

Is our NHS in need of a thorough overhaul of its systemic infrastructure?



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Prof Parag Singhal, a Consultant in the field of endocrinology and metabolic medicine and Buddhdev Pandya MBE, Managing Editor of Swasthya, see the issue of workforce training and vacancies in the NHS as a significant challenge in the post COVID era. They share the view that the time has come to initiate a Royal Commission on the future of the Health Care System to soak up all the views from the stakeholders, especially front-line staff for compiling a set of proposals with options to make the NHS fit for the future.

Recently the former Health Secretary The Rt Hon Jeremy Hunt MP rightly raised pertinent issues of workforce training and the vacancies across the NHS. This has been a major challenge for almost all the governments as the NHS is heavily reliant on the contribution of the international medical graduates' nurses and other front workers.

The vacancies leave a massive unsettling impact on the existing workforce, adding a state of uncertainty, burn out and low morale and issue of retention of staff when the profession is trying to cope with many pressures in their NHS Trust. Inevitably this compromises the standards in patient care and raises patient safety issues.

Whilst sharing your concerns, we are also of the opinion that in absence of having a coherent long-term recruitment and retention strategy there is a danger of high degree of wastage of valuable resources. While it is important to provide sporadic funds for the NHS Trusts to cope with unforeseen circumstances such as the recent COVID pandemic, it is unacceptable that significant funds are being spent on 'locums services or ad-hoc responses as a standard practice. This has a significant demoralising influence on the workforce and drains on the capacity of the NHS as a service provider.

The advances in medical science and technology have offered new opportunities offer us an opportunity to an appropriate coherent strategy, without which the investment could prove counterproductive. NHS training has always been regarded as world class aiming to create excellence in professionalism and education. Therefore, our focus should be building adequate capacity that can provide reservoirs through the spirit of self-reliance for our needs. For this goal to achieve, it would need a sustained and well-planned training programme which will take a few years.

Till such time, we need to embrace and promote frugal innovative models as workable practical solutions to streamline the programme and related process that enhances the potential available through the pool of international medical graduates in the system. The government would benefit from exercising a more flexible pathway to benefit from those who have gained experience through their passage of short-term training in the NHS settings. By expanding the policy of the development of the 'Third Sector, under the community development initiatives, and creating International programmes, utilising the available

intranational pool of expertise. This would encourage many aspects of training made available at a lower cost, without compromising, compared to what are often proven to be hugely expensive if provided through some of the traditional mainstream institutions. The current NHS system has stifled low cost or frugal innovation and time has come for the NHS to change to start thinking outside the box.

One other important factor in staff retention is continued low morale of the staff. There is very little accountability and ownership thus creating a barrier for effective and efficient working.

Therefore, we believe that the existing framework of the NHS structures under the NHS Trusts as a form of autonomous legal entities seemed to have outlived its effectiveness to a larger extent.

The cumulative impact has been of distrust and dilution of morale amongst the professionally trained clinical experts and many other layers of administrative and another workforce. Adding, an intolerable burden of weaknesses where the professional finds themselves without much-needed support or authority to exercise their judgements in both planning and delivering coherent quality of services. With the introduction of the new Health and Care 2021, perhaps the new reforms would help bring structures in the NHS, providing better integration of the NHS in England and creating a 'truly integrated' healthcare system with less bureaucracy.

The COVID pandemic has exposed the weaknesses as much as reemphasised in any explicit term the need to sustain and enhanced our publicly funded National Health Service. It is a period of seven decades with accumulated experience of the changing and transformation of the Health Care sector.

The political-ideological pressures add to the challenges of allocating appropriate level of financial support year on year faced by all the governments. We strongly propose that the time has come to initiate a Royal Commission on the future of the Health Care System to soak up all the views from the stakeholders, especially front line staff for compiling a set of proposals with options to make the NHS fit for the future.

Part of a campaign by an 'our NHS, our concern', an independent Think Tank promotes better patient and staff relationships.