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Signed*M. Kwaees*..... (candidate)

Date 24.09.2023.....

STATEMENT 1

This work is the outcome of my own personal research, unless specified otherwise.

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Acknowledgements:

I would like to take this opportunity to express my appreciation to my older brother, Tariq Kwaees for the unwavering support and invaluable guidance he has provided through this MBA journey. His presence has been an indispensable compass, steering me through moments of uncertainty and obstacles that would have otherwise impeded my progress. Equally deserving of my gratitude is my supervisor, who has offered consistent and professional advice, during this process.

I am also deeply thankful to the NHS employees who participated in the survey and consultant interviewees who took the time to participate in this study. Their generous contributions of time and insight have played an integral role in supporting this research project, adding the necessary level of detail and authenticity required for this type of investigation.

Examination of strategic management on service privatisation in the National Health System (NHS) and its influence on patient care

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Abstract:

The National Health Service (NHS) is facing significant pressure, as evidenced by the rising waiting times for patients nowadays and recurrent workforce shortages. Consultant doctors are increasingly inclined to split their time between the NHS and private practise, while junior doctors are leaving the medical profession entirely due to the difficult working conditions. Consequently, patient, and public satisfaction with the NHS services has plummeted, sparking debate over the future of the healthcare system.

Against this backdrop, and the progressive abandonment of government responsibility for the NHS in recent years, the reliance on private sector organisations to support in the delivery of services and assist financially has increased, forcing the NHS to outsource services to the private sector at an accelerated rate, adding fuel to the speculation about the organisations trajectory towards further if not full privatisation.

This dissertation aims to examine, understand and asses the factors influencing the adoption and implementation of strategic management practices within the NHS, how these are contributing to the organisation's potential movement towards privatisation and whether such a shift has any impact on medical service delivery, but most importantly, overall patient care.

The outcomes of the data collected reflect a range of perspectives in strategic management within the NHS, these include concerns on the shortage of competent healthcare professionals, growing patient waiting times, and limited financial resources. While strategic management was acknowledged as a contributing factor to privatisation it was argued that its absence was not the main cause and that there are several other contributing factors. Transparency and affordability were deemed critical for regulating privatisation however overall, it was perceived to have a negative impact on medical service delivery, causing disruption to patient care.

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Chapter One – Introduction

1.1 Introduction

The goal of this study is to investigate, understand and evaluate the factors that influence the adoption and implementation of strategic management practices within the NHS. In addition, the project intends to analyse how these factors contribute to the organisations movements towards privatisation, with an overarching research objective of determining if the shift towards privatisation has any effect on medical service delivery but more significantly overall patient care.

This chapter will detail the dissertations objectives and goals, offer necessary definitions for relevant terms used in the investigation as needed, set the context for the issue under study by providing background information on key themes, and finally present the rationale for investing this issue in the present time.

1.2 Aims and Objectives

The purpose of this dissertation is to explore, describe and understand the factors that influence the adoption and implementation of strategic management within the NHS today, how these are affecting the organisations movement towards privatisation and whether there is an impact on medical service delivery and overall patient care.

- 1) Critically review and examine the literature with a focus strategic management, its applications in both the public and private sectors, and the potential consequences of inadequate strategic management participates.
- 2) The development of a suitable methodology that enables the gathering of primary data, via an online questionnaire designed to engage a minimum of five NHS professionals spanning various career levels. Additionally, conduct two interviews with NHS consultant doctors to explore their perspectives on the research topics in question.
- 3) Evaluation of the conducted research and facilitation towards the integration of findings into the reviewed literature.

- 4) Offer recommendations that will spark future debate and solicit input about NHS strategy, privatisation, and the consequences for patient care.

1.3 Background

Clement Attlee (Labour) established the National Health Service (NHS) in 1948 as a publicly financed and provided healthcare system that offered comprehensive care, including optical and dental services (Sommerlad, 2020). The organisation has since seen substantial changes throughout the years, with successive government administrations enacting policies that have had major impacts on its structure and services.

Competitive tendering was implemented under Margaret Thatcher's (Conservative) term in 1983, leading to the outsourcing of secondary services to private organisations (Givan and Bach, 2007). With adoption of these changes access to NHS opticians and dental care became restricted, as rather than outright privatisation of NHS services, the practice brought about a competitive bidding process with the goal of maximising profits and awarding contracts based on cost-effectiveness, which often resulted in lower reliability (Lister, 2020). It is also crucial to emphasise that no ownership transfer occurred throughout this procedure, because the contractors' participation was restricted to the term of the contract, and their capacity to continue delivering services was purely dependant on their ability to acquire further contracts.

In 1988, Oliver Letwin an ex-Rothschilds Bank director and Conservative MP John Redwood published "Britain's Biggest Enterprise," a book promoting the privatisation of the NHS via trusts, private firms, levies, profits, and health insurance. Giving government justification for further policy changes, including the adoption of Private Finance Initiatives (PFIs) in 1992 by the Conservative government (Ahmad, 2014), which today has created significant debts for several hospitals, allowing private investors to profit from NHS initiatives.

Labour government would abandon the party's historic backing for public services in 1997, instead pushing for privatisation and deregulation. PFIs would be used to fund new NHS hospital projects,

resulting in massive borrowing and continuous debt obligations without the hospitals being publicly owned, with Secretary of State Andrew Lansley observing that several NHS trusts are facing financial difficulties today because of the high costs of their PFI contracts and will require £1.5 billion bailout, to function as they once did (The Times, 2023).

This commercialised NHS trend would continue for several years however most notably in 2003, NHS trusts were allowed to transform into Foundation Trusts (FTs), institutions independent of any government authority that emphasised corporate priorities and leadership (Dixon, 2003). Giving rise to the payment by results (PbR) scheme in 2004, which offered healthcare providers fixed payments per completed unit of care (Jacobs, 2014), creating further chances for the private sector to offer more profitable therapies selectively.

In 2009, Gordon Brown would introduce the Unsustainable Provider Regime, which would further exacerbate the NHS's existing challenges by using the burden of PFI hospital debt estimated to be in the region of £54.7bn, to shut down and sell NHS-owned properties (El-Gingihy, 2018). The situation would again change dramatically in 2012, when David Cameron and Nick Clegg's coalition government enacted the Health and Social Care Act (HSCA), this legislation substantially transformed the NHS landscape by removing its legal base, transferring responsibilities to new organisations such as NHS England, and allowing for the private sector to participate in large NHS tenders to intensify competition for services (Watt and Campbell, 2011).

In the decades to come for the NHS several legislations, policies, and efforts such as Sustainability and Transformation Plans (STPs) and the establishment of Integrated Care Systems (ICSs) would be implemented (Bhatia et al, 2019), signalling an evolution towards Accountable Care Organisations (ACOs) based on models inspired by the American private insurance healthcare sector.

The combination of issues such as privatisation, a lack of pandemic preparation, and the influence of COVID-19 have created a difficult situation in which the NHS struggles to satisfy demand and provide quality healthcare in recent years (Gregory, 2022).

Today the NHS is dealing with growing waiting lists and wage stagnation among healthcare professionals, triggering continuous strikes for higher pay, inflation protection, and measures to protect recruitment and retention. The Conservative government's Health and Care Bill in 2021 further cements the position of private firms in ICSs (BMA, 2023), increasing worries about potential profit-driven decisions hampering patient care.

1.4 Rationale

1.4.1 Decline in public satisfaction with the NHS

Over the past several decades the NHS has seen a huge decline in public satisfaction as seen in Fig 1, the increasing demand for healthcare services is one of the major factors causing the reduction in public satisfaction with the NHS and understanding how strategic management practices are adopted within the organisation can aid in the identification of opportunities for improvement and efficiency. It can also provide important insight into the NHS's decision-making processes, resource allocation procedures and overall strategic direction. Which can assist policymakers and healthcare executives in making informed decisions to improve healthcare services and patient outcomes.

Strategic management practises are extremely important in addressing public dissatisfaction with the NHS. This link is strengthened by several interconnected factors, including medical service delivery, patient experiences, resource allocation, funding mechanisms, transparency in operations, policy implementation, public perception of government involvement with the organisation. Addressing these characteristics with effective strategic management strategies has the potential to increase public satisfaction, while also improving the quality of healthcare services and patient experiences delivered by the NHS.

To improve public satisfaction, the NHS must carefully align its strategic management approaches with the general public's expectations and requirements. This integration could lead to significant improvements and overall performance for the NHS, increasing public confidence and trust. This synchronisation of strategic practices with stakeholder preferences holds the potential to transform the

NHS's objective of providing high-quality healthcare services and achieving better success in satisfying the different healthcare demands of the population it serves.

Question asked: 'You said you are dissatisfied with the way in which the National Health Service runs nowadays. Why do you say that? You can choose up to three options.'

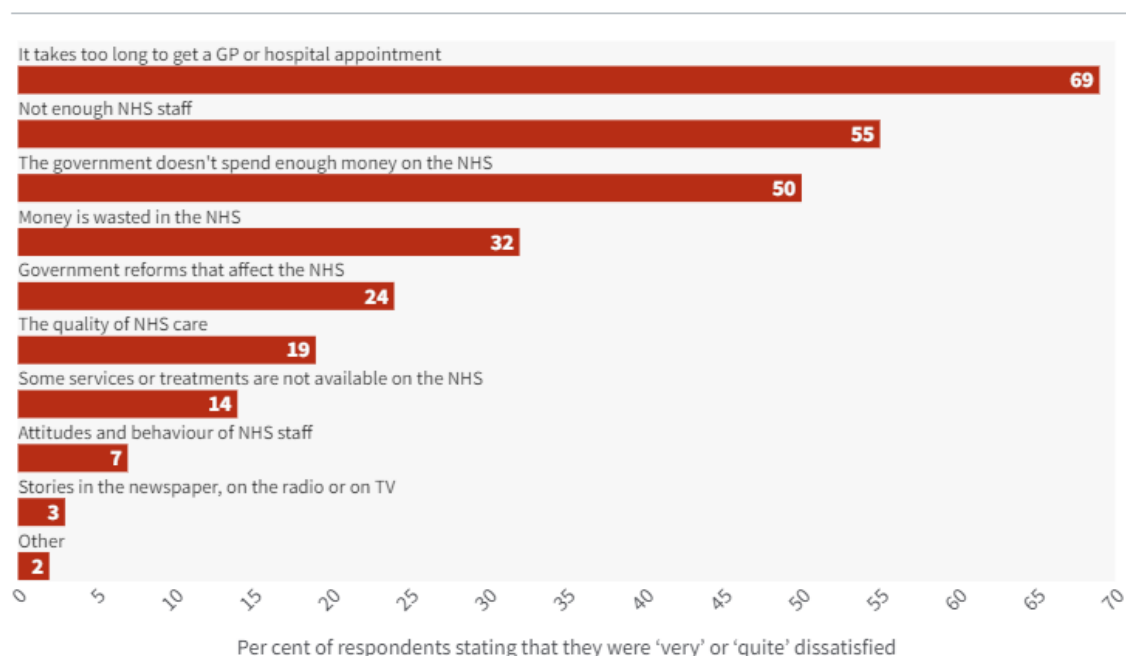


Figure 1 - Reasons for dissatisfaction with the NHS overall 2022, (Nuffield Trust, 2022)

1.4.2 NHS Privatisation

There are various potential repercussions for the NHS and its overall service delivery when the private sector becomes involved in healthcare through the process of privatisation. While supporters argue that private participation can boost competition and efficiency, guaranteeing timely and fair access for all patients must remain the priority. It is therefore critical to determine whether the entry of private providers causes inequities in access to healthcare, particularly for vulnerable or underprivileged patients.

Evaluating the impact on service quality can assist establish whether private providers adhere to the same medical care standards as the NHS. Maintaining uniform and high-quality care must remain a fundamental concern, to ensure that patient outcomes are not jeopardised during the transition to a

more privatised healthcare system, a balance must be struck between cost-effectiveness and retaining high-quality care.

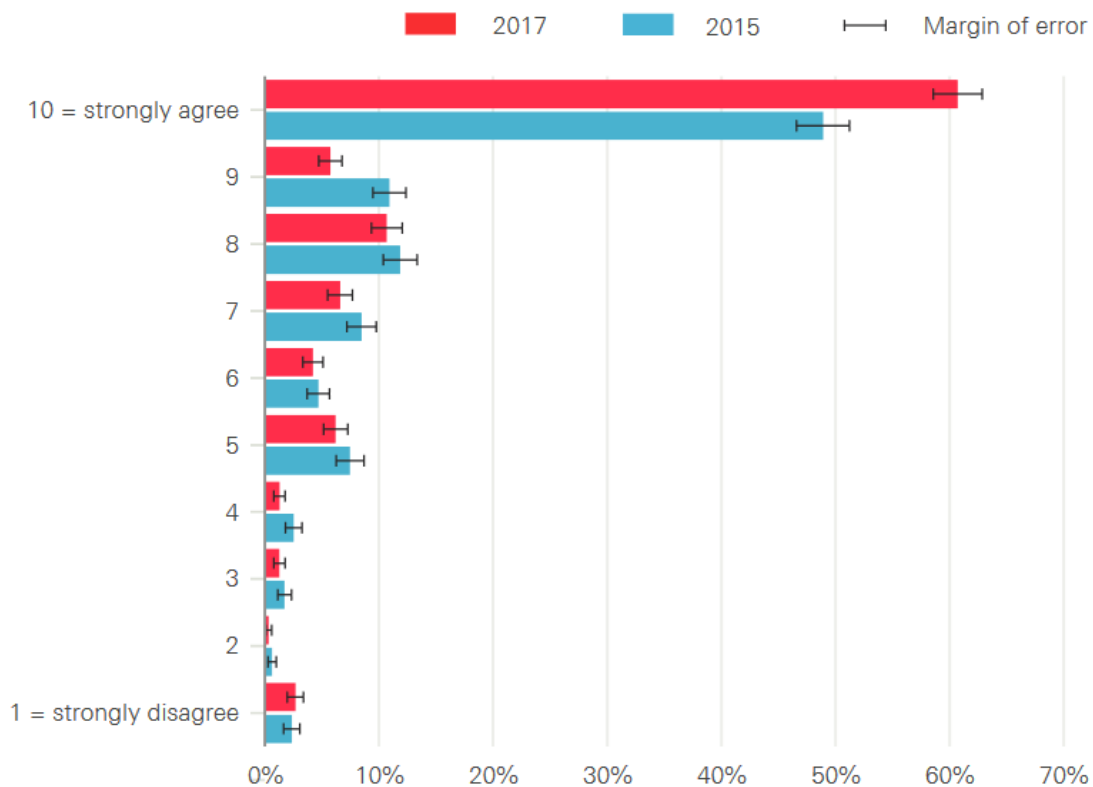
Pricing and cost considerations are another source of concern when it comes to privatisation, with many firmly preferring the NHS to remain a tax-funded government body providing comprehensive treatment for all, as seen in Fig 2. This is because costs for medical services may fluctuate as private organisations enter the NHS, thus understanding how privatisation affects healthcare funding can help policymakers make educated decisions that keep the financial burden on patients manageable and the healthcare system financially sustainable.

Research into the privatisation can provide significant insights into the potential benefits and pitfalls of this method. Such research has the capacity to influence policy conversations about the optimum healthcare system structure for the NHS, one that upholds the key ideals of fair access, high-quality care, and long-term funding for the benefit of all patients.

Privatisation provides a variety of opportunities and challenges associated with its entry into the healthcare industry through private sector business. To make well-informed decisions concerning the future of the NHS, policymakers, healthcare professionals, and academics must consider not only the immediate implications on patient access and quality to care privatisation poses but also the long-term sustainability of the organisation as whole.

Figure 2 - Government supported NHS (Health Foundation, 2017)

The government should support a national health system that is tax funded, free at the point of use, and providing comprehensive care for all citizens.



Source: Health Foundation analysis of Ipsos MORI survey of 1,985 adults in Great Britain aged 15 and over, May 2017, and Ipsos MORI survey of 1,792 adults in Great Britain aged 15 and over, March 2015.

1.4.3 Patient Care

To maintain patient safety, it is critical to assess the effects of prospective privatisation on medical service delivery and patient well-being. Changes in healthcare service ownership and management can have a substantial impact on an organisation's priorities, resource allocation, and care delivery practises. Therefore, it is critical that any restructuring within the NHS should not jeopardise the quality, accessibility, or affordability of healthcare services for the public.

In 2013, a survey of 302 NHS employees with the intention of evaluating the effects of governmental measures on patient care. As shown in Figure 3, the data revealed that 69% of respondents considered that patient care had been negatively impacted. This emphasises the importance of properly assessing the ramifications of healthcare reforms to safeguard the well-being and interests of patients.

When considering the larger landscape of healthcare reforms and probable privatisation, the need of this assessment becomes even more apparent. Priorities may alter because of modifications to the ownership or operational structures of healthcare systems. This situation emphasises how important it is to investigate the potential effects of privatisation on the provision of medical services in advance.

