

Problem Solving and Decision Making

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Introduction: Overview of problems

Reading through industry reviews and newspaper, it seems as though the list of current issues in UK's healthcare sector is almost endless. Starting from changing population structures and lifestyle choices to the advancements in technology and the rise of new diseases as of late, it seems as though problems are constantly competing for answers. In order to maintain a concise scope of this report, the analysis will be conducted on NHS.

The National Health Service (NHS) is funded by the Government through tax revenue and it provides medical and health care services to the residents of the UK without demanding the full price of services. Its services include but not limited to visit to the doctors, treatment for illnesses and injuries, midwife services, paramedic services etc. (The Health Organisation, 2019). The main concept behind the NHS's operations is that patients can get a diagnosis/treatment without having to pay extensive fees because the Government has already taken care of it through sector-wise budgeting.

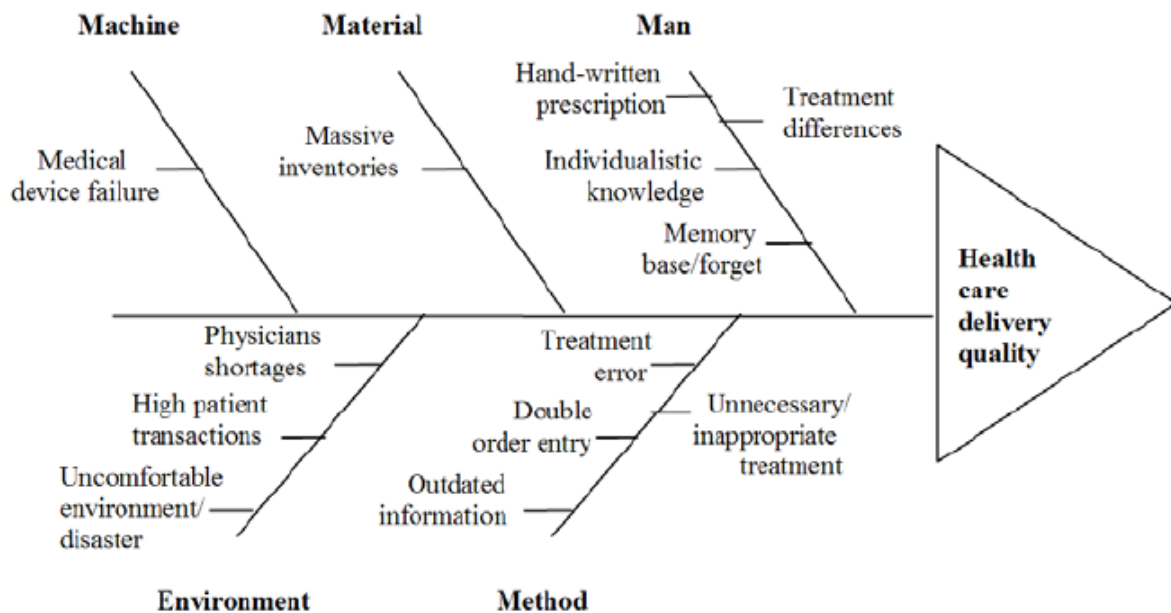
According to a BBC report from 2020, there are various problems looming over the healthcare sector. Firstly, the population structure of the UK is skewed towards the elderlies. Such a skew puts huge pressure on doctors and nurses as the senior citizens requires much more care than the younger ones. To make matters worse, the cost of caring for the elderlies are way higher. For example, cost of treating a 65 year old is 2.5 times more expensive than caring for a 30 year old on average. This figure spikes to 7 times when caring for a 90 year old. Secondly, the UK is positioned near the low end when comparing the expenditure on healthcare with other countries of Europe. France, Sweden and Germany have taken the lead while UK and Spain hold up the rear end. Moreover, the NHS has reported very high number of job vacancies for both doctors and nurses. There are almost 100000 posts to be filled up by qualified persons which will be enough to operate 10 large hospitals. On a positive note, the increasing number of training facilities in the healthcare sector could be used to recruit and retain staff.

Problem definition: Workplace's problem

Amongst all the issues that are threatening the quality of services and patient care in the UK's healthcare sector, one problem brings the most repercussions. This will be the main focus of this report.

According to The Health Foundation, a lack of long term vision from the Government's point of view has resulted in serious shortages of investments and expenditure in the healthcare sector. What was once a dream to make NHS the forefront of technology-driven patient care has dwindled down to endless job vacancies, a growing list of repair work and a lack of quality and productivity in patient care (Butcher, 2020). There were plans to improve cancer treatments and survival as well, but this all has been neglected due to decreasing investment in the healthcare sector.

Such a shortage in funding can bring up countless issues in the workplace. Some of these are explained below using the Fishbone Analysis.



