Towards sustained progress in global healthcare

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For everyone working in the healthcare sector, 2017 arrives with much to celebrate and a great deal to ponder.

On the one hand, we can look back on decades of sustained progress, with universal coverage of healthcare rising and people enjoying generally healthier and longer lives than ever before. Funding is increasing and the OECD’s figures on the state of play show the number of doctors and nurses has grown significantly across most OECD countries since 2000.

This has been accompanied by some great leaps forward on efficiency and productivity. In surgery, clinical advances are transforming the proportion of day
cases and reducing average length of hospital stay. Changes in prescribing habits have helped to offset the spiralling cost of modern treatments. And reducing avoidable harm in our hospitals has become a shared, global mission—and I’m proud of the singular contribution the UK is making to this debate.

But amidst the sunshine, there are storm clouds looming over international healthcare systems. Our systems are now dealing with populations that are older, sicker and with more complex healthcare needs than ever before. With demand outpacing supply, how do we develop the right systems, cultures and policies to ensure every pound goes further for patients and communities?

In the UK, our central purpose is to create the safest, highest quality care in the world. In doing so, we also aim to make it the most efficient.

High quality care and financial discipline are two sides of the same coin, and it is only by improving quality and productivity that we will deliver truly sustainable change. It is not only a financial imperative, but a moral one, that every single investment, and every clinical intervention should deliver maximum value in terms of patient outcomes. So the OECD’s excellent study on waste makes challenging reading, and it’s salutary to reflect on its hard truths: that up to a fifth of spending on health is being used ineffectively; that significant variations in standards and clinical practice expose too many patients to avoidable harm; and that healthcare systems remain too slow to learn, adapt and refine their clinical, information and management practice.

So, what is the UK’s response? The National Health Service (NHS) is already recognised as one of the most efficient healthcare systems in the world, but we believe we can go even further.

Firstly, we’re making some profound change in how the NHS collects, shares and uses data, mirroring the outstanding results that ‘intelligent transparency’ has shown in Sweden, for instance, as well as challenging the NHS to embrace a fully digitised future.

Secondly, we’re pushing ahead with efforts to tackle variations in clinical practice—from looking at referral and antibiotic prescribing in primary care, through to a Getting It Right First Time programme (www.gettingitrightfirsttime.com/report/) targeting surgical practice, which we will be expanding to other specialities this year.

Thirdly, we’re targeting cost-savings, bearing down on exorbitant management and agency fees, and exposing variation in how we procure vital goods and services, guided by Lord Patrick Carter’s world-leading efficiency study, which showed that up to £5 billion (US$6.2 billion) could be saved by adopting best practice in these areas.
Finally, and most significantly, we are devolving power to local NHS and government organisations to develop radical proposals for the future. Authorities in every part of our country are now developing long-term plans that improve integration, bolster prevention and dissolve the boundaries between hospital and community care.

This is a challenging time for the world’s health services—arguably the most challenging in their histories. It is therefore more important than ever that international policymakers pool their intellectual capital and explore the innovations, small and large, that can help us tackle the rising tide.

I applaud the OECD’s work in facilitating this process, and I hope the discussions we have at the OECD Policy Forum and Health Ministerial Meeting will be an important contribution to our shared aim: that is, to deliver renewed and sustained progress in global healthcare, on the same scale and significance as the last quarter of a century.

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See online version of this article at http://oe.cd/1K8

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