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An IKEA Healthcare System

Bevan Future Thinkers

Kendra-Jean Nwamadi, Celyn Jones-Hughs, Gruffydd Pari, Robert Jones, Chiamaka Dibigbo

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An "IKEA" Healthcare System

The NHS is the child of Wales, born from the nation's values of compassion and equality. Its founding father, Aneurin Bevan, would be immensely proud of the adult it has become but also, like every parent, fear for its future. We, as the Bevan Future Thinkers are grateful that we will one day work for this incredible service but are also apprehensive about its future given the current challenges. Consequently, we have been reflecting upon the changes we would like to see to ensure our NHS is in good health by 2050.

The aim of the Bevan Future Thinkers is to use our insights and views to think of new and innovative ideas to better our health and care system. We believe that young people across Wales deserve to be heard and given the opportunity to engage with key stakeholders to action the changes we want to see.

Our main aim is to improve prudent health and patient care as they are at the heart of the NHS and at the centre of each of its core values. Our approach to achieving this has been inspired by the global furniture brand, IKEA. IKEA seeks to use as few resources as possible to make and sell furniture without compromising on quality, durability, or customer satisfaction.

As Wales continues to adopt an integrated model of health and social care, we believe that a crucial aspect of this is community health. If we can arm our patients with the correct health toolkit, much like an IKEA furniture flat pack, they could build their own health at home. With clear user-instructions included and locally staffed hubs where patients can get guided help, our vision for NHS Wales is one in which we innovate to keep people and patients healthy at home.

Moreover, there are several principles from IKEA that can be applied to our healthcare system. For example, the checkout system at IKEA stores, which ensures that those who need the most help, get the most help when they need could help us to innovate and streamline the triage system in secondary care.

We have outlined four key aspects for our vision for NHS Wales in 2050:

Healthier communities

Imagine a world where health services work with large corporations, such as Apple to provide patients with technologies like Apple watches that monitor one's health and incentivise people to exercise more. Apple have discussed plans to integrate blood pressure monitoring and ECGs in these watches. Patients entering unsafe rhythms or experiencing a heart attack could be identified significantly sooner.

We want to create a culture within communities where monitoring one's health is normalised as opposed to only doing so when an illness has already occurred. This would require patient education, as well as more community-based facilities such as regular pop-up blood pressure monitoring clinics, or 'hubs', where patients can be spot-checked, and signposted to the relevant care pathway if any flags are raised. Knowing that customers may struggle to assemble their flatpacks at home, IKEA have a community partner, TaskRabbit; they send professionals to diagnose the customer's issues and help them to assemble their furniture without them having to return to the IKEA store. This also prevents customers returning their items or causing more damage to the product by trying to solve their issue alone.

The NHS could do more to help patients solve their own health issues in the community. For example, exercise programmes and subsidised activities for all, not only those who have diagnosed problems, like obesity or osteoarthritis, that necessitate regular movement. Schools are an optimal place to host preventative measures. Since every child, up until the age of 16, is required to be in formal education, integrating sexual health, exercise and diet education into the school curriculum ensures that everyone has equal access to this knowledge and teaching from a young age. The new curriculum in Wales aims to implement elements of this, with a segment entitled 'Health and Well-being'. However, this does not include what will specifically be taught about in schools. Moreover, students could easily engage with NHS exercise programmes hosted after school; this would reduce the need to join external sports clubs, many of which require a fee or access to transport which can be a barrier to many children in engaging with regular exercise.

In order to keep people and patients healthy at home, we must also improve the link between the NHS and social care. The need and scope for social care is increasing due to our ageing population and hence we need to adopt different approaches to ageing. We believe we need to take an intergenerational approach to ageing and offer greater opportunities for the young and the old to integrate.

We could enhance the role of technology in the social care sector, which the aim of making life better for carers and those they look after; this would require additional funding and enhanced training for carers. The increasing use of technology within homes for completing everyday tasks may be an answer to supporting the elderly population and others requiring care. For example, robotics could enable people to live independently at home and address the need for more carers. An intergenerational approach here could look like young people educating the older generation about how to make the most of the latest health technologies. The human touch is vital, but the potential synergistic effect of staff working with technology could be transformative for the sector. These added skills required could also mean better pay in the sector, encouraging more people to enter these fields, stay and progress.

Digital Health

With the increase of the use of technology in the health space, it is only fitting that we tend towards a system that is eventually fully digital and paperless.

A key part of IKEA's offering to customers is its online and digital service. Customers can design their kitchens online, order items online for delivery at home, or at satellite stores, and browse a range of products. Customers can have an entirely digital shopping experience or gather information digitally before visiting a store. Nearly a quarter of IKEA's sales were made online in 2022, making it an indispensable part of the business.