The effects on patient care when changes are implemented without a thorough grasp of their implications become visible in instances like the survey results from 2013. These lessons serve as a reminder of the responsibility of government to thoughtfully consider and assess the implications of continued reforms and privatisation on the NHS before making any decisions.

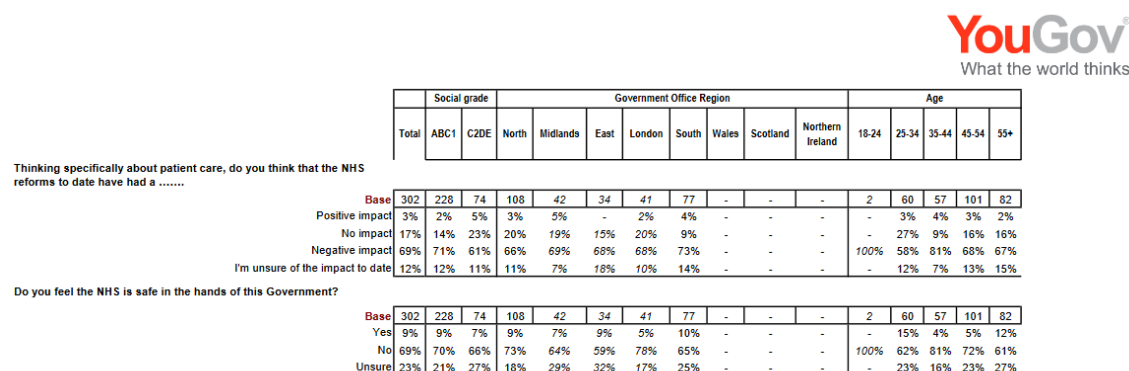


Figure 3 - NHS Satisfaction Survey (YouGov, 2013)

1.5 Conclusion

The core purpose of the NHS since its inception in 1948 has been to offer fair access to healthcare for all, regardless of financial ability or medical need. However, the NHS has experienced issues over time because of mismanagement by successive government administrations since its founding, heightening questions about its long-term viability. Furthermore, the introduction of privatisation has complicated matters, throwing doubt on the continuity of the NHS's core values.

Preserving the NHS as the primary provider of healthcare services has been a core component of its operation, rooted in a dedication to public service and collective well-being and the introduction of

proposals to allow any willing provider to treat patients, including private corporations raises significant concerns among the public. These worries are mostly around the potential consequences for patient welfare, as a change away from the NHS as the preferred provider will have an impact on healthcare quality, accessibility, and continuity of care.

Given these issues, it is critical to carefully assess the implications of allowing the private sector to participate in the delivery of NHS services. This includes investigating how such decisions may impact patient outcomes, patient experiences, and the overall coherence of the healthcare system.

This chapter serves as the introductory section of the dissertation project, offering an overview in the background and the rationale behind the chosen topic, additionally outlining the specific targets and objectives of the investigation. Chapter two, the literature review, is designed to explore the key themes of the study through the examination of relevant published materials on the topic.

Chapter Two – Literature Review

2.1 Introduction

The objective of this chapter is to conduct a review of relevant literature sources, such as academic papers, medical publications and articles relating to the topics in question, with the intention of establishing a foundation for the collection data exercise. The primary focus of the review will be exploring strategic management, applications of strategic management in the private and public sector and the consequences of mismanagement. Additionally, the chapter will review medical service delivery and privatisation of public healthcare services.

2.2 Aims and Objectives

The purpose of this dissertation is to explore, describe and understand the factors that influence the adoption and implementation of strategic management within the NHS today, how these are affecting the organisations move to privatisation and whether there is an impact on medical service delivery and overall patient care.

- 1) Critically review and examine the literature with a focus strategic management, its applications in both the public and private sectors, and the potential consequences of inadequate strategic management participates.
- 2) Critically review and examine the literature with a focus on medical service delivery.
- 3) Critically review and examine the literature of privatisation of public health services.

2.3 Strategy

2.3.1 Strategic Management

2.3.1.1 Definition and Description

According to Richard Lynch, strategy can be defined as the process of identifying and organisation's purpose by developing plans and actions to achieve that purpose (Richard Lynch, 2009, p8). Strategic management has become a prevalent approach employed by most organisations today, to support the establishment of goals, enhance competitiveness and optimise resource allocation. However, it is important to note that there is no one-size fits all approach to strategic management (Kenton, 2022), as it encompasses all aspects of a business, including its people, finances, customers, and environment thus organisations must continually create and adapt their strategic processes and approaches (Lynch, 2009).

Tucci (2022) notes, that the adoption of a strategic management enables businesses to evaluate their current state and supports the facilitation and formulation of supplementary organisational strategies. This subsequently assists in the implementation and evaluation of the effectiveness and success of those strategies (Tom Liou, 2000). However strategic management is a complex field with significant disagreements among researchers regarding its various aspects. These disagreements encompass the interconnections between its elements and preferred approach, whether it should be perspective driven or emergent for example. Such debates highlight the intricacies and nuances associated with strategic management, adding further complexity to its implementation, and understanding (Lynch, 2009).

2.3.1.2 Microenvironmental Factors

Microenvironmental factors are specific attributes that directly impact and organisation and its immediate operating environment (Mavondo and Farrell, 2003). These are usually close to home and have a direct influence on an organisation's strategic management plans, usually including the following customers, suppliers, competitors, and internal stakeholders. Understanding these factors

allows organisations to adapt to their business environment, identify opportunities, meet customer expectations, and gain a competitive edge.

- Customers are essential for any organisation and understanding their needs and preferences is crucial to meeting those needs. Analysis of customer feedback allows for the identification of market trends and allows organisations to appropriately adjust their strategies to enhance their market position (Twin, 2023).
- Suppliers provide the necessary resources for an organisations operation therefore maintaining strong relationships with them is crucial, as this ensures reliability thus maintaining long term operational effectiveness and more importantly customer demand (Ngai et al, 2011).
- Competitors drive competition and play a large part in influencing the organisations strategic decisions. Analysing the competitions strengths and weaknesses helps organisations differentiate themselves and in the identification of gaps within the marketplace. By monitoring market trends and competitor activities, businesses can adjust their offerings and develop more innovative approaches to gain a competitive advantage (Bose, 2008).
- Internal stakeholders, including employees, managers and stakeholders form an internal part of an organisation microenvironment. As their skills and expertise are a major contributing factor to the organisation's overall success (Hronová, and Špaček, 2021).

In addition to the microenvironmental factors, understanding and analysing the macroenvironmental factors is equally as vital for organisations to effectively navigate their business environment.

2.3.1.3 Macroenvironmental Factors

Macroenvironmental factors encompass the external environment and play a crucial role in shaping an organisations business strategy. These factors extend beyond the control of the organisation and are shaped by the broader political, economic, socio-cultural, and technological forces at play (Khartit and Rathburn, 2021).

- Political factors usually refer to or include government policies, regulations and stability that can affect business operations. Changes in the political landscape can sometimes affect the organisations market access if there is political unrest for example, this can foster an atmosphere of unrest and volatility that influences the decision-making process (Luo, 2006).
- Economic factors involve overall economic conditions, such as inflation, unemployment rates and economic growth. Fluctuations in the economy usually have an impact on consumer spending and thus business investment (Anyanwu, 2014).
- Socio -cultural factors include societal views, beliefs, demographics, and cultural trends that can shape population behaviour and market demands. Therefore, understanding social-cultural dynamics enables organisation to tailor products, services, and market strategies to effectively target specific audiences that align with the social norms and preferences (Gluckman, 1990).
- Technological factors can relate to advancements and innovations in technology that can sometimes disrupt an organisation or create new opportunities. Organisations must stay on top of technological advancements and leverage these to optimise operational efficiency and enhance customer experiences (Lee and Trimi, 2018).

It is vital for any organisation to develop a profound understanding and monitor both its macro and microenvironments. By engaging in this practice, organisations can effectively navigate their business environment and exploit strategic opportunities, thus allowing them the flexibility in adapting their strategies for long-term sustainability.

2.3.1.4 Strategic Management Theories

There are numerous strategic management theories that have been developed and applied in various contexts however when considering the National Health Service (NHS) and for the purpose of this study the focus will be on strength, weaknesses, opportunities, and threats (SWOT) analysis, transaction cost economics (TCE), agency theory and resource-based view (RBV) theories.

- SWOT analysis is a widely used tool for strategic planning, that helps in the identification of strategic options by aligning internal capabilities with external factors within the organisations operating environment (David et al, 2019). It can help an organisation in the identification of internal strengths and weaknesses as well as external opportunities and threats.
- TCE looks at examining the cost and benefits associated with different transactions (Brouthers, 2013), this can be beneficial in the NHS, when it comes to outsourcing medical services or partnerships with private healthcare providers. As it helps assess the effectiveness of various modes of service delivery, considering factors such as cost, quality, and patient outcomes.
- Agency theory examines the relationship between various stakeholders internal and external to an organisation (Van Puyvelde et al, 2012). As the NHS is a large and complex organisation it can benefit from understand the dynamics between government and healthcare providers for example. Agency theory can also be a useful tool in designing appropriate governance mechanisms by aligning incentives and limiting conflicts of interest.
- RBV emphasises the importance of an organisations internal resource pool and its capabilities (Dubey et al, 2019). This theory can help identify and develop the NHS's unique resource such as skilled healthcare professionals, advance medical technology, research capabilities and patient data.

The NHS is a complex institution with various layers, which requires a comprehensive strategic management plan therefore integrating multiple theories and frameworks, as well as considering the expertise of healthcare professionals and stakeholders, can lead to a more comprehensive and effective strategic management approach within the NHS.

Such a holistic approach recognises the diverse aspects of healthcare delivery, where complex interactions between professional medical knowledge, patient needs, governmental regulations, and social expectations merge. By doing this, the NHS increases not only its operational effectiveness but

also its ability to promote significant advancements in patient care, organisational effectiveness, and evolution of healthcare practises.

2.4 Applications of Strategic Management (Public vs Private Sector)

Strategic management is a crucial practice employed in both the private and public sectors to achieve organisational goals, gain a competitive advantage, and enhance overall performance. In the private sector, strategic management involves several key steps however usually begins by the organisation establishing a clear vision and mission, usually followed by an environmental analysis to understand market trends, customer preferences and competitor dynamics (Gluck et al, 1980). Private sector organisations set specific goals aligned with their vision and formulate strategies to achieve those goals. These strategies may involve market segmentation, differentiation, cost leadership, or diversification (Farida and Setiawan, 2022).

Once strategies are formulated, private sector organisations implement them by creating detailed plans, allocating resources, and establishing processes and systems to execute these effectively. Performance monitoring and regular reviews are conducted to track progress, when necessary, allowing them to recognise the need for change and adaption of strategic plans, especially in dynamic markets, where they actively manage risks (Kaplan and Norton, 2005).

Strategic management in the private sector aims to create a sustainable competitive advantage, while fostering innovation and growth. It involves the analysis of the external markets, the making of informed decisions and the strategic allocation of resources. Private sector organisations continuously seek to differentiate themselves from their competition with the aim to deliver superior value to customers (Geissdoerfer, et al, 2018).

In the public sector however, strategic management tries to follow a similar framework but with distinct considerations, as public sector organisations have a service mission, with a focus on serving public interest (Nielsen and Fletcher, 2023). While they also look to analyse the external environment however must engage a wider range of stakeholders and formulate policies to address societal

challenges. Public sector strategic management involves, collaborations, and partnerships with the hope of delivering public services efficiently and effectively.

Performance measurements and evaluation play a significant role in the public sector, enabling organisations to assess the effectiveness of their programs and services to ensure accountability and enhanced decision making in the public domain (van der Kolk, 2022). Public sector strategic management is a method that works in the environment of governmental institutions and organisations. Its primary goal is to add value to the public by closely tying the advancement of public interest to the optimisation of resource allocation. This distinctive framework recognises that public organisations are tasked with meeting the needs and ambitions of the people they serve.

Fundamentally, strategic management looks to be vital to both the public and private sectors. It involves defining goals, examining the environment, developing strategies, monitoring performance, and accommodating changes in each area. However, there are differences in their goals: while public sector strategic management emphasises establishing societal benefits and focusing on providing public welfare, private sector strategic management emphasises securing a competitive edge and fostering expansion.

2.5 Consequences of Mismanagement

The absence or poor implementation of strategic management within an organisation can have substantial implications for its stakeholders with the consequences encompassing a wide range of significance, including a decline in operational efficiency or productivity due to ineffective resource allocation (Dess and Robinson Jr, 1984). This in turn may lead to a lack of competitiveness, resulting in a decreased market share and thus profitability.

The lack of some form of strategic management framework can also give rise to suboptimal decision making, characterised by a reactive rather than proactive organisational approaches, thereby causing long-term repercussions.

The insufficiency of understanding of organisational goals and employee roles within the overall framework can contribute to reduced morale and engagement among employees. This in turn impacts customers, as the deterioration in the quality of products and services causes the organisation to fall short in meeting their client's needs, resulting in an overall reduction in satisfaction and likely loss of business (Sherman et al, 2007). Thus, leading to financial losses, that include budget overruns and cash flow challenges, putting a strain on the organisations financial stability and possibly jeopardising its long-term sustainability.

Financial setbacks will negatively impact the organisations reputation further exacerbating the difficulties it faces. Reputation can impact an organisation's ability attract and retain customers, hinder its capacity to recruit and retain talented employees, and even dampen investor confidence making it more challenging to secure funding for future growth and development.

This loss of trust can have long-term implications for the organisation's success, sustainability and in the establishment of collaborative partnerships. In extreme cases the survival of the organisation itself may be at risk, as the adverse effects of mismanagement can undermine its overall success, necessitating significant efforts to restore trust and rebuild its position in the market.

Organisational mismanagement can even give rise to legal challenges that lead to potential lawsuits or regulatory penalties that can add further substantial financial burdens. In essence, the ramifications of organisational mismanagement or lack of strategy can extend far beyond internal inefficiencies.

To avoid these detrimental consequences, it is crucial for organisations to develop a well-structured thoughtful strategic plan. As this plan will serve as a road map in guiding the organisations actions and decisions towards its goals. By implementing effective strategic management practices, organisations can mitigate risks, enhance performance, and maintain a positive reputation amongst stakeholders (Cote, 2020).

2.6 Medical Service Delivery

Despite the importance of strategic management within the private and public sector, there are instances where organisations struggle to effectively implement these practices. One of the notable examples is the National Health Service (NHS), the healthcare system in the United Kingdom, with its mandate of providing quality healthcare services to the public facing significant challenges today.

This is particularly evident in the realm of medical service delivery, which involves the provisioning of medical care treatments, and services to patients by healthcare providers like doctors, nurses, and hospitals (Mosadeghrad, 2014). However, today the NHS's ability in the delivery of these services has been impacted by several factors that hinder its ability to meet the demands and expectations of patients and the wider public.

A critical aspect of medical service delivery is the effective management of healthcare resources, as it ensures healthcare facilities and personnel are optimally utilised, to deliver timely and high-quality care to patients. Unfortunately, there looks to be a lack of or understanding, in strategic management practices within the NHS, as seen on most news outlets, resource allocation and utilisation are suboptimal, leading to long waiting times for patients, overcrowded hospitals and limited access to specialists for specialised treatments.

Moreover, the NHS's ability to embrace and leverage technology in medical service delivery has been a challenge, with BBC News (2020) reporting, the NHS is currently grappling with outdated IT systems, that force staff members to navigate a maze of up to 15 separate systems to fulfil their responsibilities. This predicament affects doctors, who are burdened with managing numerous logins for diverse tasks including requesting x-rays, accessing lab results, inputting A&E records, and organising schedules.

While the recent introduction of electronic health records and telemedicine has enhanced the quality, efficiency, and accessibility of healthcare services (Haleem et al, 2021), the NHS still struggles with the adoption and integration of new technologies.

To combat these issues the government has pledged to invest £40 million into the hospitals (GOV.UK, 2020) however many hospitals have yet seen these changes, the government has also pledged to reduce waiting times, another issue plaguing the NHS, by encouraging patients to use the NHS app for private hospital bookings.

The initiative aims to expedite care and enhance the capacity of the NHS, as the app gives patients the ability to access private diagnostics centres, it effectively increases options for medical services. With prime minister Rishi Sunak noting, that providing patients with more choices than their local hospital, will ultimately elevate some of the challenges we see today (Pearson, 2023).

It is evident that the NHS's difficulties in delivering effective medical services are linked to a lack of strategic management practices. Addressing these challenges and implementing robust strategic management approaches can help the NHS overcome the barriers it faces and deliver on its primary objective of enhancing patient outcomes and ensuring they receive the appropriate care at the appropriate time and place.