Source: ResearchGate

Machines: Due to shortages of funding, it will be difficult for NHS to purchase and maintain machines. The quality and performance of machines depend on advancements in technology and related softwares. If the latest and the best cannot be adopted, quality of care may suffer. For example, the 2020 version of the ultrasound machine will definitely be more accurate and

advanced compared to the 2015 model. If hospitals cannot buy the updated machines and use them properly, the diagnosis and treatment will not be as accurate.

Materials: Without adequate funding across all departments of the healthcare sector, there is a chance that inventories of medical supplies will suffer. This can be exemplified by a current medical crisis. Lack of funding for the healthcare sectors across the globe has led to a shortage in COVID-19 vaccines. Although this isn't much of a problem in the developed countries, the third-world countries are struggling to keep up with the demand for vaccinations. If there was proper investments, the vaccinations could've been shipped at one go and people wouldn't have to wait for their shots. Same goes for generic medical inventory like syringes, bandages, sutures, surgical equipment etc.

Man: Qualifications and training of medical personnel make up a huge part of the credibility of the healthcare sector (Campling, 2014). As seen in the earlier sections, there are huge job vacancies. This can only mean that there aren't enough qualified people for the job. If the Government fails to invest in the workforce of the healthcare industry, there won't be enough doctors, nurses and other medical staff to staff the hospitals. This leads to increased waiting times at existing hospitals and clinics along with rushed treatments.

Methods: As a follow up from lack of proper training and outdated machinery, decreasing funds will lead to mistakes in treatment and dated treatment methods. For example, because a doctor/nurse doesn't have the proper training, they may make mistakes in treating patients which can sometimes bring fatal results. Furthermore, because of the absence of latest medical supplies and equipment, stitches might have to be done with normal sutures and not cosmetic stitches which are a far superior option. Such incidents can even lead to lawsuits and legal formalities.

Environment: The elements of the Fishbone discussed above can make up for the internal environment of the healthcare sector. To analyse the external environment, PESTLE analysis can be used. This tool brings in components of the business environment that is outside the business's control and shows the impact on business operations. Firstly, the political environment of UK is in an unstable state right now because some MPs have controversial opinions. This leads to uncertainties in the tax policies which can have a huge impact on government's tax revenue and investment decisions. Secondly, the economic factors are concerned with growing economy, inflation, disposable income etc. When economy experiences growth, there are more resources in

the economy which may leads to better investments in the healthcare sector. Thirdly, the social factors bring in lifestyle, consumer tastes etc. There is a growing interest towards healthy and sustainable living. As a result, people are eating better and exercising more than before. This is good news to healthcare staff as people are looking after their own bodies. Fourthly, technological advancements plays a huge role in the healthcare sector by providing the necessary machinery and equipment. It also goes to show how important R&D is in the healthcare sector. Then comes legal factors which is made up of health and safety laws and consumer rights laws. As far as the healthcare industry is concerned, the health and safety laws have significant influence. The medical staff work with different chemicals and hazardous machineries which is why it is crucial for hospital and clinics to maintain safety precautions. The staff also has to be trained to monitor patients so that they don't accidentally stumble upon dangerous materials. Lastly, the environmental factors bring in pollution, climate change etc. To keep pollution in control, healthcare staff must be alert about the disposal of their medical waste and ensure that pollution in the literal outside environment are kept to an absolute minimum.

Discussion: Impact of problem

A lack of adequate funding creates an impact on all the relevant parties working together in the healthcare sector. There are three major parties in the healthcare sector who are service users, professionals and regulators. They have to deal with the shortcomings in funding and this may result in a drop in patient satisfaction, quality of care and difficulties in regulatory activities. These are explained further below.

Service users: The biggest issue with inadequate funding is the quality of care patients receive. Admittedly, patients using public healthcare services aren't paying anything upfront. However, they expect the best possible care in return for the long years of tax payments. When patients find out that the revenue from their taxes are not being utilised well into the country's healthcare sector, it is normal for them to feel disappointed with service. Such disappointment can be because of a range of issues. Maybe the patient didn't receive proper treatment, or there was significant neglect or maybe even wrong diagnosis/treatment (Full fact, 2017). For example, speaking from personal experience, once I have received the wrong medication for my problem. I went into General Practitioner's chamber with complaints of persisting acne. Instead of getting to the root of the problem- which I found out later was hormonal imbalance- the doctor handed me a steroid-based ointment and called it a day. Of course, I didn't know that the ointment was going to bring in more issues with consistent use (excess facial hair growth, skin peeling, dryness etc.) and hoped for results. Only when I went to a different- admittedly much higher ranked in qualifications- dermatology specialist did I find out that ointment was the wrong medication and was making things worse. Now, if funding in the healthcare sector was adequate, maybe the first doctor would've ordered tests and tried harder to get to the bottom of the issue. But, because of the non-fatal nature of my situation, all the doctor saw were the long lines outside her door which needed more intensive care. Such a thought process may have led to wrong prescription of medicine.

