



## WHAT NEEDS TO BE DONE TO OPTIMISE THE VALUE OF THE HOSPITAL SERVICE?

**A leading chief executive will outline the needs for the hospital services, we know not to be sustainable, and indeed to be transformed for the digital age.**

“Are you in the real estate business or the knowledge business?”

That is the question the Oxford Value Based Healthcare Programme poses to chief executives of hospitals, cheekily posed by people who don't have the headache of running the huge real estate inheritance from the era of plenty and the era of Private Finance. However, when you are chief executive, the leader and manager of a hospital you have to recognise also that much of your work is not under your control being determined by referral and self-referral. One proposal that has been made is that we should change the name of A&E to SFS – System Failure Service to the average take of a hospital service as people who are there because the system support them has failed. They present with “heart failure” or “bronchitis” but there is a whole chain of events in the individuals' home or care home which break down and lead to the “emergency” presenting.

Hospitals have of course been separate entities since the start of the NHS reflecting their separate status either as Local Authority hospitals, opera or voluntary hospitals before 1948. Before the purchaser/provider split in England hospitals were managerially within District Health Authorities, more so than individual general practitioners at that time but since the purchaser/provider split and the relevant Foundation Trust hospitals and the services that refer them, and in fact who commit their resources for many patients have been separated.

This has been tackled in America by the development of Accountable Care Organisations and there is much to learn from them. However Accountable Care Organisations are usually looking after a well-defined insured population and do not have to relate to a whole population in the same way the NHS has to do.

Furthermore, competition has encouraged hospitals to invest in both capital and staff when, in the era of the car, if not in the era of adequate car parking there is obviously a need to build networks.