



Lean Healthcare Forum 2006



choose and book

choice of provider

Choice Overview

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Why Choice?

Driven by...

Consumerism

Benefits of empowerment

- Improved outcomes
- More responsive services

Potential benefits of competition

Outcomes...

Patients do want and will use the option of choice

There is evidence that patient involvement improves outcomes

Trusts feel the pressure of information and competition

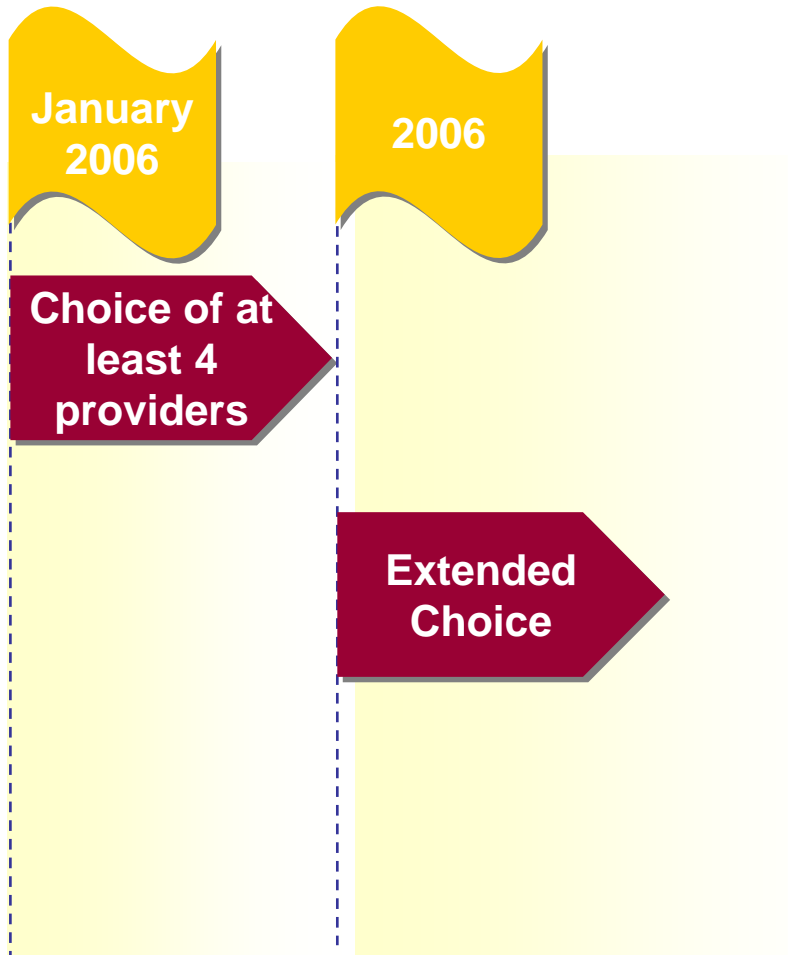
Choice Policy - Choice of at least 4 providers

