



EDITORIAL

Happy hens lay bigger eggs

A seminar on Improving the Patient Experience within the NHS. A film called *The Officers' Ward*. A manager who wants to know how to improve quality in Plastic Surgery. How are they linked?

The seminar looked at what clinicians could do to improve or adversely effect the patient journey and experience, and was entertainingly interactive. Suggestions from the audience went along predictable and obvious lines: improve efficiency, reduce delays, and value sympathy and caring. Some old chestnuts were aired: the idea that senior surgeons are often poor communicators, that they lose sight of the patient and focus on the reconstruction, may all contain a kernel of truth. As one delegate pointed out, good communicators and good surgeons are both unusual, and so to find both qualities in one person is rare indeed. This is not to excuse poor communication abilities, but my own suspicion is that the incidence of poor communicators is no higher in surgery than in any other profession.

Then a nurse delegate pointed out that it was all very well talking about improving the patient experience but she was concerned that we clinical professionals spent too little time caring for each other. This theme was picked up by a surgeon who told us how Clinical Governance, European Working Time Directives, Consultant Delivered Services, shorter training, audit, litigation, risk management and a myriad of other harpies had conspired to exhaust and frustrate the clinical workforce to the detriment of their ability to focus on improving the patient experience. Perhaps, he suggested, we should spend some time improving the clinician's experience?

The response from the floor was unexpected: it seemed that this had struck a chord with many clinical professionals who felt overwhelmed by the extended role they had been obliged to assume, and by an agenda about to get even bigger with the changes still to come in the NHS.

The Officers' Ward details the four years Lieutenant Adrien Fournier spends in a ward for the officer class, undergoing facial surgery after a disfiguring

war wound at the beginning of the Great War. The milestones he has to pass, the nursing and surgical care he receives and the painful journey of self-acceptance are wonderfully depicted. It is hinted that his hospital conditions are in contrast to the crowded chaos of the enlisted men in their wards.

I told the manager looking for quality improvements in our Plastic Surgery service that *The Officers Ward* had returned me to an era not so long past and in which I had lived and yet which I had temporarily forgotten. An era where people had answered a calling to care for colleagues and patients in human ways, to put arms round them, to stay late to listen, to show them they cared. An era in which even poor communicators had time to get their message across and their feelings known. It also reminded me that what mattered most for the Lieutenant Fournier was not how clever, skilful or innovative the surgery was, but that it was well intentioned, thoughtfully executed and done with humanity and care. In that world, the surgeon and the nurses and the patients are all part of the same movement. Plastic Surgery is a specialty par excellence in which our patients need to believe in our care for them.

I contrasted this with a world where targets rule, where nurses are overburdened, where occupancy figures of less than 96% are carefully scrutinised and where staff turnover is higher than ever previously known. A world where a clinical psychologist is the first response to a distressed patient.

And then I realised we are all correct. The lecturer who wants to improve the patient journey, the nurse who wants us to care for each other and my wishes to return to an era of vocationally driven care, where surgery is not process managed like a McDonalds fast-food outlet. A content, self-motivated and self-sufficient workforce will automatically provide the important aspects of quality we all identify, and the human aspects that matter, more than anything else. Perhaps to get the patient experience right, we have to have the professional's experience right. And to improve the

professionals experience, we need more of them, to lighten individual burdens and give more time to caring, which in turn is expensive. But then, happy hens lay bigger eggs.

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