Professionals: One of the key legislations in the UK's healthcare sector is the Health and Social Care Act 2012. It encompasses a broad range of topics such as patients' voice, comprehensive accountability from all related parties etc. The third part is what is most relevant to the professionals- doctors, nurses, other medical staff etc. - which discusses better equality, research, education and training. As for the impact of low Government expenditure on healthcare, adhering to this key legislation becomes more difficult. For instance, doctors won't have as much

opportunities for continuous professional development on their respective departments because either they are overburdened with work or these development programs aren't being hosted (Newell and Marzuki, 2018). Missing out on these advanced education creates gaps in their knowledge, which can translate to outdated performance. The same goes for training of nurses which is essential as they need to keep up with relevant knowledge and assist alongside specialist doctors. Equality is a huge part of the Act. As a result of insufficient funding, maintaining equality in healthcare environments become harder. This can be reflected in burdensome shift hours, unfair payment schemes for the junior/less experienced- tier workers, unhygienic working environments etc. These issues lead to further problems of conflict, discrimination, judgement, rank-pulling and unjust behaviour in medical workplaces.

Regulators: Lack of investments also brings confusion to the regulatory bodies. The officials will face difficulties in decision making relating to how much resources to allocate to which part of the healthcare sector. Monitoring the ongoing practices will also prove to be difficult because there simply isn't enough money to do it. One of the main problems is that regulatory bodies cannot expect all the rules and legislation to be followed when there isn't enough resources to do so. For example, there are strict rules about unbiased payment schemes in the Equalities Act 2010. When there is a shortage of funding, it is a natural though to maintain the higher-ranked doctors' payment schemes same as before. And the lower-tier staff gets the raw end of the deal by being overworked and/or victim to an unfair payment package. While this is severe breach of the Act, regulatory bodies won't have much to do in this case because they know about the lackings in resources that has led to such a situation. So unless the officials are willing to maintain fair payments for all by paying out of their own pocket, there isn't much to do.

Analysis: Decision making

The road to better investments from the Government will not always be easy because there are other sectors in need of help as well. What the healthcare sector officials can do is, consult with the authorities of medical institutions to find out about the issues they are having and the amount of funding they will need. These demands will allow the officials to carry out capital budgeting calculations and make decisions based on cost benefit analysis.

To put things into perspective, the Minister of Health has the highest power in the healthcare sector when it comes to decision making. They can host an event where the Board of Directors from hospitals and other authoritative heads from medical institutions can gather. These managers can present the current situation of their workplace as a team which will make headway into their demands. It is always much easier to convince investors when there is a concise plan of budget usage because giving funding without knowing where it will be spent is a risky move for any Government/investor (Peckham, 2014). For example, a hospital may be in need of a larger maternity wing because the COVID-19 pandemic has led to a baby boom in the last year. And because the hospital is the only one in the area, the medical staff is having trouble keeping up with demands from expecting mothers. This leads to the issue of construction for space extension, more beds, new equipment, additional staff etc.

In the process of figuring out how much money is needed for what, key legislation will have a great influence. The Equalities Act 2010 is one of the prominent legislations that has to be followed in healthcare. Firstly, there are provisions in the Act for unbiased payment schemes and to maintain that extra funding is needed. Secondly, the Act allows all employees of an organisation to work without being victim to judgement and harassment. To ensure this, medical institutions needs to have stellar HR departments where employees can go if they feel like they have been mistreated. This should be a must in any organisation. Thirdly, employees are privileged with the right to practice their own faith in their workplace. This can lead to a need for prayer rooms as well. Along with these points from the Equalities Act 2010, the Health and Social Care Act 2012 also plays a huge role in the healthcare sector of UK. Before the officials make decisions about approving budgets, they need to see if the plans align with the Act.

Recommendations: Alternative solutions

The healthcare sector in the UK is in dire need of boosted funding and Government expenditure (Sayburn, 2016). Before asking for investments, it is best for the entire sector to carry out a SWOT analysis as a whole unit. This tool acts as a self-audit by tying in internal environment audit and external environment audit. Such a practice of self-assessment will help the healthcare industry to find out what strengths need to be polished, which weaknesses need to be improved, which opportunities should be utilised and which threats have to be overcome. This can help in proper allocation of resources where it is needed most for a world-class standard healthcare system. It will also prevent wastage of resources.

In order to bring in improvements and suggest solutions for the lack of investment in the healthcare sector, the Burke-Litwin model of change will be followed for better structure and direction. This model believes that most factors influencing change are from the external environment (consisting of PESTLE factors discussed above). There are a handful of driving factors, each of which will suggest a different approach for the betterment of the healthcare sector in the UK.