2.7 Privatisation

One proposed solution to address the NHS's challenges and shortcoming in delivering effective medical services is through the privatisation of certain aspects of its operations. Privatisation involves the transferring of ownership, control, and management of public services such as health care, to private entities (Hargrave, 2022). The World Health Organization (WHO) defines the privatisation of healthcare in a single statement "it is a process in which non-government actors become increasingly involved in the financing and/or provision of health care services" (Drache and Sullivan, 2005)

Over the past decade privatisation has been frequently used as a policy instrument to reduce the financial burden on the public sector services. Especially in healthcare due to the abundance of public and private interests in most countries (Janssen and Made, 1990). With proponents arguing that privatisation can introduce market mechanisms, that increase efficiency and improve the quality of services within the NHS.

Privatisation could encourage innovation an example of this is when the NHS announced that technology giant Amazon had been awarded a contract to deliver virtual health care to patients, the deal is a drive to make the NHS more digital, by allowing people to access “world-leading advice from doctors from the comfort of their home,” explained Matt Hancock, the UK health secretary and also owner of the digital software company (Webster, 2019) thus driving improvement in patient outcomes.

However, it is crucial to consider and acknowledge that privatisation of the NHS also raises concerns about a potential shift towards a profit-focused health care system. When private entities are included or take control of public services, their primary objective often becomes maximising financial returns which is not a performance indicator in the public sector (Van Dooren et al, 2015), this approach can potentially prioritise cost cutting measures, selective provision of services and focus on more lucrative treatments or patient populations. Profit motives may also divert resources away from essential but less profitable services, jeopardising equitable access to healthcare for all individuals.

When healthcare becomes driven by financial gains patients may be viewed as commodities rather than individuals in need of care and with debates happening on the terminology for patients, should they be labelled ‘consumer’, ‘customer’ or ‘client’ (Deber et al, 2005), however it is imperative to acknowledge that patients should not be treated as conventional customers. As their unique motivations and circumstances set them apart from a typical consumer unlike voluntary choices made by customers, patients seek healthcare services out of medical necessity, driven by health conditions.

Furthermore, patients are usually not directly responsible or unaware of the costs associated or incurred due to the illness, it is also important to recognise that positive outcomes cannot always be guaranteed and in the case of the NHS, patient satisfaction does not necessarily align with the quality of care received.

The introduction of market mechanisms into the NHS may also lead to increased fragmentation of care, hindering coordination and continuity of services. Additionally, the loss of a unified public health system may undermine the NHS’s core values of universal coverage, it is therefore pertinent to

carefully consider the balance between efficiency gains and the potential risks to patient access, quality of care and overall public interest when contemplating the privatisation of the NHS.

While healthcare institutions globally acknowledge the importance of customer service in retaining patients, the focus on prioritising high-quality care should be paramount. Patient centred services should go beyond the business context because delivering high quality care fosters a culture of improvement and accountability, in the hope that any shortcomings are addressed promptly. This approach strengthens patient and provider relationships, which in turn enhance engagement, satisfaction and healthcare outcomes thus nurturing an environment of professionalism, empathy, and compassion where patients feel supported and respected.

2.8 Conclusion

This chapter reviewed the relevant literature to provide a comprehensive analysis of the role of strategic management in the context of medical service delivery in the ever-evolving landscape of the healthcare sector and the potential implications of privatisation within the NHS. The review looked to provide insight into several topics, including the definition and description of strategic management as well as the analysis of the macroenvironmental and microenvironmental elements influencing organisational strategies.

The relevance of strategic management theories to the dynamic NHS landscape were also discussed and the application of strategic management practices in both the public and private sectors, highlighting the differences in goals and approaches. As while both share common elements, the private sector emphasises competitiveness and profitability, while the public sector practises, societal well-being, and public value, this helps in understanding the complexities that arise when privatisation that is not recognised as a problem within the NHS, is included within the healthcare system.

A significant point from the literature was that for organisations in all industries, including healthcare, to fulfil their objectives, boost competitiveness, and allocate resources effectively, strategic management is essential. However, the NHS serves as an illustration of the difficulties in

implementing strategic management practises, particularly in the delivery of medical services. This has caused problems like ineffective resource allocation and prolonged patient wait times; thus, the organisation must look at strategies to revolutionise the way healthcare services are provided, making them more efficient, accessible for all patients.

Privatisation was explored in detail within the review however presented a critical crossroad for the NHS. While supports argued that the infusion of market mechanisms into the organisation could drive efficiency and innovation, caution is advised to ensure that patient care continue to take precedence. Striking a balance is difficult and the potential consequences range from fragmented healthcare delivery or the danger of codifying patients as consumers.

In conclusion, this literature review provides a starting point for further research into the complex interactions between strategic management and the NHS. The research chapters that follow will look to delve into topics like the challenges faced by the NHS in implementing strategic management, the potential effects of privatisation on patient care and outcomes, and the moral issues raised by the merging of profit motive and healthcare provision. The study aims to contribute to an educated discussion and decision-making process within the healthcare sector by expanding on the insights gained through this review.

Chapter three explains the research approach, methods, and techniques employed in this study. It also provides rationale to why they were chosen to address the research questions. Additionally, chapter highlights any limitations in the chosen methods and how they might affect the research outcomes.

Chapter three – Methodology

3.1 Introduction

This chapter aims to comprehensively break down the research process that was employed, covering the specific data collection methodologies incorporated within the study. Additionally, it offers detailed justification for the selected method and approach utilised in gathering this data, with the overarching goal of achieving the research objectives outlined in this project.

The research process can be described as an organised set of steps undertaken to acquire knowledge or understanding when investigating a specific problem or phenomenon as noted by (Goddard and Melville, 2004). Academic research usually has the following steps, identification of a research question, formulating objectives to answer that question, collection, and analysis of data to support the answer to the research question followed by interpretation of findings.

This study employs the research ‘onion’ methodology by Saunders et al, (2019). The research onion consists of several layers that encompass the full research process. See Fig 4. These layers include research philosophy, approach, strategy, and support in determining the data collection techniques to be utilised.

3.2 Aims and Objectives

The purpose of this dissertation is to explore, describe and understand the factors that influence the adoption and implementation of strategic management within the NHS today, how these are affecting the organisations move to privatisation and whether there is an impact on medical service delivery.

The completion of this chapter will involve the following objective:

- 1) The development of a suitable strategy which facilitates the gathering of primary data, via an online survey aimed at engaging a minimum of five experts at differing career levels. The survey will focus on assessing their awareness and engagement with strategic management, privatisation, medical service delivery coupled with patient care within the NHS. Two

interviews will also be conducted with consultant doctors to explore their perspective on NHS topics in question and the potential impact on overall patient care.

3.3 Research Design

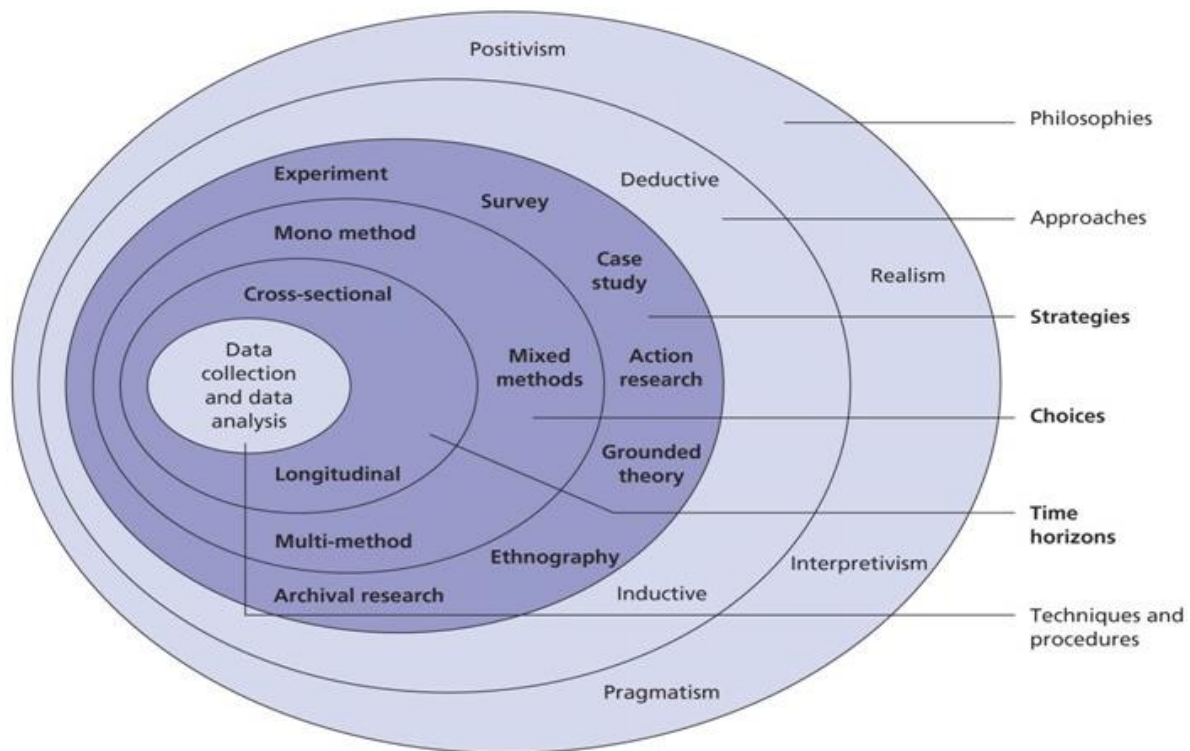


Figure 4 - Guide to Understanding the Research Onion (15Writers, 2019)

3.3.1 Research Philosophy

Data collection for this study will draw upon both the positivism and interpretivism philosophies. As multiple-choice questionnaires are often in a standardised format, the positivism philosophy allows for these to be converted into measurable observational phenomena that can be analysed using statistical tools (Collins, 2010).

Interviews will form a part of the data collection process and thus require utilisation of the interpretivist philosophical approach. This approach employs human interactions and observation as a

part of the study, where the researcher considers individuals opinions on the subject matter, who will usually have different experiences and meanings to the questions being asked of them (Myers, 2019).

3.3.2 Research Approach

The deductive research approach was chosen for this study, as it allows the researcher to formulate a hypothesis based on existing theory. Subsequently the researcher can gather a range of data and information, which is then examined to either confirm or disprove the hypothesis, aiming to address the research question under investigation (Pellissier, 2008).

The deductive approach does come with its limitations however with scholars arguing that it neglects the roles of human interpretation during research by solely focusing on establishing cause and effect relationships between variables (Saunders et al, 2019).

The second chapter of this dissertation will involve analysis of past research to aid in the support of answering the research question, with the aim of establishing a foundation for the data to be gathered on this topic of interest.

3.3.3 Research Strategy

To conduct this research a mixed methods approach has been chosen, specifically for its sequential explanatory design. Which involves the gathering and analysis of quantitative data in the first instance, followed by qualitative data, with the aim of using the qualitative data to provide additional support and interpretation to the quantitative results (Creswell, 2017). The mix methods research approach involves an alternative methodological approach, combining qualitative and quantitative research, it enables the researcher to explore complex phenomena in detail, (Halcomb and Hickman, 2015).

Despite the potential drawbacks of unequal data sets and the increase in research time, the mixed methods approach has been chosen to leverage and facilitate the benefits of both the qualitative and

quantitative data collection methods. Using a mixed methods approach also enhances the validity of data by overcoming the limitations posed by a single research approach (Hafsa, 2019).

To start with a quantitative survey will be issued to participants to identify patterns in their attitudes, experiences and understanding for the questions being asked for the database to be created.

Quantitative research relies on numerical data and statistics. It involves measurement and assumes that the topic under study can be quantified (Watson, 2013), thus using surveys can be an effective method in collecting data from a broad range of participants with the aim of making general conclusions.

After the survey, two NHS consultant doctors will be interviewed using qualitative semi-structured interviews for the researcher to obtain comprehensive view on their understanding and insights on the topic being discussed as experts in their industry. Qualitative research can be defined as the study of the nature of phenomena and is especially appropriate for answering questions of why something is (not) observed, assessing complex multi-component interventions, and focusing on intervention improvement. It usually relies on the use of words, images, description, video and creating meaning out of what the researcher is hearing or seeing, (Busetto et al, 2020).

Surveys are an economical way to collect a sizeable amount of data from the researchers target audience through standardised and tailored questioning. With a quick turnaround time, surveys can also reach a broader sample size if applied correctly.

The use of in-depth, semi-structured individual interviews allow for broad topics of discussion, where the respondent can develop ideas and themes as the interview is conducted and the interviewer uses prompts to probe and guide the conversation within the broad areas identified. The semi-structured interview will include open-ended questions. The interviewer may contribute but there is mainly one-way information flow. The interviews will be transcribed in real time as participants were not comfortable with recordings.

The data collected during this study will be analysed with the use of descriptive statistics with the aim of further informing the discussion surrounding the adoption and implementation of strategic management within the NHS today, how these are affecting the organisations move to privatisation and whether there is an impact on medical service delivery and overall patient care.

3.3.4 Research Sample

The data collection for this study will be conducted via a non-probability convenience sampling method. This method involves selecting individuals who are readily available and willing to participate in the study and while this approach may not provide the most accurate representative sample, it is useful for studies with limited resources and time constraints, (Palinkas et al, 2015)

The selected target audience for the survey in this study will consist of at least five professionals with varying levels of experience in the National Health System (NHS). This group has been chosen for the purpose of gathering their perspectives and insights into the research questions and objectives proposed within the study. Their expertise will provide a valuable contribution to the understanding the potential link between strategic management, privatisation, and medical service delivery within the NHS.

It is hoped that the participants in this sample have a strong understanding of the concepts and policies related to the NHS, as well as some form of practical application of these key themes. Through their participation, the study aims to obtain a comprehensive understanding of participant judgments and perceptions on the topic of research. The selected sample also ensures there is a broad range of perspectives and experiences by including professionals at varying career levels within the NHS thus gathering a diverse range of opinions that can provide a more complete picture to the research investigation.

To obtain more in-depth and expert insights into the research topic, the target sample for the interviews will be two senior NHS consultant doctors. These individuals have been selected as they

are likely to have extensive knowledge and experience within the healthcare industry but particularly the NHS, as seasoned professionals they are likely to possess a wealth of practical and theoretical knowledge which can shed light on the research questions and objectives being investigated.

Additionally due to their seniority within the NHS hierarchy they are likely to have a broader perspective on the issues being discussed and can provide a more holistic understanding of the relationship between strategic management, privatisation, and medical service delivery within the organisation. By targeting this sample, the research aims to capture a more nuanced and informed perspectives that can help generate deeper insights into the research topic, contributing to a more robust and comprehensive analysis.

3.3.5 Primary Data Collection

Primary data refers to data that is collected first-hand by the researcher for the investigation in question, (Robbins, 2013).

As the chosen method of collection for the primary data, the researcher will issue an online self-administered survey to participants. Respondents will be asked fifteen multiple choice questions related to the research objectives, with their responses being recorded in numerical format. The quantitative data collected will then be analysed using descriptive statistical methods, allowing for the identification of patterns and trends within the data sample.

To quantify the data collected from the survey, the researcher will be using a Likert scale, which is a commonly used method for measuring attitudes and opinions (Solmaz, 2023). This scale allows respondents to rate the level of agreement or disagreement with the questions and/or statements provided, which can then be converted into numerical data for analysis. Initially, the study had planned to include open-ended questions in the survey to collect a small sample of qualitative data alongside the quantitative set, however the researcher ultimately decided against this approach to maintain a focus on quantitative data for the analysis of this sample group.

Hyman and Sierra (2016), note that close-ended questions can provide a structured approach to data collection thus allowing for clearer and more concise responses. This method may also reduce response bias, making data analysis much easier, even more so when the data collected is from a large sample size.

The data obtained from the completed questionnaires will be valuable for the analysis and contribute to the discussion on the possible correlation between strategic management, privatisation, and health service delivery in the NHS.

3.3.6 Data Analysis Methods

This research has utilised both qualitative and quantitative data collection methods. Qualitative data was gathered through an extensive literature review that explored the various concepts and constructs relevant to the research objectives which in turn supported the identification of key themes and ideas incorporated within the research questions.

Quantitative data collection was primarily conducted using an online survey in questionnaire format, which allowed for the efficient gathering of large amounts of data from a target audience. The resulting data was then analysed using software and descriptive statistical methods including graphs and charts to illustrate trends and correlations in opinions with respondents.

By using both the qualitative and quantitative data, mixed methods approach the research was able to provide a comprehensive analysis of the research topic. With the use of quantitative methods allowing for the generation of statistically significant findings and the qualitative approach providing valuable context and insight into the underlying factors and motivations.

3.4 Validity

According to Saunders et al (2019), validity in research can be defined as the extent to which a study measures what it claims to measure.

There are two types of validity: Internal and external.

Internal validity refers to the accuracy of a study's findings within the context of the research design and methodology, while external validity refers to the extent to which the findings can be generalised beyond the specific sample and setting of the study (Bhandari, 2020).

