclusion of nurses on Project 2000 training courses produced an apparent reduction in numbers since 1990.

3 Excluding works, maintenance, ancillary, ambulance and transport staff and part-time staff in Scotland.

4 Including general and senior managers.

5 These are totals of the columns shown. As some categories of employment are not shown, these totals are underestimates of the total NHS hospital workforce.

Sources: NHS Hospital, Public Health Medicine and Community Health Service Medical and Dental Workforce Census (IC).

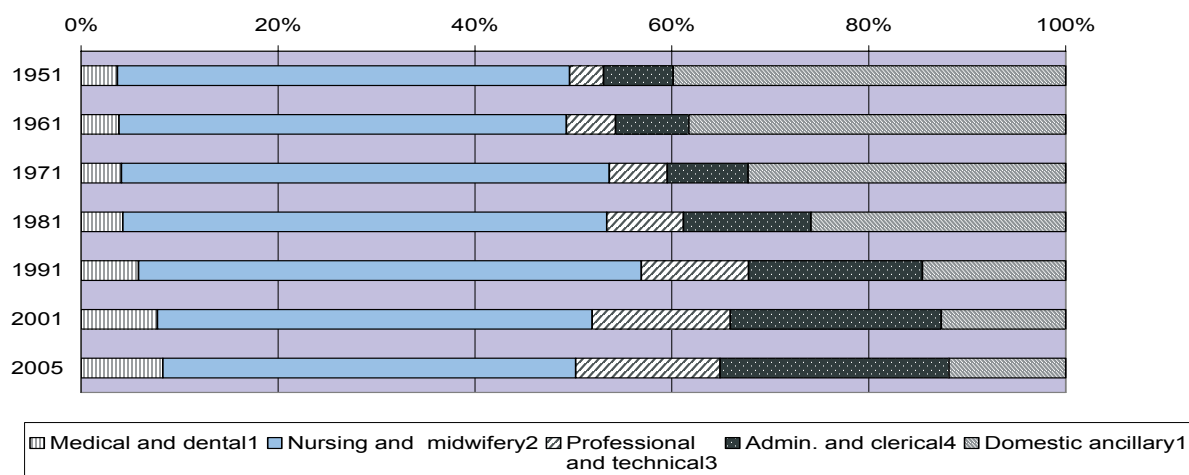
NHS Hospital and Community Health Services non-medical staff in England (IC).

Health Statistics Wales (NAW).

Scottish Health Statistics (ISD).

Annual Abstract of Statistics (ONS).

Figure 6 NHS staff by selected category, UK, 1951 – 2005



Notes & Sources: See footnotes to Table 6

Table 7 illustrates the changes in the number of employees employed in various public services in the UK, including the NHS, available back to 1961, from which time a substantial increase in the proportion of public sector staff working in the NHS is observed, from 10% then to 26% in 2008.

Table 7 UK public employees in selected sectors, 1961 - 2008

Year	Central government			Local authorities		Nationalised industries ²	Total public sector ³	NHS as a % total public sector
	HM Forces	NHS	Other	Education	HSS ¹			
	Thousands							
1961	474	575	741	785	170	2,152	5,859	10%
1970	372	741	818	1,241	265	1,879	6,515	11%
1980	323	1,174	897	1,501	346	1,816	7,387	16%
1990	303	1,221	776	1,431	417	675	6,052	20%
2000	217	1,239	698	1,214	412	245	5,283	23%
2007	197	1,512	796	1,404	383	-	5,785	26%
2008	194	1,523	779	1,406	380	-	5,758	26%
Index (1961=100)								
1961	100	100	100	100	100	100	100	100
1970	78	129	110	158	156	87	111	116
1980	68	204	121	191	204	84	126	162
1990	64	212	105	182	245	31	103	206
2000	46	215	94	155	242	11	90	239
2007	42	263	107	179	225	-	99	266
2008	41	265	105	179	224	-	98	270

Notes: All figures are based on headcount. Prior to 2008 figures relate to June, Figures for 2008 relate to March.
 Data from 1991 from Public Sector Employment (ONS).
 Figures from 1999 onwards are seasonally adjusted.
 1 HSS = Health and Social Services.
 2 Including Post Office.
 3 Central government, local authorities and nationalised industries.
 - Not available.

Source: Economic Trends (Annual Supplement) (ONS).