The opportunities of technology in a health and care system are vast if used properly. In particular, there are exciting opportunities for increasing patients' involvement in their own care. When you get your IKEA flatpack, it comes with a manual which tells you exactly how to assemble it. Envisage the flatpack as the patient's health, and the manual is what we can equip patients with to help them build their health.

The manual could be an app that acts as a 'one stop shop' for all the patient's health needs. It could also create a smoother, more efficient way of sharing patient information between different health boards, hospitals, care homes and GP surgeries across the UK. The app would include details of their specific care plans, as well as practical clinical recommendations of how they can take more control of either managing or improving their health status. This aligns with the vision for the NHS Wales App, which aims to increase people's involvement in the management of their health and wellbeing.

Healthcare providers could keep track and manage interventions given to the patient by different healthcare providers, e.g. between primary and secondary care, allowing for a smoother transition through the health and care system for the patient. There could also be a use-case for artificial intelligence; tailored, personalised information with appropriate signposting to clinical advice or to a clinical service.

As this information would be available via an app, patients could take more control of their health by having it right in their pocket. For example, daily reminders could be sent about appointments and to those who always forget to take their medication. Patients could also log their drug adherence or any side effects to allow their health providers to track and make any changes to the patient's care plan remotely.

The caveat, however, is that no matter how far we veer towards a fully digital world, the digital health gap may only widen as technology becomes more complex. Those left behind may include people with disabilities, the homeless, the elderly, those who aren't technology literate and those who opt out of the use of technology altogether. Therefore, a health app cannot be fully accessible to meet the needs of those it is created for. In addition, the management of the app and its data would be a

mammoth operation so we must also consider which parties would need to be involved, how much funding would be required and how this can be acquired in a reasonable timeframe.

To build such an integrated, comprehensive system, it must be strictly regulated and secure to prevent data leaks from those who could potentially want to steal private patient information. Beyond the financial investment, the app would require a substantial time investment in accruing all existing patient data into one place. This could potentially be mitigated by the use of AI based tools which have already seen increasing success within the NHS.

Patient Flow

An efficient and effective patient flow is a central pillar within any Health service. It is not the construct of one stage but the outcome of the entire Healthcare service. Patient flow is defined as the movement of patients through a healthcare facility and encompasses the medical care, physical resources and internal systems needed to get patients from admission to discharge whilst maintaining quality (NEJM Catalyst, 2018).

With increasing pressures on the NHS, leaders in health organisations across Wales must try to strike the difficult balance between short-term and long-term decisions that will contribute most effectively to improve quality of care and the sustainability of services. Finding a balance between short and long-term decisions is particularly pertinent when considering the challenge of patient flow.

Within the Welsh NHS we primarily associate poor patient flow with overcrowded emergency departments, a lack of hospital beds and significant waiting lists. Poorly managed flow can lead to adverse health outcomes and mortality rates (ibid). Short term decisions to improve patient flow involve addressing system inefficiencies as patients move through a pathway and improving the coordination of care. Rapid advancements in technology provide opportunities for health systems to improve processes that can benefit patient flow.

The NHS could learn lessons from its distant cousin, IKEA. At 75 years old, the same age as the NHS, IKEA healthily remains one of Britain's favourite retailers. Their position has been earned through constant consideration of the customer's desires, and striving to meet their needs with products, online and in-store experiences.

Customers value the store's immersive customer experience. Arrows line the floor from the entrance, taking the customer on a journey, providing opportunity to touch, see and feel things along the way. The interactive in-store experience encourages the customer to sink into the shopping experience and feel involved with the product, rather than briefly browse. Clear signage and arrows direct customers to the most appropriate place to fulfil their shopping needs. After buying any product, if the customer requires help in getting it to their vehicle and home safely, support is available.

The principles that IKEA adhere to around customer flow can be applied to a modern healthcare system. IKEA designs pathways that make it easy for some customers to navigate their way to a particular section and purchase quickly, whilst other customers, with greater need, can take a holistic approach, passing through different sections seamlessly. Along the way, they feel involved and engaged in the shopping experience. Patients, in the same way, should feel engaged in their care and experience it in the most appropriate setting.

Moving now to look at our vision for secondary care, a modern health system should make use of technology to improve the flow of patients through hospitals. An English NHS trust has introduced software that has freed an extra 1,167 hours of bed capacity monthly (Tele-Tracking, 2021). Patients are fitted with electronic wristbands as they enter the hospital, providing real-time data on where they are and how long they've been waiting for admission or discharge. This prevents any patients from inadvertently being forgotten. Live data is displayed on dashboards at a patient flow office, helping operators assign patients to the most suitable available beds. The data that the system provides is also valuable as it can be used to inform future service improvements and decide which part of a patient's pathway may require greater investment. If this software continues to be successful, we would like to see similar technologies adopted across Wales.