External environment: The external environment is constantly changing and the healthcare sector is no different. The managers and leaders in charge will have to do active market research to find out how political, economic, social, technological, legal and environmental factors are changing so that they can adjust their own practices as well. For example, when new biomedical equipment is invented, Government should try their best to get their hands on it. This may be difficult due to budget limitations, but the example stands the same for other changes.

Mission and strategy: The healthcare system of the UK needs to review and re-evaluate their mission and strategy. The people working in this sector needs to realise what they are working towards, which is an equal quality of the best possible patient care for all patients. Rethinking the purpose of their job will create a better drive for performance and dedication. As a result, the entire workforce of the sector will have better work ethics. Such an improvement won't go unnoticed by the Government and it will attract investments.

Leadership: Having role models to look up to during challenging times is a blessing. When senior-ranking employees in the healthcare sector take an initiative to show leadership skills during crisis period, the rest of the employees are better reassured. They work better and support each

other because they know that a leader is going to help them in need. It is crucial for these leaders to practice flexible leadership styles because leadership has to evolve with changing people and changing times. Better leaders can go as far as to utilise existing resources in the most efficient and productive way possible with zero tolerance of wastage.

Organisational culture: The essence of the healthcare system is to provide the best possible treatment to patients. This belief has to be reflected in the organisation culture of hospitals and clinics. The founders of these medical institutions have to take it upon themselves to create a culture where all focus is on the patient. For example, there will be circumstances where the patients' wishes clash with that of the caregiver. But no matter what, the patient (or healthcare proxies) has to be constantly notified and prioritised when it comes to their own health (Suarta and Handriani, 2020). When dealing with patients, individual moral and opinions are irrelevant because if something occurs against the patients' wishes, there are possibilities of lawsuits.

Structure: As much as organisational hierarchies are being discouraged in the modern world, having an organisational structure can help in establishing accountability. This will make it clear as to who is responsible for what and accountable to who. For example, the Head of Surgeon can be the leader who keeps track of what is going on in her department at all times. If fellow attendees or residents have questions, she can address them in an open communication network.

Work unit climate: Working environment is a huge factor in the quality of performance. Along with maintaining a hygienic working environment, it has to be ensured that workplace morals stay at an all-time high. When employees are willing to work together and support each other through issues, it creates a unity in the workplace. This is crucial because healthcare is a team effort, there is always more than one person involved in a patients' care. If conflicts do occur, they have to be solved in a way that ensures growth of both opposing parties so that they can learn from it.

Task requirements and individual abilities: Job demands in a medical workplace is burdensome to say the least because lives are literally at stake. Employees may have to go through endless hours on a shift, assist in many areas, perform surgeries, update paperwork etc. These are all both physically, intellectually and emotionally taxing processes. That is why training employees to meet these requirements is such a crucial part of their education. Judging from medical dramas- as inaccurate as they may be- a typical work day for healthcare workers may include countless patients, unique cases, long surgeries, emergency situations and even death. Doctors, nurses and

other medical staff have to be trained- physically, intellectually and emotionally- to deal with all these situations.

Individual needs and values: Even though healthcare employees in a medical institute should work as a team, there is no denying that each worker has individual needs and values. Obviously, they all want to treat patients and save lives. However, they may have different career goals they are working on. The organisational culture and working practices has to allow this through continuous professional development so that they can all keep up with the latest findings in their field (The Pharmaceutical Journal, 2016). This will lead to better working practices and achievement of higher ranks and skills.

Employee motivation: It is no surprise that different people are motivated by different things. Something that delights an intern won't have much of an effect on a seasoned surgeon. These variances make it crucial for HRM managers in the healthcare industry to understand their employees and what makes them tick. If motivating incentives can be given according to individual needs, there is no reason why productivity and quality of work won't improve.

Conclusions: Key findings

Because a perfect world doesn't exist, there is no denying the fact that resources will almost always be scarce in an economy. As for the case of UK's healthcare sector, severe lackings in Government expenditure and investment can be deduced from the findings and discussions above. These shortcomings in medical budget has led to a severe decline in the quality of patient care to say the least. Not only does this stain the image of the UK as an economy, it also has literally fatal consequences. At best bet, these lack of resources can be penned down as the result of the COVID-19 pandemic where the global economy took a hit and economic performance indicators hit rock bottom. However, there is no point on dwelling on what happened rather the Government should concentrate on how to boost spending in the economy. Creating new jobs and encouraging spending will give citizens the incentive to invest into the economy. Only then, and after ensuring that proper allocation of tax revenue has incurred, can the UK economy promise better funding to boost its healthcare sector (Tweedie, 2018).

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