The questions designed for the primary research were derived from an extensive review of the relevant academic literature and proofed by the dissertation supervisor to minimise the potential for errors in the research methodology.

3.5 Reliability

In research, reliability refers to the consistency and stability of the tool or techniques used to produce the same results when used repeatedly under the same conditions (Chiang et al, 2015). This implies that if the study were replicated, other researchers are likely arriving at comparable results and observations or that there is transparency in how the raw data was interpreted.

The data collection procedures carried out in the research have been informed by the exiting literature on the subject matter and have been scrutinized by a dissertation supervisor to ensure validity and reliability.

Finally, to maintain objectivity and reduce potential bias in the research, several methods were undertaken. Firstly, the questions for the primary data collection were developed based on existing literature to ensure neutral vocabulary use and avoid researcher bias, additionally a pilot survey was conducted to an NHS specialist to ensure the questions were unbiased and effective. The questionnaire was then reviewed and approved by the dissertation supervisor prior to data collection.

All these steps would help to make sure the research was carried out in an objective and unbiased manner.

3.6 Resource Utilisation

3.6.1 Cost

No financial resources have been utilised for this dissertation project; the researcher has relied on free software programs provided by the University of Wales Trinity Saint David to complete the investigation. These resources include but are not limited to access to the Microsoft office 365 package, which offers a suite of tools that are essential to academic writing and Curatr the online learning platform.

To further minimize expenses and maximise the use of available resources, a free online platform will be used to conduct the survey for primary research data collection. Furthermore, any additional expenses incurred during the research process, such as travel costs for conduction interviews, will be covered by the researcher. The hope is by carefully managing costs and resources, the researcher can focus on the core objectives of the research and ensure findings are robust and insightful to the reader.

3.6.2 Researchers Skills

The researcher possesses the relevant experience in reviewing pertinent literature for investigation at this academic level. Thus, the researcher will use their knowledge and expertise to organise and carry out the data collection stage for this dissertation.

The collection of data will be through a convenience sample set and subsequent analysis will involve the use of descriptive statistics, primarily represented through graphs and charts generated by the online survey platform.

3.6.3 Time

Appendix 1 displays the Gantt chart the researcher has designed to serve as a reference point. It was implemented to monitor the research's progress and ensure that it meets the allocated time frames.

The researcher will do their best to utilise this as the benchmark for time management.

3.7 Ethics

An ethics form was completed and submitted with this dissertation to ensure that all ethical considerations were adhered and accounted for prior to the commencement of the research. The researcher does not envisage any risks to the participants of this study; however, it may cause inconvenience in taking the time to answer the questions as well as some profit loss for some participants regarding the time taken out of normal business working hours to answer the interview questions.

The researcher aims to keep the research questions as simple as possible and use the participants' time wisely to avoid any time constraint risks. There is also a possibility that participants may suffer some consequences to engaging in the research however to mitigate these risks, all primary data will be gathered in an anonymous fashion.

3.8 Conclusion

In this methodology chapter, the aim was to highlight the research methodology employed in this study and the rationale behind it. Furthermore, the chapter presents an opportunity to critically examine the constraints of the chosen methodology and research methods. Chapter four, "Data Analysis" will endeavour to present, investigate, and examine the results of the primary data described in this chapter.

Chapter Four - Data Analysis

4.1 Introduction

As detailed within “Chapter Three – Methodology” this chapter will look at discussing and examining the data acquired through the primary investigation. It is worth noting that the raw data gathered from the survey as analysed utilising the online questionnaire software platform.

Additionally, this chapter will look to delve into the analysis of the responses obtained from the two structured interviews, specifically designed to procure valuable insights from senior individuals within the NHS. To streamline this analysis, a comprehensive summary table is presented in “Appendix 5”, which enables the extraction of key findings from the interviewees shared perspectives. This approach supports in enhancing the overall comprehension of the data collection process, while also contributing to the overall understanding of the obtained data.

4.2 Aims and Objectives

The objective of this dissertation is to investigate, describe and understand the various factors that impact the adoption and implementation of strategic management within the NHS. It aims to examine how these factors influence the organisations transition towards privatisation and whether such changes impact the delivery of medical services, consequently affecting patient care.

The completion of this chapter will involve the following objective:

- 1) Assessment of the primary research conducted and facilitation towards the integration of findings within the reviewed literature.

4.3 Survey

4.3.1 Survey analysis

The survey encompassed three separate segments, each focusing on key areas: Strategic Management in the healthcare industry, the impact of privatisation within the NHS, and the future outlook of healthcare services in the NHS.

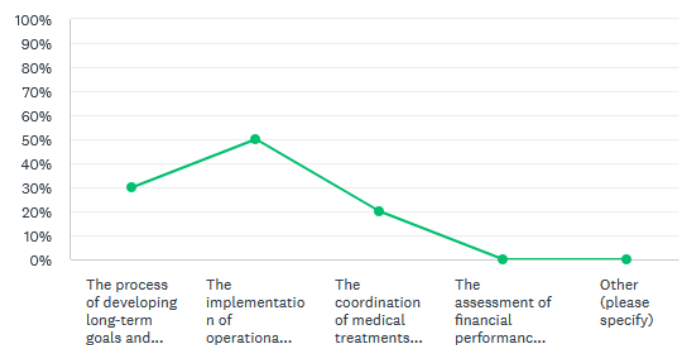
The study's responses, had a total of 10 surveys, which were successfully completed. Its worth noting that most participants completed all the sections of the survey. However, there was a slight decrease in the number of responses specially for section three, titled "Regulation and Future of Healthcare in the NHS". This section yielded some interesting data, potentially indicating that respondents were uncertain or unable to answer certain questions pertaining to their understanding of the future implications of privatisation for the NHS. Consequently, some questions within the section remained unanswered.

4.3.2 Strategic Management in Healthcare

The first section of the questionnaire aimed to assess the level of involvement and familiarity of NHS employees with strategic management within their organisation and healthcare in general. As per the aims and objectives outlined in Chapter three methodology, the requirement was to engage with a minimum of five professionals at various career levels who were employed within the NHS.

How would you define strategic management in the healthcare industry?

Answered: 10 Skipped: 0



ANSWER CHOICES	RESPONSES
▼ The process of developing long-term goals and objectives to achieve a competitive advantage in the healthcare sector.	30.00% 3
▼ The implementation of operational procedures to ensure efficient healthcare service delivery.	50.00% 5
▼ The coordination of medical treatments and patient care within a healthcare facility.	20.00% 2
▼ The assessment of financial performance and profitability in the healthcare industry.	0.00% 0
▼ Other (please specify) Responses	0.00% 0
TOTAL	10

Figure 5 - Q1: How would you define strategic management in the healthcare industry.

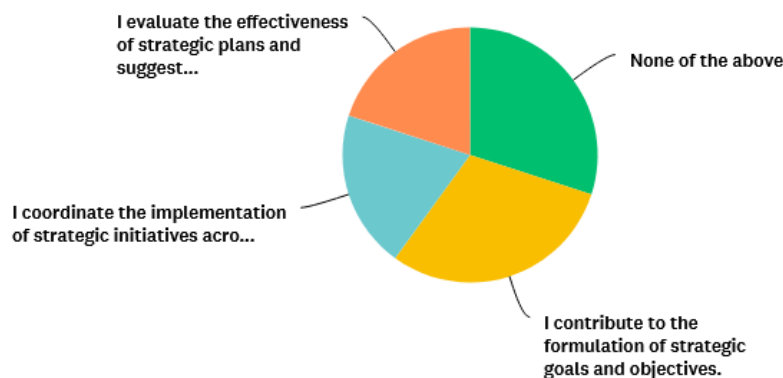
The objective of question one was to see the participants level of understanding and knowledge regarding strategic management within the healthcare sector. The responses to this specific question, would look assessed the participants familiarity with the fundamental concepts and practices of strategic management and its application within the healthcare sector. This question unlisted multiple choice for the answer selection process.

This question yielded a good response with 10 respondents, with the general consensus indicating that strategic management within healthcare entails “the implementation of operational procedures to ensure efficient healthcare service delivery”.

Figure 6 - Q2: What role do you play in the development and implementation of strategic planning within the NHS.

What role do you play in the development and implementation of strategic planning within the NHS?

Answered: 10 Skipped: 0

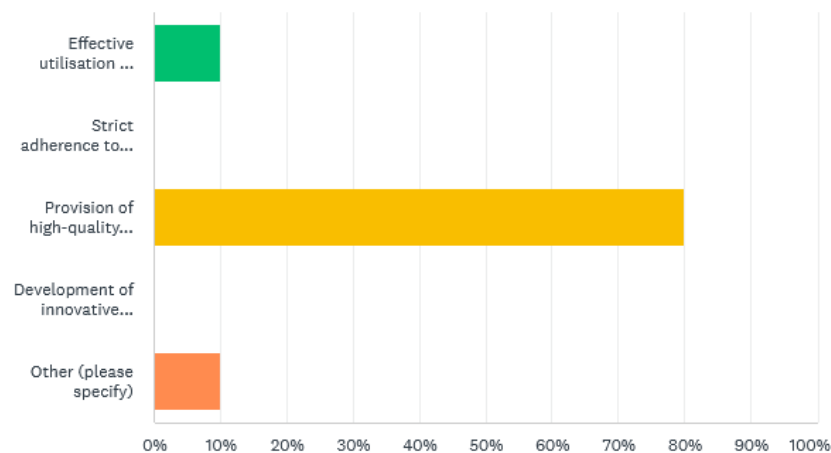


ANSWER CHOICES	RESPONSES	
None of the above	30.00%	3
I am responsible for overseeing the entire strategic planning process.	0.00%	0
I contribute to the formulation of strategic goals and objectives.	30.00%	3
I coordinate the implementation of strategic initiatives across different departments.	20.00%	2
I evaluate the effectiveness of strategic plans and suggest improvements.	20.00%	2
TOTAL		10

Question 2 shown in figure 6, was designed to gather insights on the degree of the respondent's participation and contribution to the development and implementation of strategic planning initiatives within the NHS. This question gives the research the ability to gain a comprehensive understanding of the participants roles in shaping the strategic direction within the NHS. The responses for this question were intriguing, as they were relatively balanced among the multiple-choice options. However, one notable observation was the absence of any individual responsible for overseeing the strategic planning process.

In your opinion, what are the key components of a successful healthcare strategy?

Answered: 10 Skipped: 0



ANSWER CHOICES	RESPONSES	
▼ Effective utilisation of resources, such as medical equipment and personnel.	10.00%	1
▼ Strict adherence to regulatory and compliance standards.	0.00%	0
▼ Provision of high-quality patient care and improved health outcomes.	80.00%	8
▼ Development of innovative healthcare technologies and solutions.	0.00%	0
▼ Other (please specify) Responses	10.00%	1
TOTAL		10

Figure 7 - Q3: In your opinion, what are the key components of a successful healthcare strategy.

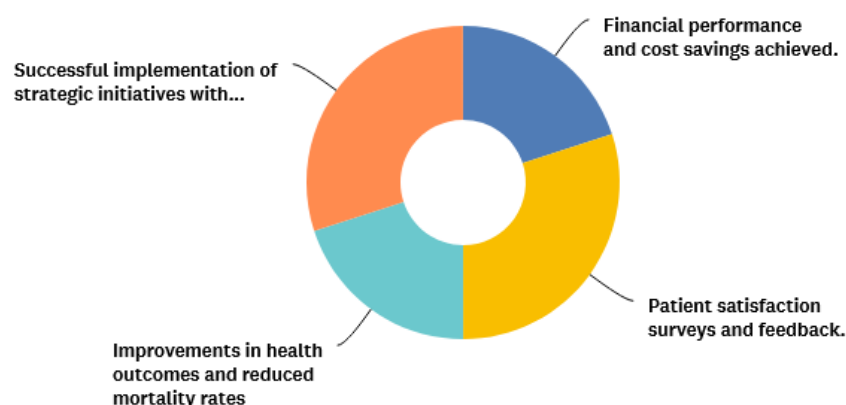
Question 3 aimed to delve into insights from employees within the NHS regarding the key elements that contribute to a successful healthcare strategy.

The findings revealed that a significant majority of 80% acknowledged the importance of delivering on high quality patient care and improving health outcomes. On the other hand, 10% of respondents emphasised the effective use of resources as the primary component, with the remaining 10% expressing “other” without filling in that section. The literature here suggests that most NHS employees still see patients as the number one priority when it comes to any form of healthcare strategy.

Figure 8 - Q4: How do you measure the success of a strategic plan within the NHS

How do you measure the success of a strategic plan within the NHS?

Answered: 10 Skipped: 0

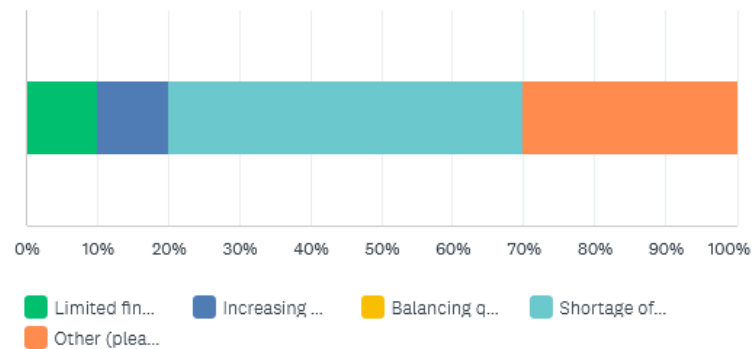


ANSWER CHOICES	RESPONSES
None of the above	0.00% 0
Financial performance and cost savings achieved.	20.00% 2
Patient satisfaction surveys and feedback.	30.00% 3
Improvements in health outcomes and reduced mortality rates	20.00% 2
Successful implementation of strategic initiatives within set timelines.	30.00% 3
TOTAL	10

Question 4 focused on exploring the viewpoints of NHS employees reading the most effective approach to measure the success of a strategic plan if implemented. Interestingly like question two of this section within the survey, this query generated a diverse range of responses with no clear consensus emerging. This may indicate that there are a range of preferred approaches to measure the effectiveness of strategic plans from a healthcare perspective.

What are some of the challenges facing healthcare organisations in terms of strategic management?

Answered: 10 Skipped: 0



ANSWER CHOICES	RESPONSES	
Limited financial resources and funding constraints.	10.00%	1
Increasing patient demands and expectations.	10.00%	1
Balancing quality of care with cost containment.	0.00%	0
Shortage of skilled healthcare professionals.	50.00%	5
Other (please specify)	30.00%	3
TOTAL		10

Figure 9 - Q5: What are some of the challenges facing healthcare organisations in terms of strategic management.

Question 5 aimed to explore the perspectives of NHS employees regarding the challenges encountered by the healthcare sector in terms of strategic management. The question generated some valuable feedback, revealing that 50% of respondents identified the shortage of skilled healthcare professionals as a significant challenge. Another 30% selected the other option and noted “all of the above” in the comments sections, indicating a recognition of multiple challenges for the sector, 10% highlighted increasing patient demand as a notable challenge, with the reaming 10% leaning towards the constraints imposed by limited finical resources and funding.

4.3.3 Privatisation in the NHS

The second section in the survey aimed to gain a comprehensive understanding of the NHS employees’ knowledge and perspective on privatisation. It explored multiple areas, including

healthcare service quality, accessibility, observed changes over time, effects on working conditions, job security concerns and the potential shift in patient outcomes. The questions in this section were designed to capture a detailed count on how privatisation was perceived and experienced within the NHS.

The purpose of question one within this section was to determine the participants understanding and definition of privatisation from the selection of multiple-choice answers. The results of this question were interesting, revealing that most respondents held the view that privatisation involved the transfer of ownership and management of healthcare services from government to private companies. It is also worth noting that the second majority of 30% of participants perceived privatisation as the inclusion of private sector entities alongside the public sector in delivering healthcare services within the NHS.

Figure 10 - Q1: What is your understanding of privatisation in the NHS.

What is your understanding of privatisation in the NHS?

Answered: 10 Skipped: 0

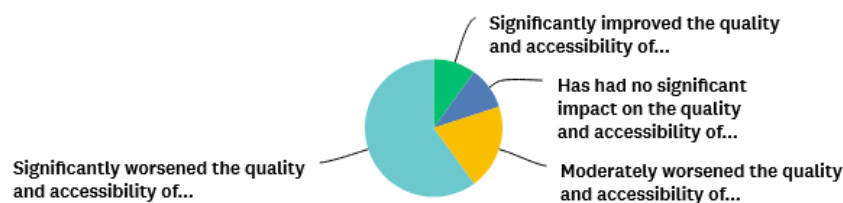


ANSWER CHOICES	RESPONSES
▼ The transfer of ownership and management of healthcare services from the government to private companies.	40.00% 4
▼ The introduction of market mechanisms and competition in the delivery of healthcare services within the NHS.	10.00% 1
▼ The involvement of private sector entities in the provision of healthcare services alongside public sector entities.	30.00% 3
▼ The potential outsourcing of certain healthcare functions or services to private companies.	10.00% 1
▼ Other (please specify) Responses	10.00% 1
TOTAL	10

The objective of question 2 was to inquire with the respondents about their perception regarding the impact of privatisation on the quality and accessibility of healthcare services within the NHS. The literature revealed a significant result, with an astonishing 60% of respondents expressing a belief that the introduction of privations into the NHS has had a profound negative impact on the quality and accessibility of healthcare services. This suggests a widespread concern among the participants regarding the consequences of the introduction of privatisation with the NHS.

