Future Hospital: moving forward

The Future Hospital Commission was established by the RCP to consider the future direction for all aspects of the design and delivery of inpatient hospital care, and address the growing concerns about standards and continuity of care currently seen in hospitals. The Commission will make a series of practical recommendations designed to help hospitals provide patients with the safe, high-quality, sustainable care that they deserve. Its work focuses on five key workstreams: patients and compassion, place and process, people – the workforce, data for improvement, and planning and infrastructure.

The stakeholder event was vital to begin testing the Commission’s emerging thinking with specialty societies, other medical organisations, health professionals and patients, both as a reality check to the proposals already in development, and an opportunity for new and creative contributions to the Commission.

For example, would those present feel that the proposals were focused too heavily on the acute sector (yes, they did) and did they feel that the delicate balance between acute medicine, general medicine and specialist medicine was being addressed fully?

**We’re all connected, but not well enough**

A major theme from the discussions was the interdependence of the service provided for patients across all fronts – primary, secondary, tertiary, community and social care. There is concern that if we focus too much on acute admissions we may lose sight of the problems affecting the rest of hospital specialist care and in the wider transition of care between the sectors. Greater consideration of the role of consultants working in the community was also needed, and whether we could gain from enabling closer integration of community services and the 400,000 care homes, by providing them with direct access to secondary care specialists, bypassing acute admissions.

There was widespread frustration at the current fragmentation of patients’ health information which works against seamless care, and general agreement that integrated data gathering and a single medical record would be needed to underpin better management of care.

**Can we rearrange the workforce to cope with the challenges in acute care?**

Another major theme from the morning
was the capacity and roles of both consultants and junior doctors. Some delegates felt there was a need to consider whether to redeploy specialty training year 1 (ST1s) and ST2s to general medical teams, and/or expand the number of physicians’ assistants to help relieve the excessive workload. An alternative model to pooling of resources was suggested, involving more specialties contributing to acute take for set periods of time.

We also need to think more deeply about how we can make general medicine an attractive choice for doctors at all career stages. We need people who are expert diagnosticians.

Were we missing anything?

While the Commission is already working on the varied needs of older people, particularly those with dementia, the delegates felt that the Commission also needs to take account of patients with mental health, drug and alcohol issues. These patients place major demands on acute, specialist, community and social services, and integrated services are essential but often lacking.

However, the view from the floor was also that, although the Commission should take a broad view of the system as a whole, its focus must be the acutely ill medical patient.

Radical reform is inevitable…

There was one thing everyone agreed on – without radical reform the NHS could not go on making 5% savings a year.

Next steps

Following this event, the emerging themes across all the workstreams will be developed further. The leads of the Future Hospital workstreams are currently exploring examples of existing good and innovative practice from up and down the country to learn more about what can be achieved and share what works, and learn lessons from what does not.

The Commission will present its findings to Sir Richard Thompson, RCP president, and the RCP Council in spring 2013.

Where can I find out more?

You can read more about the Future Hospital Commission’s emerging themes at: www.rcplondon.ac.uk/resources/emerging-themes-future-hospital-commission-october-2012.

It’s certainly not too late to have your say – in fact, your views are more important now than ever. Let us know what you think.

Join the debate

To find out more, please visit: www.rcplondon.ac.uk/futurehospital. We want to hear from you, please email comments, suggestions and examples of good and innovative practice to futurehospital@rcplondon.ac.uk.

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