

## Consultant 60

3 February 2014

Dear Mr Witcomb

I am writing because of the plan by the Competition Commission for the HCA group of hospitals to be reduced in London.

I work as [redacted] in a Central London Teaching Hospital and in private practice within HCA, mainly at the Harley Street Clinic.

I looked at practicing in other private healthcare facilities when starting a private practice and none had anything but rudimentary governance systems. Nor did they approach the quality of the HCA network. This is because they simply did not work on the scale of HCA. I have looked intermittently at other non-HCA hospitals, including within the last 6 months, and the difference in quality in terms of investment, governance, communication, patient satisfaction and safety issues remains striking. This is comparing HCA hospitals even to well established private hospitals, such as the London Clinic, the Cromwell Hospital, and the London Independent. I believe that these are the types of hospital systems that, if the Competition Commission plan is enacted will replace what HCA are providing. I have forgone considerable private practice opportunities, because I have chosen not to accept invitations to work in these hospitals because of the contrast in quality between these hospitals and HCA.

Examples of what HCA have developed in [redacted] over the 8 years I have worked in an HCA facility have been: governed networked protocols across all HCA [redacted] units, mandatory safety and death audits, computerized prescribing systems linked to laboratory results, HCA wide multi disciplinary meetings and the establishment of a clinical trial facility. Above all there has been a massive commitment to quality in all areas.

The quality of the junior staff working in HCA hospitals dwarfs those of the other established [redacted] providers in London. This is because HCA has invested in these staff, in selection and training, and financed research attachments. This has attracted high quality UK trainees from the NHS for the period when these individuals are carrying out research as part of their training to become UK consultants. This does not happen in other organizations on this scale.

I think the reason why the HCA have developed such excellent systems is that the organisation has a commitment to quality, and is able to operate on a scale that allows to delivery of this globally competitive quality. This parallels the drive for quality in the NHS.

In the NHS there is ever more agglomeration of services. The reason for this is quality and economies of scale. Units and organizations with high throughput provide high quality services. The suggestion by the Competition Commission directly counters this philosophy, and will lead to a dilution of the quality available for patients.

It is appreciated that there are potential problems with having such a large organisation providing major slice of the private care in London. However as the insurance companies know well, they can dictate prices to HCA that are comparable to other providers. If HCA were to charge higher prices, purchasers are perfectly at liberty to take their business to other providers.