How do you think privatisation has affected the quality and accessibility of healthcare services in the NHS?

Answered: 10 Skipped: 0



ANSWER CHOICES	RESPONSES
Significantly improved the quality and accessibility of healthcare services in the NHS.	10.00% 1
Has had no significant impact on the quality and accessibility of healthcare services in the NHS.	10.00% 1
Moderately worsened the quality and accessibility of healthcare services in the NHS.	20.00% 2
Significantly worsened the quality and accessibility of healthcare services in the NHS.	60.00% 6
Other (please specify)	Responses 0.00% 0
TOTAL	10

Figure 11 - Q2: How do you think privatisation has affected the quality and accessibility of healthcare services in the NHS

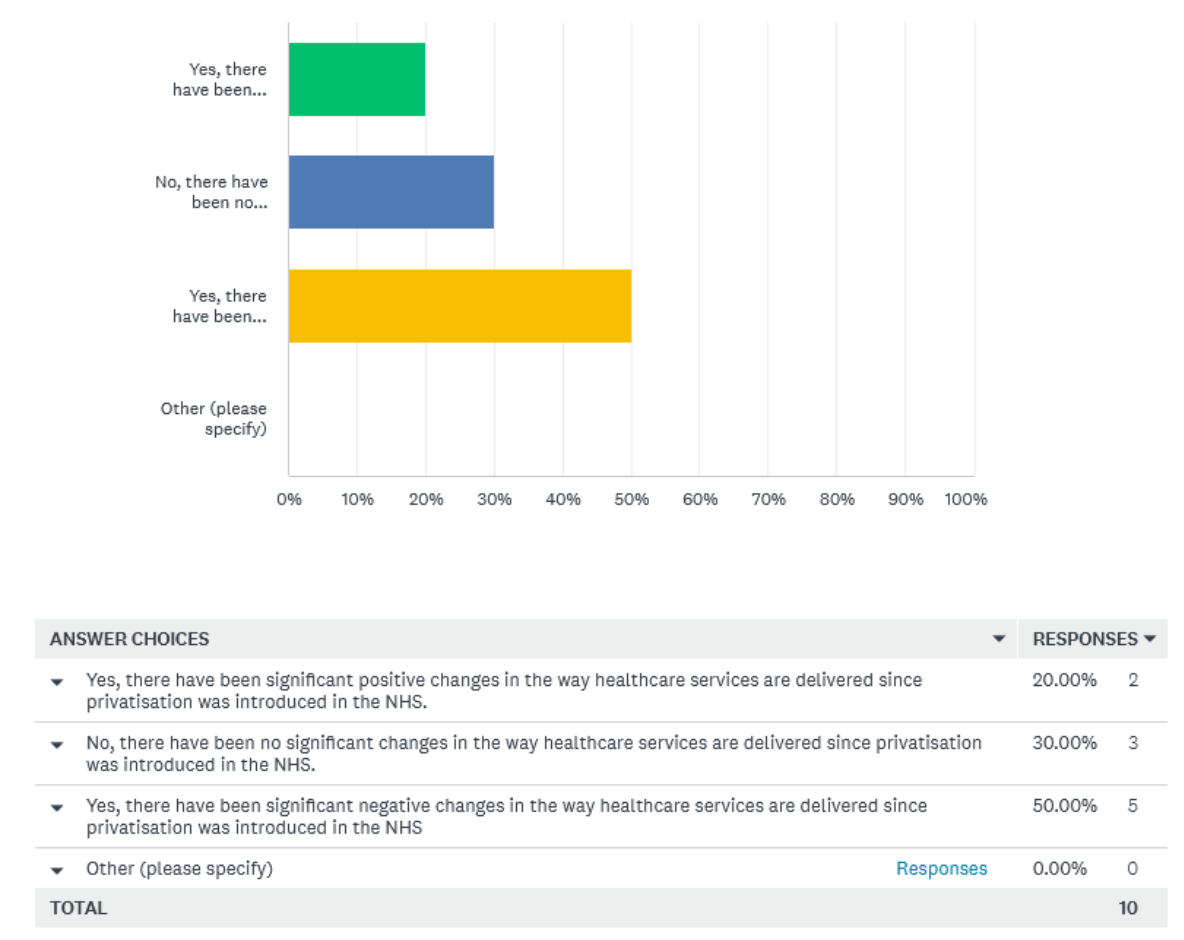
Question 3 sought to evaluate the firsthand observations of NHS employees regarding changes in healthcare delivery, following the introduction of privatisation within the sector. With the aim of acquiring insights into the specific nature of these changes and their perceived implications for healthcare delivery and practices. The response to this question were closely split, but the prevailing

consensus among 50% of participants indicated that the introduction of privatisation with the NHS has resulted in significant negative changes in the delivery of healthcare services. These negative changes are likely to impact various elements of patient care and potentially disrupt the continuity of their care.

Figure 12 - Q3: Have you observed any changes in the way healthcare services are delivered since privatisation was introduced in the NHS.

Have you observed any changes in the way healthcare services are delivered since privatisation was introduced in the NHS?

Answered: 10 Skipped: 0



Question 4 aimed to see the effects of privatisation on the working conditions of NHS employees and to identify any concerns they many have regarding their job security. This inquiry aimed to gather information into the potential changes in working conditions resulting from privatisation and to understand the perceived impact on overall job security of NHS employees. The results of this question showed that 60% of respondents perceived no impact of privatisation on their working

conditions and job security but the remaining 40% expressed a contrasting viewpoint, suggesting that privatisation has indeed worsened their working conditions and impacted job security.

These results could suggest a potential correlation between seniority within roles and the perception of privatisations impact. For example, it could be that the 60% who did not observe any significant impact of privatisation on their job security consists of more senior professionals within the NHS, such as consultants who are in established positions. On the other hand, the 40% who did identify negative effects of privatisation may primarily consist of junior doctors who have recently joined the NHS and more directly exposed to the struggles face by the healthcare system today.

How has privatisation impacted the working conditions and job security for healthcare professionals in the NHS?

Answered: 10 Skipped: 0

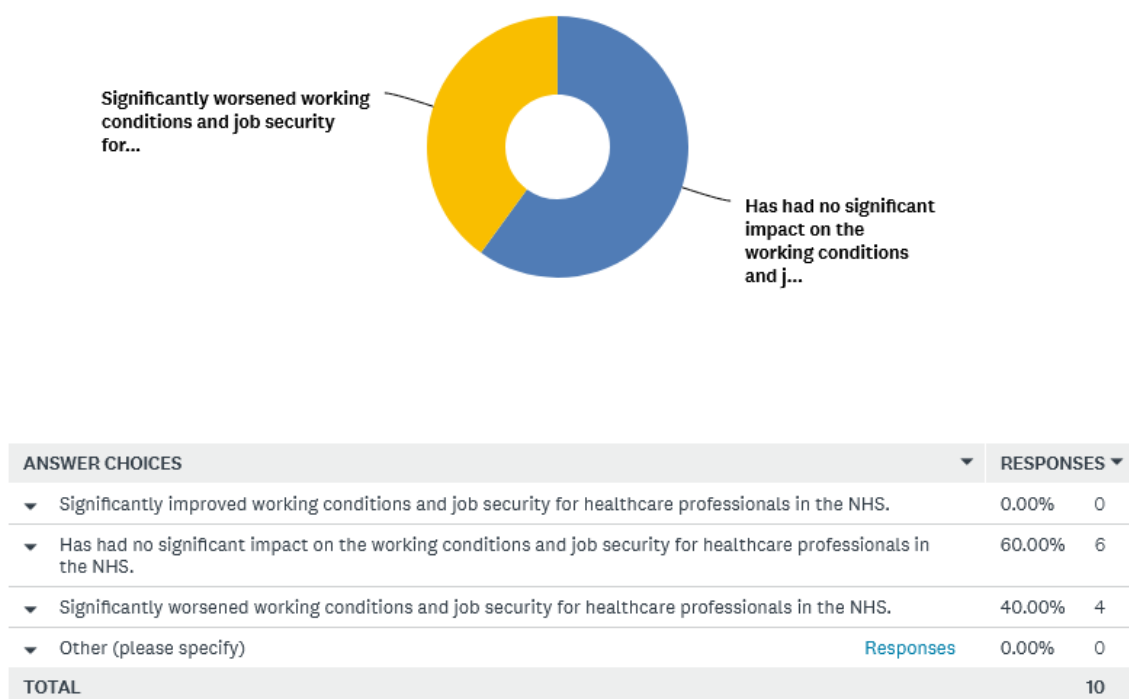


Figure 13 - Q4: How has privatisation impacted the working conditions and job security for healthcare professionals in the NHS

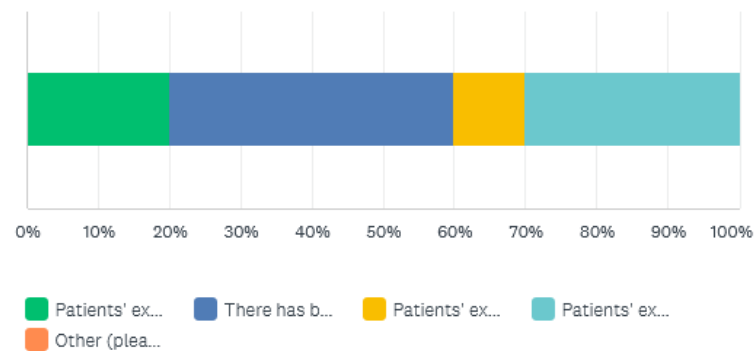
Question 5 aimed to explore the perspectives of NHS employees regarding the influence of privatisation on patient experience, outcomes, and overall care.

The results revealed fascinating findings, demonstrating a range of viewpoints among respondents. Among the participants, 20% held the belief that privatisation has positively impacted patient care within the NHS since its introduction. In contrast, 40% perceived no change in patient care experience, while 10% indicated a moderate decline. Notably 30% of the respondents strongly believed that patient experiences had significantly worsened because of privatisation. These outcomes highlight the complexity of the matter and reveal a divided perspective on the effects of privatisation on patient care within the NHS.

Figure 14 - Q5: How do you believe patients' experiences and outcomes have been affected by introducing privatisation in the NHS

How do you believe patients' experiences and outcomes have been affected by introducing privatisation in the NHS?

Answered: 10 Skipped: 0



ANSWER CHOICES	RESPONSES
▼ Patients' experiences and outcomes have significantly improved with the introduction of privatisation in the NHS.	20.00% 2
▼ There has been no significant impact on patients' experiences and outcomes with the introduction of privatisation in the NHS.	40.00% 4
▼ Patients' experiences and outcomes have moderately worsened with the introduction of privatisation in the NHS.	10.00% 1
▼ Patients' experiences and outcomes have significantly worsened with the introduction of privatisation in the NHS.	30.00% 3
▼ Other (please specify)	Responses 0.00% 0
TOTAL	10

4.3.3 Regulation and future of the NHS

The objective of the third section within the survey was to obtain insights from NHS employees regarding the necessary measures to ensure appropriate regulation of privatisation within the NHS. Additionally, this section aimed to explore employees' perspectives on the potential positive outcomes and drawbacks for the NHS associated with regulated privatisation in terms of maintaining quality, affordable and accessible healthcare services.

Furthermore, this section sought to investigate whether the introduction of privatisation has resulted in any changes in the roles of the government and the NHS in terms of oversight of healthcare services. Finally, it also aimed to understand employees' perceptions regarding the existence of a deficiency of strategic management within the NHS and whether this is driving the organisation towards its inevitable privatisation.

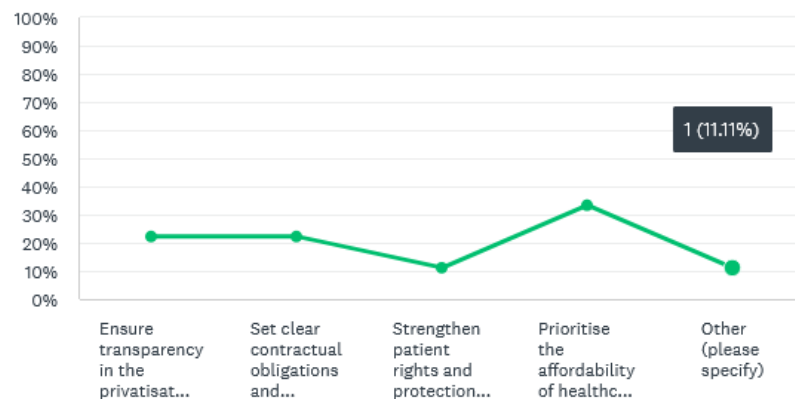
In this section, it was observed that one participant chose not to respond or skipped all questions. This observation may suggest a potential lack of comprehension regarding the topic or a perception of its insignificance or a lack of interest on the part of the respondent.

The first question within this section aimed to gauge an understanding of NHS employees regarding the most effective measures to put in place to ensure privatisation in the NHS is properly regulated for patients to continue receiving the best quality care.

Findings showed 22.22% advocated for prioritising transparency in the privatisation process, another 22.22% emphasised the importance should clear contractual obligation and performance indicators for private healthcare providers, only one respondent interestingly expressed the need to strengthen patient rights and protections within a privatised healthcare system. A notable 33.33% thought the prioritisation of affordable healthcare services is the best measure to put in place for a privatised healthcare system to regulate pricing structures to prevent excess profit making. One responded selected the "other" category and wrote "none of the above" with no additional commentary.

What steps should be taken to ensure that privatisation in the NHS is properly regulated and that patients continue to receive high-quality, affordable, and accessible healthcare services?

Answered: 9 Skipped: 1



ANSWER CHOICES	RESPONSES	
▼ Ensure transparency in the privatisation process, including clear guidelines for bidding and selection of private companies.	22.22%	2
▼ Set clear contractual obligations and performance indicators for private healthcare providers to ensure the delivery of high-quality and affordable services.	22.22%	2
▼ Strengthen patient rights and protections to safeguard their interests in a privatised healthcare system.	11.11%	1
▼ Prioritise the affordability of healthcare services by regulating pricing structures and preventing excessive profit-making.	33.33%	3
▼ Other (please specify)	11.11%	1
TOTAL		9

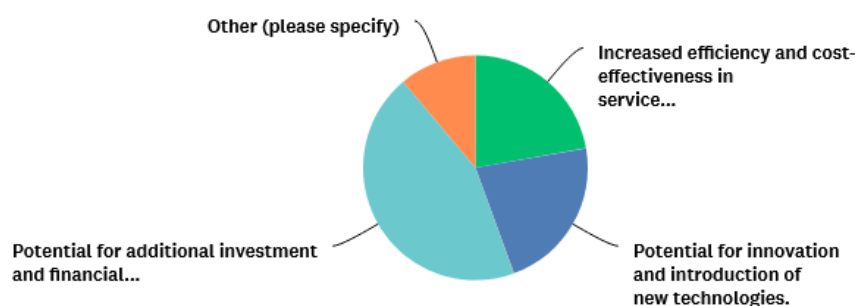
Figure 15 - Q1: What steps should be taken to ensure that privatisation in the NHS is properly regulated, and patients continue to receive high-quality, affordable, and accessible healthcare services

The objective of the second question was to evaluate the perceptions of NHS employees regarding the possible benefits that come with the privatisation of the NHS. Among the respondents, 44.44% believed that privatisation could bring additional investments, that may lead to increased financial resources, with 22.22% expressing the opinion that privatisation could enhance service delivery by introducing greater efficiency and cost effectiveness measures. Another 22.22% believed that privatisation would foster innovation through the introduction of new technologies within the NHS. Again, one participant chose the “other” category and indicated “none of the above” without providing any further explanation.

Figure 16 - Q2: What are the benefits of privatising healthcare services within the NHS.

What are the benefits of privatising healthcare services within the NHS?

