

'Our profession in today's NHS'

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There goes a well-known saying that, when spouted in the boardroom with Lord Sugar keenly wielding his axe, will surely save one's neck in the cutthroat business world. This saying is "Time is Money". Such a simple equation of Time as equal to Money, has far-reaching implications for commerce, capitalism and, as I hope to demonstrate in this essay, healthcare.

In the world of trade and finance, a minute wasted is a step towards the pole of destitution and failure and a regression from the ultimate goal of infinite wealth. Note how the verb "spend" applies to both dollars and hours. Note how we "invest" our time in activities in order to better equip ourselves to one day seal a Carillion pound deal and earn that bonus which has been coming our way for so long. This is the mindset of industry, and those who adhere to this way of thinking are well suited to pinstripes, powerplays and profits.

So this famous phrase should surely apply to an organization with annual budgets in excess of one billion pounds, and a workforce size exceeded only by McDonald's, Walmart and the Chinese and US Military^[1]. The NHS, therefore, should be abiding by such a principle, which has appeased the Government's Enterprise Tsar in the boardroom so many times in the past. There is an obvious discrepancy here, not least given the fact that the NHS's expenditure exceeded £100,000,000 in 2015/2016, with no obvious financial gain^[2]. So how can we resolve this profligate conflict? How can we live in a world where our Time is consumed by anything other than a healthy turnover?

It is at this point, it serves us to consider the goals of the NHS. In July 1948, then Minister for Health Nye Bevan set out 3 core principles of his new healthcare initiative. These were to provide care that met the needs of everyone, based on clinical need, and not ability to pay, with no cost at the point of care. Over time our NHS has grown, evolved and flourished, but these guiding beliefs remain true today. Except, the right honorable Mr. Bevan completely forgot to mention being "in the black", he wholly ignored the potential for profit. This is where our beautifully simple phrase "Time is Money" runs into some disconcertingly complicated problems. There is an inherent conflict between provision of care for all, and economic success. That is an objective fact. Society is financially

stratified. As such, providing healthcare for all means throwing aside the financial hierarchies around which our nation is built, and being something greater. It means an urgent MRI to rule out spinal cord pathology for Lord Farquard, as well as his court jester. In doing this, we must accept that the NHS will be financially burdensome, the numbers will constantly be “in the red”, and those responsible will squirm uncomfortably in their chair as Lord Sugar points his finger.

Except they shouldn't. No one should. We should, instead, be standing proud and announcing the amazing things this organization achieves. Alas, here lies another significant problem for our health service. Whilst a headline of a £350 million profit and growth in the financial markets are objectively positive and understandable to anyone with a frontal lobe, the NHS's achievements are not so clear-cut. How does one put an objective value on Mavis's discharge home with adequate social support and a safe living environment, meaning she can remain with her cats and watch 'The Chase' on TV Gold whenever she feels like it? How do you quantify the benefit from Martin having someone sit down and explain the likelihood of any anticipated benefits of chemotherapy versus the real and painful side effects he may expect, helping him weigh these two factors up and come to an informed decision? Everything that shines isn't always sold. This is where our role as doctors becomes more significant than note-keeping, clerking, organizing and reviewing. We become the mechanisms by which the NHS achieves success for the people it serves. By using our Time well, we can make immense differences to our 'customers'. On the surface this is simple and straightforward. Of course, when I'm the Oncology SpR, I will take time out to chat to Martin. Of course, as the Care of the Elderly junior, I will have a long chat with Mavis about her wishes for discharge destination and explain the physiotherapy she will need to engage with to get there. Easy, I'll do all of that, every day. For all 30 of my patients. After the hectic ward round, and after arranging the urgent scans, and after taking that set of bloods, and after talking to the Pharmacist about the medications, and after speaking to a patient's GP, and oh dear it's 4.25pm and I haven't eaten lunch and Mavis is still wondering whether I'll ever come back like I promised I would. In a system with pressure from financial types, there can be no slack. Each cog in the wheel must be moving

