

Consultant 249

21 June 2013

Dear Sir,

You are to be applauded for carrying out this long awaited enquiry.

Much of the debate had been largely on the theory of harm surrounding private insurers restricting patients choice of consultants in favour for insurers recognised consultants who had to sign up to price decided by the insurance companies.

Although this is clearly a factor in reducing patients choice and may go against patients best interests in providing the best care, I believe there is an even more important area of reduced choice for patients and restriction to specialists providing the best high quality care for patients. I summarise this as below:

Private hospitals operate admissions rights system which is controlled by a small number of consultants who have a massive influence on hospital managers through MAC. MAC chair and membership selection are not an open process and not always representative of consultant body. In addition MAC chairs and members interest may well influence admissions rights for new consultants who share the same speciality in order to protect their own flow of activity. There are no clear rules or fair selection process by private hospitals in deciding who and when admission rights for consultants are given. Even when a consultant is granted these rights, access to patients is not transparent. When referrals to private hospitals are not directed to a named consultant, it is clear that a small number of consultants seem to be favoured by hospital managers in patients allocation to their clinics regardless of consultants expertise in patients clinical conditions. Outpatients allocation to consultants seem to follow a pattern dictated by personal relationships or in some cases incentives leading to patients losing out in open informed choice and expertise. Self-paying patients as well as insured patients are directed to be referred to or book with consultants accordingly. This clearly can't be in patients best interest.

The quality of patients care in the private sector is likely to suffer as a result of the current lack of transparency leading to consultants restrictions, patients reduced choice and limited information to patients compounded by poor referral and patients allocation systems.