Answered: 9 Skipped: 1

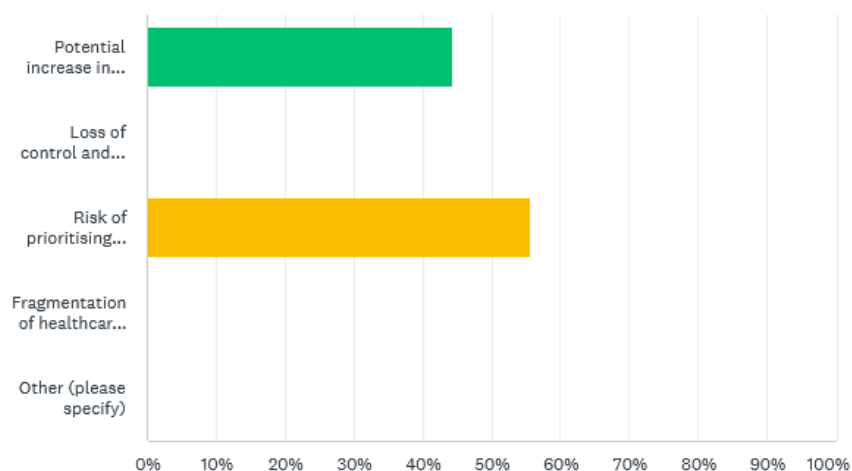


ANSWER CHOICES	RESPONSES	
▼ Increased efficiency and cost-effectiveness in service delivery.	22.22%	2
▼ Potential for innovation and introduction of new technologies.	22.22%	2
▼ Expanded choice and competition among healthcare providers.	0.00%	0
▼ Potential for additional investment and financial resources.	44.44%	4
▼ Other (please specify) Responses	11.11%	1
TOTAL		9

Like question 2, question 3 sought to assess the perspectives of NHS employees reading the potential disadvantages associated with the privatisation of the NHS. This question received a complete response from all participants bar one, and their views on this matter were clear. With a significant majority expressing concerns that privatisation of healthcare services will likely end up jeopardising the prioritisation of patient care in favour of profits margins and the remaining 44.44% of respondents agreeing that privatisation could lead to increased healthcare costs and inadequate services for patients.

What are the drawbacks of privatising healthcare services within the NHS?

Answered: 9 Skipped: 1



ANSWER CHOICES	RESPONSES	
▼ Potential increase in healthcare costs and inequalities.	44.44%	4
▼ Loss of control and accountability over service provision.	0.00%	0
▼ Risk of prioritising profit over patient care.	55.56%	5
▼ Fragmentation of healthcare services and coordination challenges.	0.00%	0
▼ Other (please specify)	Responses 0.00%	0
TOTAL		9

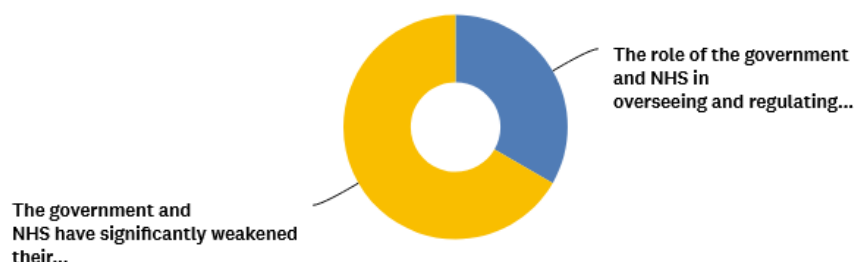
Figure 17 - Q3: What are the drawbacks of privatising healthcare services within the NHS

Question 4 aimed to examine whether employees observed any shifts in government interaction and regulations since the introduction of privatisation. It also sought to determine whether the NHS as an organisation has experienced deterioration as a result. The results were striking, with 66.67% of respondents receiving a weakening of government regulation and NHS oversight in healthcare services since the introduction of privatisation, which raises concerns about potential implications to patient care. This could suggest a potential gap in the effective monitoring and regulation of healthcare services, which could have an impact on the quality, safety and accessibility of care provided to patients.

Figure 18 - Q4: How do you think the role of government and the NHS has changed in terms of overseeing and regulating healthcare services since privatisation was introduced

How do you think the role of the government and the NHS has changed in terms of overseeing and regulating healthcare services since privatisation was introduced?

Answered: 9 Skipped: 1

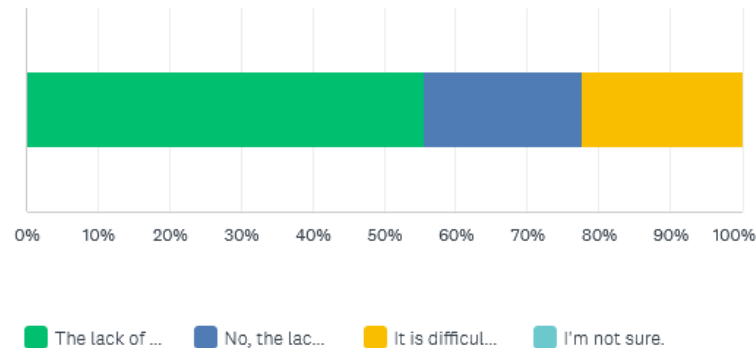


ANSWER CHOICES	RESPONSES
▼ The government and NHS have significantly strengthened their oversight and regulatory role in healthcare services since privatisation was introduced.	0.00% 0
▼ The role of the government and NHS in overseeing and regulating healthcare services has remained largely unchanged since privatisation was introduced.	33.33% 3
▼ The government and NHS have significantly weakened their oversight and regulatory role in healthcare services since privatisation was introduced.	66.67% 6
▼ Other (please specify) Responses	0.00% 0
TOTAL	9

The final question in this section aimed to explore the perspectives of NHS employees regarding the role of strategic management in pushing the organisation towards privatisation, building upon their responses from section 1 of the survey. The findings indicate that most respondents perceive strategic management as a contributing factor in the move towards privatisation, although they also acknowledge the influence of other factors. 22.22% of respondents expressed the challenge of establishing a direct correlation between privatisation and strategic management, while an equal 22.22% strongly disagreed with the notion that the lack of strategic management within the NHS played any role in driving privatisation.

Do you think the lack of strategic management within the NHS is pushing it towards privatisation?

Answered: 9 Skipped: 1



ANSWER CHOICES	RESPONSES	
▼ The lack of strategic management within the NHS may be a contributing factor, but there are other factors as well.	55.56%	5
▼ No, the lack of strategic management within the NHS is not a driving force behind privatisation.	22.22%	2
▼ It is difficult to determine the direct relationship between the lack of strategic management and the push towards privatisation in the NHS.	22.22%	2
▼ I'm not sure.	0.00%	0
TOTAL		9

Figure 19 - Q5: Do you think the lack of strategic management within the NHS is pushing it towards privatisation

4.4 Interview

4.4.1 Interview analysis

The interviews were transcribed in real time during the interview process, as the interviewees were not comfortable with an audio recording to be transcribed later. Full interview transcriptions are available in “Appendix 3 and 4”. The interview data has been compiled into a summary table to aid the analysis which is available in “Appendix 5”.

The interview sample consisted of two practising NHS consultants of different ages, a senior and a junior consultant, who would provide diverse perspectives, in-depth insights, practical experiences, and valuable context to thoroughly examine the factors influencing strategic management practises

within the NHS and their potential implications for medical service delivery and overall patient care in the context of potential privatisation.

The following analysis will delve into some of the interview questions and provide a detailed breakdown of the replies obtained from the participants. To improve accuracy and dependability, the analysis will be supplemented with actual quotations from the interviews.

Q - How do you measure success of a strategic plan within the NHS?

Summary: The consultants' responses differed here however the varied viewpoints suggest that measuring success of a strategic plan within the NHS can be approached in different ways with considerations for both specific outcomes and broader indicators of organisational effectiveness, however patient satisfaction from both respondents was the key performance indicator.

Consultant 1 – “Improved patient outcomes, cost savings, staff wellbeing and retainment”.

This also tallies with figure 8, indicating patient satisfaction stands as a critical barometer of the quality of care and services provided by healthcare institutions.

Q - Based on your experience, what are the consequences of mismanagement or lack of strategic management within the NHS?

Summary: Both consultants acknowledge the negative consequences of mismanagement or poor strategic planning in the NHS, consultant 1 outlines several repercussions that may develop when strategic management is not implemented successfully, posing various organisational challenges. Consultant 2, on the other hand, emphasises the potentially life-threatening ramifications for patients, showcasing the potential seriousness of the consequences if a robust strategic plan is not present.

Consultant 2 – “Well as a doctor you are dealing with people's lives and the consequences of lack of strategy and planning have the potential to be quite severe and result in patient deaths”.

The responses collected appear to be inline with the findings of the literature review section 2.5 “Consequences of Mismanagement”. They echo the sentiment that when an organisation lacks proper strategic management or fails to implement it effectively, it can lead to significant repercussions for its stakeholders. These consequences span a broad spectrum of importance, including reduced operational efficiency or productivity.

Q - What are your thoughts on strategic management impacting privatisation within the NHS, do you think it plays a role?

Summary: Both consultants agree that strategic management plays a role in impacting privatisation within the NHS, but their responses differ in emphasis and perspective. Consultant 1 believes that the lack of strategic management is accelerating the process of privatisation, which could impact how healthcare is delivered. On the other hand, Consultant 2 acknowledges that strategic management does impact privatisation within the NHS, particularly in the context of contracts with private businesses, highlighting that some individuals may benefit financially from privatisation thus leading to the implementation of strategies that push towards it.

Consultant 2 – “I believe strategic management impacts privatisation within the NHS in some form, for example when it comes to contracts with private business there are individuals in the NHS that benefit greatly financially and thus will put strategies in place to push towards privatisation”.

These responses line up with figure 19, where the results showed that although participants also recognised the effect of other factors, 55.56% saw strategic management as a contributing factor in the drive towards privatisation within the NHS.

Q - In your opinion what are the benefits and/or drawbacks of privatising healthcare services within the NHS?

Summary: Both experts emphasised and agreed on the danger of creating unequal access to healthcare based on socioeconomic position. Consultant 1 recognised certain possible benefits of privatisation, consultant 2 was more hesitant and concerned about the overall implications of such a change this disparity may come from differing age group demographic between the consultants.

Consultant 1 – “Pros: Rapid access to healthcare, greater technological advancement, better pay and benefits for staff, more money for equipment and better infrastructure. Cons: Patient is less of a priority over the bottom financial line, push towards more expensive treatments, drugs, surgeries etc to maximise profits, two class health services; one for those who can afford extra, and one for those who cannot”.

Their opinions aligned with figure 16, where 44.44% of respondents believed that privatisation could bring additional investments, that may lead to increased financial resources for the NHS and figure 17, where 55.56% expressing concerns that privatisation of healthcare services will likely end up jeopardising the prioritisation of patient care in favour of profits margins and the remaining 44.44% of respondents agreeing that privatisation could lead to increased healthcare costs and inadequate services for patients.

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Q - In your opinion has privatisation affected the quality and accessibility of healthcare services in the NHS?

Summary: Both consultants' responses emphasise the adverse effects of privatisation on healthcare accessibility and quality within the NHS, consultant 1 highlights the existence of a two-tier system, where individuals with sufficient funds or private insurance can access healthcare more quickly than those without, similarly, consultant 2 expresses concern about the unequal access to healthcare services. This observation suggests that privatisation has contributed to disparities in healthcare access based on financial means, where individuals who possess greater financial resources are likely to secure better access to medical care, treatments, and facilities. They can afford to pay for premium services, skip queues, and opt for specialised treatments that may not be within reach for those with limited financial means.

Consultant 2 – “Yes, those who hold private medical insurance or can pay for medical care, often access healthcare services far quicker than those who do not. With those who do not waiting over several months if not years for treatment. The quality of services is also starting to deteriorate with doctors opting to work for private organisations or leave the NHS entirely for better pay or work-life balance”.

The response from consultant 2 also highlights that the effects of privatisation reach further than patients, as the deteriorating state of the NHS prompts employees to contemplate transitioning to the private sector. Recent research reported in the Daily Mail, by a statutory body that collects data on private healthcare, shows a noticeable increase in private healthcare activity with 12,200 consultants engaging in private procedures in 2021 and 820,000 instances of private in-patient and day-case admissions in 2022, (Wooller, 2023).

Q - What steps do you think should be taken to ensure privatisation in the NHS is properly regulated and that patients continue to receive high quality and affordable care?

Summary: Both consultants offer differing perspectives on the proper regulation of NHS privatisation to ensure the maintenance of high-quality and affordable patient care. Consultant 1 conveys a sense of resignation, acknowledging the ongoing privatisation process and suggesting that its transparency is key to effective regulation. Consultant 2, on the other hand, emphasises the need for stringent measures, such as holding private providers to NHS standards and ensuring transparency in contract bidding. Both responses reflect a recognition of the complexities surrounding privatisation and its potential impact on patient care, with consultant 2's stance leaning towards proactive regulation to safeguard healthcare quality.

Consultant 1 – “Nothing. The NHS is already being privatised and the government should simply do it within 5 years. If this process is above board and transparent, then regulation can be effective. If we continue to progress as we are, with many deals made under the table and without public scrutiny, the situation is going to get much worse”.

4.5 Conclusion

The data acquisition process comprised of 10 respondents from the survey all employed by the NHS, complemented by two semi-structured interviews conducted with two consultant doctors.

80% of NHS personnel recognised the importance of delivering on high quality patient care and improving health outcomes, as fundamental elements that contribute to a successful strategic plan. Ultimately seeing patients as the number one priority when it comes to any form of healthcare strategy.

50% of respondents identified the shortage of skilled healthcare professionals as a significant problem when it came challenges encountered by the NHS in terms of strategic management, which can hinder operational capacity for the healthcare system. An additional 30% indicated a recognition of multiple challenges for the sector.

55.56% of respondents perceived strategic management as a contributing factor in the move towards privatisation but acknowledged the influence of several other factors.

50% of participants indicated that the introduction of privatisation with the NHS has resulted in significant negative impacts to medical service delivery. These negative changes are likely to impact various elements of patient care and potentially disrupt the continuity of their care.

60% of respondents expressing a belief that the introduction of privatisation into the NHS has had a profound negative impact on the quality and accessibility of healthcare services. Suggesting a widespread concern among the participants regarding the consequences of the introduction of privatisation with the NHS.

30% of the respondents strongly believed that patient experiences had significantly worsened since the introduction of privatisation to the NHS.

33.33% of respondents thought the prioritisation of affordable healthcare services is the best measure to put in place for a privatised healthcare system to regulate pricing structures to prevent excess profit making.

Interviewees noted the importance of strategic management planning within the NHS, acknowledging its influential role in the ongoing industry shift towards privatisation. There was consensus among the interviewees that privatisation does indeed impact medical service delivery, predominantly in an adverse manner. These effects, in turn, contribute to impediments in ensuring comprehensive patient care.

The viewpoints expressed during the interviews align with the trends observed in the survey data, thus highlighting the potential consequences of privatisation on healthcare services and patient well-being within the NHS. The agreeing views between interview insights and survey outcomes supports the findings, reinforcing the notion that strategic management and privatisation are interlinked factors with profound implications to patient care.

Chapter Five - Conclusion and Recommendations

5.1 Introduction

This chapter aims to provide a thorough and critical assessment of the relationship between the implementation of strategic management practises within the NHS, its potential impact on the organisation's shift towards privatisation, and the potential consequences for medical service delivery and overall patient care. To accomplish this purpose, the chapter begins by revealing the study's inherent limitations in terms of research technique and approach. The study hopes to retain transparency and the credibility of its conclusions by acknowledging these limitations.

The study objectives are then thoroughly evaluated after the examination of its limitations. Each aim is evaluated for its relevance and usefulness to the larger inquiry into the effects of NHS privatisation on patient care. This evaluation ensures that the research remains focused and on track with its original goal.

The chapter concludes with a comprehensive conclusion that summarises the implications of the study's findings for the continuing debate about NHS privatisation and its potential consequences for patient care. An array of well-founded NHS recommendations are presented based on the accumulated evidence and insights. These proposals aim to reduce the risks associated with privatisation while also protecting the quality and accessibility of healthcare services for patients. The chapter aims to promote informed decision-making within the NHS to avoid any degradation in patient care that may result from the pursuit of privatisation.

5.2 Limitation of the Study

There are some limits to the research technique and approach that should be noted. One significant disadvantage is that the study was carried out by a postgraduate student with limited financial resources, in full-time employment and workload, with a deadline to complete the assignment. To alleviate this concern, an experienced dissertation supervisor has been hired to monitor the researcher's progress and decrease the possibility of researcher error or bias during the study process. Furthermore, using the method provided in Chapter three, the supervisor can verify the accuracy of the data collected.

Certain constraints in the research design should be considered. For instance, the size of the sample used for surveys, as well as the effective recruitment of practising NHS consultants for the interview process within the timeframe specified, was challenging. The small number of participants may also have ramifications for the study, as a bigger and more diverse sample could have provided a more thorough perspective.

Furthermore, administering surveys online without the researcher's presence introduced a possible constraint. The researcher's capacity to encourage responders and assure conscientious and precise

responses was hampered by the lack of face-to-face engagement. Because of the lack of direct participation, various participants may have interpreted the survey questions differently, thus adding subjectivity into the obtained data.