at its fastest rate to ensure the machine lumbers on. If that cog decides it needs to take some time away from the relentless pace to have a chat about an elderly lady's social care wishes, the other cogs suffer. They spin with ever-greater intensity. Some might spin out of control, and suffer that terminal event which lands any cog on the garage workroom floor, 'burnout'. With healthcare professionals stretched to their limit to simply provide a basic 'keep you alive and little else' service, the deeper, more meaningful work of the NHS is neglected, and its achievements diminish. Martin goes home wondering whether he's made the right decision about his chemotherapy. He develops severe anxiety after several sleepless nights spent reading Gwyneth Paltrow's latest idea for a spelt flour diet to cure Lymphoma. He makes several appointments with an overworked GP, whose knowledge of specialist cancer drugs cannot extend to helping Martin's decision-making, and whose 4 minutes remaining in the appointment are not enough to address his deep depression about his diagnosis. The point here is that in the NHS, Time is not Money. Time is Time. Time spent with a patient can, at its most dramatic, lead to more time alive for that human being. The time to notice a trend in NEWS scores before a hypoxic arrest, could mean time alive for a 66 year old lady with yet-to-be-discovered crushing cardiac failure. Equally, although less acutely, time spent discussing the importance of good glycaemic control and moderation at the dessert table could lead to more time enjoying life with their dogs for a type 2 diabetic who reduces their HbA1c and avoids that MCA infarct which would otherwise have rendered them unable to take Skipper out for a walk. Spending our Time wisely can improve the quality, as well as the quantity, of our patient's lives.

However, to the financiers, our time is money. For each second we sacrifice ourselves, staying late, arriving early, because there's no one else to do it, we prop up a dysfunctional system that would otherwise fail. A system that has holes, which need to be fixed with adequate funding, but instead we plug with our altruism and our kindness. So when we spend our time in this way, we save others the need to invest more money. And so the cycle can continue.

It is with this in mind that we, as a profession, as a body of trainees, consultants and GPs, and as a group of human beings, should act. We should act to fight the rising tide of 'businessification' of our NHS. It is obvious that, in our day-to-day

working lives, we must continue to do what is required to keep every single person under our care safe. Usually, this means working ourselves to the bone to achieve minimal outcomes, with many tasks falling by the wayside during the day as 'non-essential' or 'would be nice to'. Each one of these jobs that goes uncompleted, each collateral history that isn't taken, each family discussion that is missed, each question that we promise to get back to but never do because of more urgent, more life-threatening situations, each of these should fuel our fire. Thus, when we have our precious zero day we will not sit, dejected and defeated in a self-pitying hole of Netflix and despair. But rather, we will remember the riches we wish we could rain down upon our patients, if we had the time. This will prompt us to take action. To join organizations pushing for change. To lobby our local MP. To arrange and attend events aimed at publicizing the deficits in our system. With this, as a group, we can change attitudes of those that view the NHS as a financial disaster that needs to be culled. We can push for reformations to a system needing more investment in people and equipment. We can buy our patients time to reap the rewards of the world's greatest healthcare system. This is where our NHS is brilliant and unique. Almost every other organization of this scale seems to seek infinite wealth, with CEOs and Hedge Fund managers never satisfied with their margins, and always pushing for more and more financial gain from their precious time. However, as doctors, we know there is no such thing as infinite health. We do not suffer the delusions of our economically-minded equivalents. Instead, we operate (sometimes literally) within a realistic framework of maximizing the amount of good our patients receive from our work, beneficence as I learnt it at medical school. By doing this, we are able to put aside childish dreams of never-ending youth and hand-wafting cures for cancer, and instead focus on the real human in front of us. On their real fears, on their real, debilitating symptoms, and the real, objective relief from these horrible afflictions we can provide. Whether that be physical, through our medicines and our interventions, or emotional, through our support and understanding. Either way, this will take time. Our time. We can take immense satisfaction that time with our patients is never misspent.

[1] NHS Choices. *The NHS in England*. Available from:

<https://www.nhs.uk/NHSEngland/thenhs/about/Pages/overview.aspx>

[Accessed 15th August 2018]

[2] Simon Stevens – Accounting Officer. *NHS Accounts*. Department of Health.

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