January
2006

Choice of at
least 4
providers

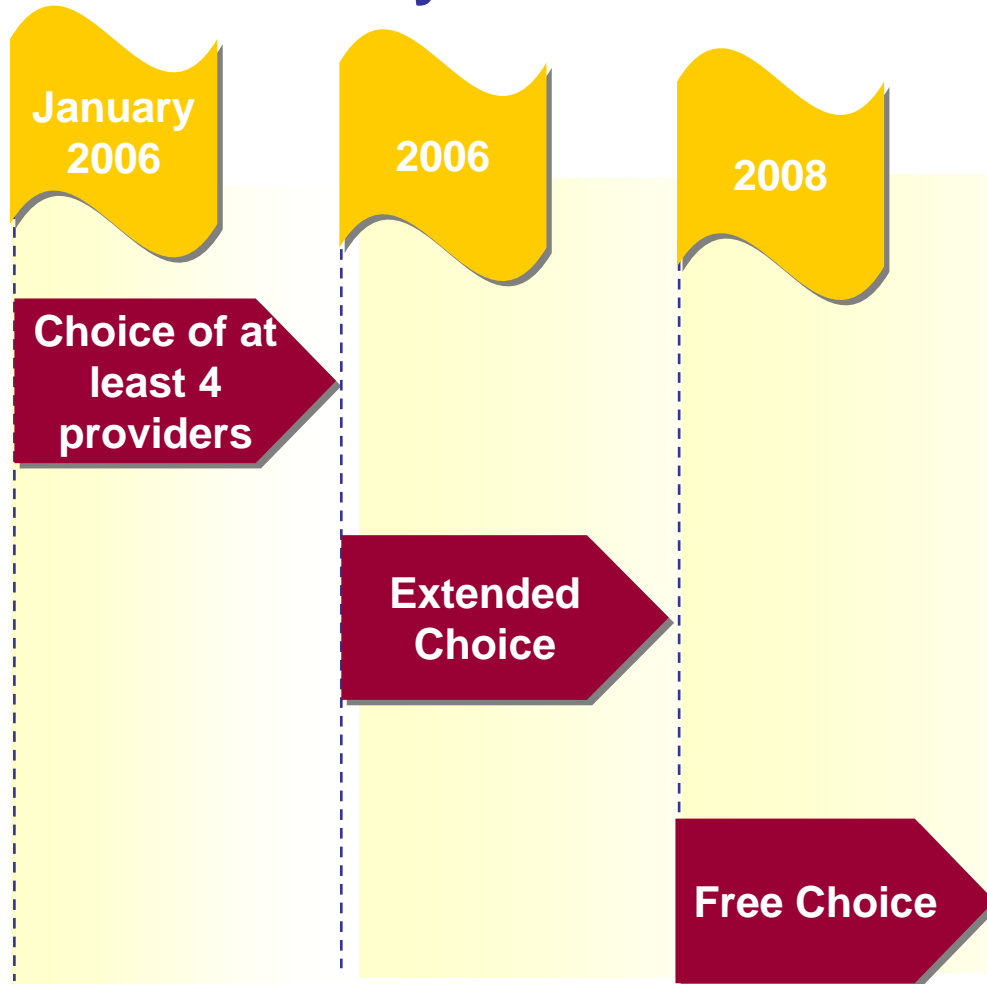
- All patients who need a referral to first outpatient appointments can expect to be offered a choice of at least four providers and a choice of time and date

Choice Policy – Extended choice



- Patients can choose from at least 4 providers
- Any NHS Foundation Trust
- Any ISTC
- Accredited IS providers

Choice Policy – Free choice



- Patients can choose from any provider of elective care who can meet quality standards 'at a price acceptable to the NHS'
- Choices supported by reliable, relevant understandable information on service quality, including outcomes

Patient information

- Provider information is available on www.nhs.uk
- Targeted information and support to patients
- 10million PCT customised patient information booklets
 - What's on offer ?
 - Where is it ? What's it like?
 - How long will I wait?
 - Will I be 'messed around'
 - Will I be safe?
 - What did other patients think?

...Refresh summer 2006



Healthcare Commission Indicators

How does your Hospital Trust score?

Check against the coloured NHS Trust chart to see how your hospital measures up.

- Excellent
- Good
- Average
- Below average
- Poor

	Star rating	Official statistics						Patients views		
		Cancelled operations	Hospital cleanliness	Clinical risk management	MRSA	Inpatient waiting times	Outpatient waiting times	Access	Comfort	Better information
Birmingham Children's Hospital NHS Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
George Eliot Hospital NHS Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
Birmingham Women's Healthcare NHS Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
Heart of England NHS Foundation Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
Oxford Radcliffe Hospitals NHS Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
South Warwickshire General Hospitals NHS Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
University Hospital Birmingham NHS Foundation Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
University Hospitals Coventry and Warwickshire NHS Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
Worcestershire Acute Hospitals NHS Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
Birmingham Children's Hospital NHS Trust	★★★☆☆	●	●	●	●	●	●	●	●	●
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Patient information will develop ...

Information on clinical quality

Reliable, relevant, understandable Patient-related Information:

For example, Orthopaedics = hip and knee procedures:

- Site specific infection rate
- Revision rates (indicating how successful the procedure was)
- A Patient Related Outcome Measure (indicating the perceived improvement for the patient as a result of the procedure)

Plus ...

Direct patient experience

- Survey data
- Patient 'diaries'/experiences 'Amazon-style' (started in S Yorks.)
www.patientopinion.org.uk

So what.....

- Patients will choose where and when they wish to be seen and treated
- Providers need to understand and provide what is of **value** to the patient if they are to attract patients to their organisations
- Waiting times will initially be a key discriminator but quality will become increasingly important as waiting times fall
- Patient experience reflects the entire patient journey not just what happened in your department. The **value stream** must be the unit of improvement
- The NHS is moving away from a focus on targets towards continuous improvement. This will support a focus on the **value stream** rather than the individual function as the unit of improvement
- Choice will impact on demand. The NHS will need to learn to forecast and respond to changes in demand if **flow** is to be maintained and resource not wasted.
- You may be a need to rethink the business model



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