Despite these constraints, the study attempted to maximise data accuracy and reliability by careful planning and adjusting when necessary. The researcher took steps to address potential biases and increase the rigour of the research design. Despite certain difficulties, these constraints were acknowledged and controlled to assure the reliability and validity of the study's conclusions.

5.3 Achievement of Aims

The researcher believes all four research objectives outlined in chapter one section 1.2, have been successfully met through this investigation. The initial objective outlined in chapter two involved a comprehensive review of the literature relating to strategic management, its application across public and private sectors. Highlighting the potential repercussions if there was a lack of strategic management in the healthcare sector. Given the extensive scope of the subject matter, the literature was carefully evaluated to ascertain the most relevant components for inclusion in the literature review.

Chapter three put forward the research methodology employed in the primary investigation. The surveys chosen sample would greatly contribute to understanding the potential correlations between strategic management, privatisation, and medical service delivery in the NHS. The survey questionnaire received a positive response with 10 responses surpassing the required 5, the researcher was hoping for more with the survey sent to over 50 participants however the net results was 10. Descriptive statistics and the analysis tool from the online survey platform were used in the data analysis of the results. Interviews were conducted with two NHS consultant doctors, who made up the interviewee group, to gain deeper insights from subject matter experts on the research topic. The interview data was then broken down and compiled in a summary table available in “Appendix 5”.

In chapter four, the collected data underwent thorough examination to assess findings and draw conclusions. These findings aim to play a crucial role in developing the general theory and providing the foundation for formulating recommendations that the NHS may take into consideration. The discussion that follows in this chapter tries to provide offer suggestions and encourage further input from various NHS stakeholders, including staff members and practitioners. This approach is designed to generate constructive debate and facilitate the evolution of strategies for the future.

5.4 Conclusion

Over the course of numerous decades, the NHS has undergone significant deterioration, with the organisation's trajectory appearing to be characterised by a downward trend for the foreseeable future. This decline has continued to manifest in a multitude of ways, include recurring employee strikes aiming for improved compensation and consultant doctors making the choice to leave the NHS for more favourable opportunities abroad or within the private sector. The result is patients now grappling with prolonged waiting times, spanning several years due to the accumulating backlog of other patients still awaiting medical treatment. This paper was written to delve into the underlying factors contributing to the cornering situation but also sought to explore potential avenues and recommendations for the organisation to have a more positive future.

The research highlights a significant disparity on how strategic management principles are applied within the public and private sectors, as highlighted in the literature review section 2.4. The survey results also indicate a possible lack of comprehensive understanding among NHS employees regarding strategic management, this could be attributed to various factors, including the complexity of strategic management concepts, limited exposure to formal strategic planning processes or the potential variations in the extent to which strategic management is communicated and integrated within the NHS.

Despite the limited role that strategic management plays in the current operations of the NHS, the research indicates it plays a meaningful part in the ongoing process of privatisation within the

organisation. This key insight was highlighted in figure 19, with 55.56% of respondents perceiving that strategic management was a contributing factor in the move towards privatisation and corroborated by the two consultants in the interview process, showcasing the nuanced interaction between strategic management and the changing landscape of NHS privatisation.

The results also revealed a concerning reality, that privatisation is noticeably negatively impacting the existing NHS structures and medical service delivery, as shown in figure 12, where 50% of respondents agreed that the introduction of privatisation with the NHS has resulted in significant negative changes in the delivery of healthcare services. These views were corroborated by the younger consultant however the other more senior noted, “No, we do this best we can with the tools available to us however morale is far lower than I’ve ever seen in my lifetime within the NHS, especially among junior doctors and Nurses. With strikes occurring on a regular basis as you will see from the news, which in-turn puts pressure on consultants, who provide cover the junior doctors”.

These findings serve as a strong reminder of how the various elements within healthcare system are interconnected and any change may have a knock-on effect on the other, this poses a significant risk for the NHS because any disruption or shortcoming in delivery medical services can lead to adverse effects on patient care.

In summary the investigation sheds light on the relationship between strategic management, the ongoing privatisation process, and the delivery of medical services in the NHS. It highlights the need for a thorough review of strategic approaches with the NHS and the recognition of the broader impact on patient care. Highlighting the importance of aligning the NHS’s organisational strategies with the overarching committed to patient welfare, as it no longer seems to be the case. The findings of this paper serve as strong call to address the challenges directly and head on for those in charge of the NHS to hopefully lay some groundwork for a more resilient, patient focused future for the organisation.

5.5 Recommendations

The NHS must take intentional action to strengthen the integration of strategic management principles throughout its operations to clear the path for significant improvements. Initiating measures to promote the understanding and application of strategic management principles, can optimise resource allocation and improving patient care outcomes, not to mention foster efficient decision making and organisational agility.

The NHS must craft methods to navigate the impact of privatisation on the organisations core fundamentals and most importantly safeguard patient needs. While privatisation offers several benefits, it also introduces several complexities that have compromised the values of the NHS, as highlighted by the study, most notably quality, accessibility and equity in patient care.

Maintaining the NHS's standing as a patient-centred organisation is crucial during the current privatisation process. Regardless of changes caused by privatisation, strategies must put the patient experience first. To protect patient satisfaction and wellbeing, procedures such as patient feedback loops, demanding quality assessments, and strict service level agreements with private partners can be explored.

Regulatory frameworks must be improved, to navigate the privatisation process effectively. Strategies should include strengthening legislation governing the participation of private sector entities in healthcare. The objectives of the NHS must be upheld, and the regulations must place a priority on transparency, uphold quality standards, and ensure fair competition. They must also permit useful private sector contributions.

The effects of privatisation on patient care should be continuously evaluated and assessed to take a proactive position. This can be achieved through reliable data collecting, analysis, and reporting methods. Regular evaluations allow for quick modifications and actions should any negative impacts manifest.

To avoid the quote “two-tier system” of healthcare access brought on by privatisation, strategies must actively address potential barriers to accessibility. Focus should be placed on ways to keep healthcare affordable for all, such as subsidisation programmes, focused outreach to marginalised groups, and partnerships with the private sector that keep a robust service network in place.

As privatisation progresses, effective public participation and awareness efforts are essential. It is crucial to engage patients in proactive communication while stressing the maintenance of quality and accessibility. Town halls, community forums, and educational initiatives can promote awareness and encourage public participation in determining the course of the evolution of healthcare delivery.

When it comes to private sector participation within the NHS strong contractual agreements should take utmost importance. Negotiating agreements that carefully highlight performance standards, quality benchmarks, and dispute resolution procedures should be the focus of strategies.

The NHS must also address workforce concerns because like any other organisation its vitality relies on skilled workforce, yet a significant issue for the organisation is the continual exodus of seasoned medical professionals. Tackling the issue requires a multifaceted approach but ultimately must be one that supports employee wellbeing, this can be achieved by addressing grievances, enhancing compensation, and fostering environments that promote professional growth.

Retaining medical professionals is the largest challenge face the NHS today, with fair compensation and benefits emerging as the pivotal factors in addressing the issue. To help tackle this issue regular benchmarking exercises can ensure competitive pay in the healthcare sector, and enticing incentives like healthcare coverage and professional growth chances to boost employee happiness and loyalty.

Fostering a healthy work environment requires recognising individuals' efforts and offering clear paths for career progression. In the private sector professionals are encouraged to continue being devoted to the organisation by the implementation of recognition programmes and organised career development plans, this should be no different in the NHS.

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Appendix 1 - Gantt Chart

Activity - 2023	Feb	March	April	May	June	July	Aug	Sep
Research gathering/ questionnaire/ interviews								
Research gathering/ questionnaire/ interviews								
Research gathering/ questionnaire/ interviews								
Analysis of data								
Literature Review								
Write Up								
Draft Submission								
Rework								
Final Submission								

Appendix 2 - Sample Survey & Interview Questions

How would you define strategic management in the healthcare industry?

In your opinion, what are the key components of a successful healthcare strategy?

What role do you play in the development and implementation of the strategic planning within the NHS?

How do you measure the success of a strategic plan within the NHS?

In your opinion, what are some of the biggest challenges facing healthcare organisations when it comes to strategic management?

How does the NHS ensure that strategy remains relevant and adaptable in the face of a rapidly changing healthcare landscape?

Do you think the medical industry faces specific or unique challenges in implementing forms of strategic management?

From your experience what are the consequences of mismanagement or lack of strategy within the NHS?

From your experience can you describe whether you think mismanagement impacts medical service delivery?

Do you think the lack of strategic management within the NHS, is pushing it towards privatisation?

What is your understanding of privatisation in the NHS?

In your opinion, what are the benefits and drawbacks of privatising healthcare services within the NHS?

How do you think privatisation has affected the quality and accessibility of healthcare services in the NHS?

Have you personally noticed any changes in the way healthcare services are delivered since privatisation has been introduced in the NHS?

How do you think privatisation has impacted the working conditions and job security for healthcare professionals in the NHS?

How do you think the role of the government and the NHS has changed in terms of overseeing and regulating healthcare services since privatisation was introduced?

How has privatisation impacted the financial sustainability of the NHS and its ability to provide affordable and accessible healthcare services?

How do you think patients' experiences and outcomes have been affected by introducing privatisation in the NHS?

In your opinion, what steps should be taken to ensure that privatisation in the NHS is properly regulated and that patients continue to receive high-quality, affordable, and accessible healthcare services?

How do you think the future of healthcare in the NHS will be affected by privatisation, and what steps should be taken to ensure that it remains sustainable and effective for all stakeholders?

Appendix 3 - Interview 1 Transcript

Consultant 1

I: How long have you been a consultant within the National Health System?

C1: 2 years

I: Describe how you define strategic management and how is it defined within the healthcare sector?

C1: A set of goals designed to fulfil an organisation's needs.

I: In your opinion, what do you believe are the key components that can make a healthcare strategy successful?

C1: Patient centred approach, Staff involvement and financial management

I: May you tell me about your role in the development and implementation of strategic planning with the NHS, if you have one?

C1: Allocation of resources in the clinical setting, supervision of staff and data collection for later analysis and results.

I: How do you measure success of a strategic plan within the NHS?

C1: Improved patient outcomes, cost savings, staff wellbeing and retainment.

I: What do you consider to be the biggest challenges that NHS or healthcare organisations face, when it comes strategic management?

C1: A very demoralised and exhausted, under paid work force. The work force is the biggest asset to any organisation and the NHS is no different. It matters not what strategies and plans are in place, the workforce is too disenfranchised to allow for any real change to take place.

I: How does the NHS ensure its strategies remain relevant and adaptable in the face of the rapidly changing healthcare landscape?

C1: Collaboration with outside organisations and companies, making sure staff stay up to date with current clinical practice by attending courses and conferences, being involved in under and post graduate education of medical and nursing students.

I: Based on your experience, what are the consequences of mismanagement or lack of strategic management within the NHS?

C1: Poorer patient outcomes and satisfaction rates, staff moral being impacted leading to problems with retainment, a divergence of personal goals between managers / leaders and the more junior levels of staff, an increased in financial mismanagement and waste, poor resources and infrastructure.

I: Do you believe that the lack of strategic plans or mismanagement can have a significant impact on the delivery of medical services?

C1: Absolutely per my last response, this is evident within the NHS today.

I: What are your thoughts on strategic management impacting privatisation within the NHS, do you think it plays a role?

C1: Yes, the lack of strategic management is accelerating the privatisation process.

I: Can you explain your understating of privatisation in the context of the NHS?

C1: The allocation of medical contracts to third party companies which are privately owned. This could be contracts for the supply of PPE, or for the running of entire hospitals.

I: In your opinion what are the benefits and/or drawbacks of privatising healthcare services within the NHS?

C1: Pros; Rapid access to healthcare, greater technological advancement, better pay and benefits for staff, more money for equipment and better infrastructure.

Cons: Patient is less of a priority over the bottom financial line, push towards more expensive treatments, drugs, surgeries etc to maximise profits, two class health services; one for those who can afford extra, and one for those who cannot.

I: In your opinion has privatisation affected the quality and accessibility of healthcare services in the NHS?

C1: Yes. There is already a 2-tier system. If you have the funds / insurance, you can access healthcare more quickly.

I: Have you noticed any changes in the way healthcare services are delivered since the introduction of privatisation within the NHS?

C1: Yes. In addition to the 2-tier system, more necessities are being outsourced to other companies; for example, NHS parking is now fully privately owned in most cases meaning patients and staff have to pay extremely high fees.

I: What impact has privatisation had in the NHS on working conditions and job security, if any?

C1: It has made them worse. More staff are leaving to work in the private sector to the detriment of the NHS.

I: Has the role of government changed in overseeing and regulating healthcare services in the NHS since privatisation was introduced?

C1: Not to my knowledge.

I: What impact has privatisation had on the financial stability of the NHS and its ability to provide affordable and accessible healthcare to all, in your opinion?

C1: It has made it much worse. There is little transparency currently which is why the system is so bad. The government should just announce its going to privatise the NHS so that we can be done with this slow death more quickly. For example, community medicine is now very privatised which is the reason for the NHS bed crisis.

I: How do you think patient experience has been affected by the introduction of privatisation in the NHS?

C1: Significantly worse. For example, the long waiting times for treatment are due to under staffing and under funding of the NHS.

I: What steps do you think should be taken to ensure privatisation in the NHS is properly regulated and that patients continue to receive high quality and affordable care?

C1: Nothing can be done. The NHS is already being privatised and the government should simply do it within 5 years. If this process is above board and transparent, then regulation can be effective. If we

continue to progress as we are, with many deals made under the table and without public scrutiny, the situation is going to get much worse.

I: Finally in your opinion, what do you think the future of healthcare looks like in the NHS with the introduction of privatisation, and how can it remain sustainable and effective for all stakeholders (i.e., patients, government, private business and employees)?

C1: I think the immediate future looks bleak. The lack of transparency in the privatisation process will continue to negatively impact the whole system and staff.

In the long run, provided will adopt a more European model (mixed state and private finance) as opposed to a USA model, it will be beneficial.

To keep it attractive to the public, it must provide safe, effective, and timely access to healthcare that's affordable. Private business will of course profit, but it must never be at the expenses of the patients in any way. The employees will see its value if work life balance improves and if pay is much better than current rates. A focus on training, and shared values must still remain in terms of career progression to ensure that the UK remains the most education focused health care system in the world.

Appendix 4 - Interview 2 Transcript

Consultant 2

I: How long have you been a consultant in the National Health System?

C2: Over 20 years

I: Describe how you define strategic management and how is it defined within the healthcare sector?

C2: My understanding of strategic management in the NHS is that it is about developing and implementing long-term plans. It involves identifying areas of improvement for patients where possible however today its more about opportunities of growth and cost saving exercises for trusts.

I: In your opinion, what do you believe are the key components that can make a healthcare strategy successful?

C2: A successful health care strategy must include set goals, effective communication, and a commitment to continuous improvement to deliver the best care possible for our patients.

I: May you tell me about your role in the development and implementation of strategic planning with the NHS, if you have one?

C2: I have been involved in various committees and initiatives during my time in the NHS with a strong focus on improving patient care outcomes. As a consultant my role is to also provide support for the junior doctors and give valuable input where possible to make sure they are adhering to rules and regulations patterning to patient safety and quality improvement, which are key components to any strategic plan.

I: How do you measure success of a strategic plan within the NHS?

C2: Well traditionally an indicator that things were successful within the hospital would be a low mortality rate there were no strategic plans in place. The most important factor was patient outcomes with the goal of improving patient health and wellbeing. These days however there are a range of metrics that the NHS uses to measure successful strategies, including staff engagement, staff satisfaction, financial performance, financial efficiency, and patient questionnaires.

I: What do you consider to be the biggest challenges that NHS or healthcare organisations face, when it comes strategic management?

C2: For me it's the healthcare landscape because it is in a constant state of change, there is no one glove fits all strategy for the NHS. This comes down to mostly ever-changing government policies.

I: How does the NHS ensure its strategies remain relevant and adaptable in the face of the rapidly changing healthcare landscape?

C2: The NHS will need to be agile and adaptable but with thousands of trusts under one banner, in such an enormous organisation this is going to be very challenging.

I: Based on your experience, what are the consequences of mismanagement or lack of strategic management within the NHS?

C2: Well as a doctor you are dealing with people's lives and the consequences of lack of strategy and planning have the potential to be quite severe and result in patient deaths.

I: Do you believe that the lack of strategic plans or mismanagement can have a significant impact on the delivery of medical services?

C2: In my experience the consequences of mismanagement or lack of strategy as noted in my previous response can lead to poor patient outcomes or even death. It can also lead to staff burnout if rotas are not managed efficiently for example, which again will impact patient care.

I: What are your thoughts on strategic management impacting privatisation within the NHS, do you think it plays a role?

C2: I believe strategic management impacts privatisation within the NHS in some form, for example when it comes to contracts with private business there are individuals in the NHS that benefit greatly financially and thus will put strategies in place to push towards privatisation.

I: Can you explain your understating of privatisation in the context of the NHS?

C2: To my understanding privatisation involves outsourcing NHS services to private companies, this on a small scale includes things such as cleaning and catering contracts. On a larger scale outsourcing the management or ownership of entire hospitals to private organisations.

I: In your opinion what are the benefits and/or drawbacks of privatising healthcare services within the NHS?

C2: I think privatisation poses a huge risk to the NHS as a whole and the provision of affordable healthcare services to all. Privatisation may lead to a fragmented two-tier healthcare system, where those who can afford to pay receive faster and better care, while those who cannot are left with substandard services or waiting years before receiving treatment. I am seeing this already with patients have private medical insurance in place.

I: In your opinion has privatisation affected the quality and accessibility of healthcare services in the NHS?

C2: Yes, those who hold private medical insurance or have the ability to pay for medical care often access healthcare services far quicker than those who do not. With those who do not waiting over several months if not years for treatment. The quality of services is also starting to deteriorate with doctors opting to work for private organisations or leave the NHS in its entirety for better pay or work-life balance.

I: Have you noticed any changes in the way healthcare services are delivered since the introduction of privatisation within the NHS?

C2: No, we do this best we can with the tools available to us however morale is far lower than I've ever seen in my lifetime within the NHS, especially among junior doctors and Nurses. With strikes occurring on a regular basis as you will see from the news, which in-turn puts pressure on consultants, who provide cover the junior doctors.

I: What impact has privatisation had in the NHS on working conditions and job security, if any?

C2: In my opinion privatisation has had a negative impact on working conditions for doctors and nurses in the NHS, as there seems to be a greater emphasis on cost saving measures and activities. Which is leading to increased workloads, decreasing salaries and a reduction in staffing levels with many people looking for jobs elsewhere as they feel the NHS no longer offers the stability and job security it used to once have.

I: Has the role of government changed in overseeing and regulating healthcare services in the NHS since privatisation was introduced?

C2: In my experience no, the role of government seems to just add complexity to the NHS, and we are simply required to adhere to new policies and regulations, when introduced, be it privatisation or something else.

I: What impact has privatisation had on the financial stability of the NHS and its ability to provide affordable and accessible healthcare to all, in your opinion?

C2: This is a slightly complicated question to answer because on the one hand privatisation has brought in additional revenue for the NHS and reduced waiting times for patients in some instances however it has also negatively impacted affordability from some.

I: How do you think patient experience has been affected by the introduction of privatisation in the NHS?

C2: Another tough question which can be multifaceted however I think the biggest concern from a healthcare professionals' point of view is that privatisation can lead to a reduction in the quality of care provided to patients. With private service providers focusing on providing profitable services, the result maybe the lack of investment in less profitable but essential services. Which can lead to reduced access to healthcare for some patients, particularly those who are financially disadvantaged.

I: What steps do you think should be taken to ensure privatisation in the NHS is properly regulated and that patients continue to receive high quality and affordable care?

C2: In my opinion any private providers introduced to any trust must be held to the same standards as the NHS. There should also be some form of transparency in the bidding process when it comes to most if not all contracts and the NHS should still retain control over key decisions irrespective of those contract owners.

I: Finally in your opinion, what do you think the future of healthcare looks like in the NHS with the introduction of privatisation, and how can it remain sustainable and effective for all stakeholders (i.e., patients, government, private business and employees)?

C2: To ensure the NHS remains sustainable and effective, we need to invest in public healthcare and develop a long-term plan that addresses the challenges facing the healthcare system. One that makes sure our junior doctors and nurses are properly supported financially and well resourced, with investment in new technologies and innovations for example but amongst everything makes sure we are prioritising patient care over financial gain.

Appendix 5 - Interview Analysis Table

Interview analysis	Consultant 1	Consultant 2	Summary
How long have you been a consultant in the National Health System?	2 years	Over 20 years	
Describe how you define strategic management and how is it defined within the healthcare sector?	A set of goals designed to fulfil an organisation's needs.	Developing and implementing long-term plans. Tool used in identifying areas of improvement for patients where possible however today its more about opportunities of growth and cost saving exercises for the trust.	The consultant's views differ on this question, these diverse perspectives highlight the varying interpretations and applications of strategic management.
In your opinion, what do you believe are the key components that can make a healthcare strategy successful?	Patient centred approach, staff involvement and financial management.	Set goals, effective communication, and a commitment to continuous improvement to deliver the best care possible for patients.	The consultants' perspectives on this topic differ slightly, with C1 focusing more on patient centric approach, staff involvement and financial management. C2 focuses on clear goals and effective communication however the underlying consensus seems to be a focus on patients from both respondents.
May you tell me about your role in the development and implementation of strategic planning with the NHS, if you have one?	Allocation of resources in the clinical setting, supervision of staff and data collection for later analysis and results.	I have been involved in various committees and initiatives during my time in the NHS with a strong focus on improving patient care outcomes. As a consultant my role is to also provide support for the junior doctors and give valuable input where possible to make sure they are adhering to	C1 and C2 both play critical roles in the creation and implementation of strategic planning within the NHS. They both contribute to the improvement of healthcare services and patient outcomes, despite differences

		rules and regulations patterning to patient safety and quality improvement, which are key components to any strategic plan.	in their specific areas of focus and responsibility. While both consultants contribute to strategic planning, Consultant 1's function is more focused on resource management and data analysis, whilst Consultant 2's role is more focused on patient care improvement and quality standards compliance. Their joint efforts are critical to the NHS's effective strategic planning and delivery of high-quality healthcare services.
How do you measure success of a strategic plan within the NHS?	Improved patient outcomes, cost savings, staff wellbeing and retainment.	1. Traditionally - low mortality rate. 2. Patient health and wellbeing. 3. Today the NHS, uses a range of metrics including staff engagement, staff satisfaction, financial performance, financial efficiency, and patient questionnaires.	The varied viewpoints suggest that measuring success of a strategic plan within the NHS can be approached in different ways with considerations for both specific outcomes and broader indicators of organisational effectiveness, again patient satisfaction seems to be the key performance indicator.
What do you consider to be the biggest challenges that NHS or healthcare organisations face, when it comes strategic management?	The demoralised and exhausted, under paid work force. The work force is the biggest asset to any organisation and the NHS is no different. It	Healthcare landscape because it is in a constant state of change, there is no one glove fits all strategy for the NHS. This comes down to mostly ever-changing	The responses from the consultants here highlight important considerations for the NHS in terms

	matters not what strategies and plans are in place, the workforce is too disenfranchised to allow for any real change to take place.	government policies.	of strategic management. Consultant 1 indicating that for any strategic plan to be effective its imperative to prioritise workforce well-being, engagement, and empowerment. Consultant 2 highlights that adopting flexible strategies to accommodate the dynamic healthcare landscape and ever-changing government policies is crucial.
How does the NHS ensure its strategies remain relevant and adaptable in the face of the rapidly changing healthcare landscape?	Collaboration with outside organisations and companies, making sure staff stay up to date with current clinical practice.	The NHS will need to be agile and adaptable but with thousands of trusts under one banner, in such an enormous organisation this is going to be very challenging.	The two consultants offer perspectives on guaranteeing the relevance and adaptability of the NHS's programmes, but their approaches and difficulties differ. Consultant 1 emphasises the necessity of external collaboration and internal staff training in ensuring the NHS's adaptability. Consultant 2, on the other hand, emphasises the difficulties caused by the NHS's enormous and complex organisation.
<i>Based on your experience, what are the consequences of</i>	1. Poorer patient outcomes and satisfaction	The consequences of lack of strategy and planning have the	While both consultants acknowledge the

<i>mismanagement or lack of strategic management within the NHS?</i>	rates. 2. Staff moral and retainment. 3. Divergence of personal goals between managers / leaders and the more junior levels of staff 4. Increase in financial mismanagement and waste, poor resources and infrastructure.	potential to be quite severe and result in patient deaths.	negative consequences of mismanagement or a lack of strategic management within the NHS, Consultant 1 provides a comprehensive overview of the various challenges that can arise, while Consultant 2 emphasises the potentially life-threatening consequences for patients.
<i>Do you believe that the lack of strategic plans or mismanagement can have a significant impact on the delivery of medical services?</i>	Absolutely, per my last response, not to mention this is evident within the NHS today.	In my experience the consequences of mismanagement or lack of strategy as noted in my previous response can lead to poor patient outcomes or even death. It can also lead to staff burnout if rotas are not managed efficiently for example, which again will impact patient care.	Both comments emphasise the crucial role of strategic planning and good administration in assuring the delivery of high-quality medical services within the NHS, as well as the serious implications when these aspects are neglected or mismanaged.
<i>What are your thoughts on strategic management impacting privatisation within the NHS, do you think it plays a role?</i>	Yes, the lack of strategic management is accelerating the privatisation process.	I believe strategic management impacts privatisation within the NHS in some form, for example when it comes to contracts with private business there are individuals in the NHS that benefit greatly financially and thus will put strategies in place to push towards privatisation.	While Consultant 1 expresses their point of view clearly, Consultant 2 underlines how individual motives can influence strategic decisions and thus privatisation.
<i>Can you explain your understating of privatisation in the context of the NHS?</i>	The allocation of medical contracts to third party companies which are privately owned. This could be	Privatisation involves outsourcing NHS services to private companies, this on a small scale includes	Both consultants provide a clear explanation to their understanding of

	contracts for the supply of PPE, or for the running of entire hospitals.	things such as cleaning and catering contracts. On a larger scale outsourcing the management or ownership of entire hospitals to private organisations.	privatisation, with the same theme of integrating private corporations in healthcare delivery within the NHS. Consultant 1 concentrates on contract allocation, but Consultant 2 broadens the scope of outsourcing to include both small-scale and large-scale agreements.
<i>In your opinion what are the benefits and/or drawbacks of privatising healthcare services within the NHS?</i>	• Pros: Rapid access to healthcare, greater technological advancement, better pay and benefits for staff, more money for equipment and better infrastructure. • Cons: Patient is less of a priority over the bottom financial line, push towards more expensive treatments, drugs, surgeries etc to maximise profits, 2 class health services; one for those who can afford extra, and one for those who cannot.	I think privatisation poses a huge risk to the NHS as a whole and the provision of affordable healthcare services to all. Privatisation may lead to a fragmented two-tier healthcare system, where those who can afford to pay receive faster and better care, while those who cannot are left with substandard services or waiting years before receiving treatment. I am seeing this already with patients that have private medical insurance in place.	While consultant 1 recognised certain possible benefits of privatisation, Consultant 2 was more hesitant and concerned about the overall implications of such a change. They both emphasise and agree on the danger of creating unequal access to healthcare based on socioeconomic position.
<i>In your opinion has privatisation affected the quality and accessibility of</i>	Yes. There is already a 2-tier system. If you have the funds /	Yes, those who hold private medical insurance or can pay for	Both responses emphasise the adverse effects of

<i>healthcare services in the NHS?</i>	insurance, you can access healthcare more quickly.	medical care, often access healthcare services far quicker than those who do not. With those who do not waiting over several months if not years for treatment. The quality of services is also starting to deteriorate with doctors opting to work for private organisations or leave the NHS entirely for better pay or work-life balance.	privatisation on healthcare accessibility and quality within the NHS, highlighting the importance of carefully considering the implications of increasing privatisation in the healthcare system.
<i>Have you noticed any changes in the way healthcare services are delivered since the introduction of privatisation within the NHS?</i>	Yes. In addition to the 2-tier system, more necessities are being outsourced to other companies; for example, NHS parking is now fully privately owned in most cases meaning patients and staff have to pay extremely high fees.	No, we do this best we can with the tools available to us however morale is far lower than I've ever seen in my lifetime within the NHS, especially among junior doctors and Nurses. With strikes occurring on a regular basis as you will see from the news, which in-turn puts pressure on consultants, to cover for the junior doctors.	While both consultants offer useful information, Consultant 1 concentrates on the consequences of privatisation on healthcare services, emphasising the creation of a two-tier system and more outsourcing. Consultant 2, on the other hand, tackles the workforce's concerns as well as the impact of low morale on healthcare delivery inside the NHS.
<i>What impact has privatisation had in the NHS on working conditions and job security, if any?</i>	It has made them worse. More staff are leaving to work in the private sector to the detriment of the NHS.	Privatisation has had a negative impact on working conditions for doctors and nurses in the NHS, as there seems to be a greater emphasis on cost saving measures and activities. Which is leading to increased workloads, decreasing salaries and a reduction in staffing levels with many people looking for jobs elsewhere as they feel the NHS no longer	Both consultants agree that privatisation has had an adverse influence on the NHS's working conditions and job security. The emphasis on cost-cutting initiatives, as well as personnel departures to the private sector, have created

		offers the stability and job security it used to once have.	difficulties for healthcare professionals, undermining their overall happiness and faith in the NHS as a stable employer.
<i>Has the role of government changed in overseeing and regulating healthcare services in the NHS since privatisation was introduced?</i>	Not to my knowledge.	No, the role of government seems to just add complexity to the NHS, and we are simply required to adhere to new policies and regulations, when introduced, be it privatisation or something else.	Both consultants believe that the government's role in managing and regulating healthcare services in the NHS has not changed considerably since privatisation.
<i>What impact has privatisation had on the financial stability of the NHS and its ability to provide affordable and accessible healthcare to all, in your opinion?</i>	It has made it much worse. There is little transparency currently which is why the system is so bad. The government should just announce its going to privatise the NHS so that we can be done with this slow death more quickly. For example, community medicine is now very privatised which is the reason for the NHS bed crisis.	This is a slightly complicated question to answer because on the one hand privatisation has brought in additional revenue for the NHS and reduced waiting times for patients in some instances however it has also negatively impacted affordability for other patients.	While both experts acknowledge the consequences of privatisation, their tone and perspective differ. Consultant 1's response is critical and concentrates on the negative impacts, but Consultant 2's response is more balanced, considering both the positive and negative effects of privatisation on the matter. However, the consensus is that privatisation is detrimental to the NHS's financial stability and its ability to deliver inexpensive and accessible healthcare.
<i>How do you think patient experience has been affected by the introduction of privatisation in the NHS?</i>	Significantly worse. For example, the long waiting times for treatment are due to under staffing and	Privatisation can lead to a reduction in the quality of care provided to patients. With private service providers	Again here, Consultant 1's response is more direct and strongly adverse, relating

	under funding of the NHS.	focusing on providing profitable services, the result maybe the lack of investment in less profitable but essential services. Which can lead to reduced access to healthcare for some patients, particularly those who are financially disadvantaged.	privatisation to long waiting times and resource constraints. Consultant 2, on the other hand, offers a more balanced assessment, admitting the possibility of decreased quality of treatment and limited access to important services, particularly for financially poor patients. The premise looks to be that privatisation has had a negative impact on patient care since its introduction.
<i>What steps do you think should be taken to ensure privatisation in the NHS is properly regulated and that patients continue to receive high quality and affordable care?</i>	Nothing. The NHS is already being privatised and the government should simply do it within 5 years. If this process is above board and transparent, then regulation can be effective. If we continue to progress as we are, with many deals made under the table and without public scrutiny, the situation is going to get much worse.	Private providers introduced to any trust must be held to the same standards as the NHS. There should also be some form of transparency in the bidding process when it comes to most if not all contracts and the NHS should still retain control over key decisions irrespective of contract owners.	Consultant 1 expresses resignation over the ongoing privatisation and suggests openness as a viable regulatory tool. Consultant 2, on the other hand, calls for equalising standards for commercial providers and emphasising transparency in the bidding process while ensuring the NHS retains authority over critical choices.
<i>Finally in your opinion, what do you think the future of healthcare looks like in the NHS with the introduction of</i>	I think the immediate future looks bleak. The lack of transparency in the privatisation process will continue	To ensure the NHS remains sustainable and effective, we need to invest in public healthcare and develop a	While both consultants accept the difficulties and complications of privatisation in the

<i>privatisation, and how can it remain sustainable and effective for all stakeholders (i.e., patients, government, private business and employees)?</i>	to negatively impact the whole system and staff. In the long run, provided will adopt a more European model (mixed state and private finance) as opposed to a USA model, it will be beneficial. To keep it attractive to the public, it must provide safe, effective, and timely access to healthcare that's affordable. Private business will of course profit, but it must never be at the expenses of the patients in any way. The employees will see its value if work life balance improves and if pay is much better than current rates. A focus on training, and shared values must remain in terms of career progression to ensure that the UK remains the most education focused health care system in the world.	long-term plan that addresses the challenges facing the healthcare system. One that makes sure our junior doctors and nurses are properly supported financially and well resourced, with investment in new technologies and innovations for example but amongst everything makes sure we are prioritising patient care over financial gain.	NHS, Consultant 1 investigates the long-term benefits of a mixed state finance strategy, like those used in Europe. Consultant 2, on the other hand, emphasises the need of investing in public healthcare and assisting healthcare professionals in prioritising patient care, emphasising the importance of patient well-being in the context of sustainability and effectiveness.
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