Health inequalities

Whilst efficient patient flow processes should be an integral part of a successful health system, for the Welsh NHS to be truly effective, we should aim to be "wise before the event rather than smart after". This means promoting population health to ensure that there is less demand for health services. A PHW report in 2021 found that inequalities within healthcare cost the Welsh NHS £322 million every year. With one in ten Welsh households living in insecure housing, Wales also has the worst child poverty rate of all UK nations at 31% (End child poverty).

In approaching population health, it is important to take a holistic approach. Good or bad health is not simply the result of genetics, individual behaviour and medical care. Social, economic and environmental challenges are all a substantial part of variation in health outcomes. Health inequalities are not inevitable, so it is important that health and care services are designed so they meet the needs of those who are subject to inequalities. Preventative targeted action aimed at improving health equity between communities is essential to reducing the Welsh burden of health inequality.

A huge part of tackling health inequality is data capture. During the app onboarding process, we could capture various types of information such as patient ethnicity, their proficiency with various languages, employment status and their physical activity levels. These data points can be combined with existing insights such as their address and health record to build a holistic image of the patient. Social care could also be integrated into the patient profiles; notifications from the Department of Health and Social Care can be flagged for their health professionals to see.

Public health data and reports from agencies such as Public Health Wales will be important to shape the app and inform future work. Patients can be sent reminders of screening programmes they need

to engage with. For patients that do not respond, PHW will be armed with the data they need to understand why this might be and to detect any trends in the demographics of patients who are disengaged.

NHS already have several digital health apps available on the app store, such as "Couch to 5K" and "Weight Loss". This central patient 'health manual' could be integrated with these existing apps so that their health providers can be involved with their progress and adherence with these digital programmes. During consultations, health providers will have a much more realistic picture of how the patient is doing beyond the doors of the hospital or GP surgery, making negotiation and goal setting with the patient much more effective.

Ultimately, the mantra of a successful health care system is to be smart before the event rather than wise after, because prevention is better than cure. Therefore, whilst short term efficiency gains are important, it is also vital to consider long-term benefits that investments can provide. Using technology to increase patient education levels and population health will lead to a less demand on the health service, which assists patient flow.

Recommendations for the Future

The Future Thinkers Network

A priority for us is to ensure that all young people have a voice. We are in an incredibly privileged position to have our ideas, concerns and expectations heard by those in positions of power, however not everyone has that luxury. Hence, we would like to create a network of future thinkers. A network of young people who want to see change within our health services and have ideas to share. Whether that be through creating a society within the university, or on a national scale using virtual means. It would be great to see our ideas come together and feed these back.

Invest in leadership and management opportunities for students and graduates

Evidence shows that quality of care and organisational performance is directly affected by the quality of leadership and the improvement cultures that leaders create. Healthcare systems and processes are continually changing and evolving. As evidenced over the last few years, the ability of organisations to adapt to everchanging circumstances is vital. This requires effective leadership to set direction and communicate a vision for the organisation. Leadership is also crucial in keeping up to speed with the new technologies and treatments that are continually being developed. Crucially leaders must be able

to adapt quickly to change and anticipate future trends to prepare their organisations for future challenges.

Great quality care requires leadership at all levels of the organisation, not only at the top. It is therefore important that leadership skills and behaviours are introduced to students of all degree subjects leading to careers in the health service. The graduate management training scheme is an example of investment for the future, offering an opportunity for graduates to develop into future leaders within management. However, it is also important that clinicians in training are identified to receive career support and mentorship to develop leadership abilities. Through introducing students to leadership skills and behaviours, continued investment in the graduate management training scheme and providing clinicians with career support to enable progression to senior leadership positions, the NHS can expect to be better prepared for future challenges.

One way to introduce students to these skills is through an annual Bevan Future Thinkers Conference. This could give students exposure to the diverse career pathways afforded by their degree, connections with Welsh employers in health innovation and leadership, as well as other like-minded students that they could join forces with. Very importantly, we could create space for idea generation by giving young people the floor to discuss topical issues.

Another way to invest in leadership opportunities for students is to back student-led projects across Wales. There are several ambitious, inspirational students that are making a difference in their local community and beyond. Gwellwn, a student-led community health project based in Cardiff, create platforms to connect underserved populations with their local health stakeholders. This has led to an increase in trust towards the NHS in historically marginalised communities, and facilitated meaningful conversations about how the community can be better supported. Partnering with such students could increase the impact of their work through mentorship and funding opportunities. This will keep young people inspired to engender change and generate big ideas for the future of our health and care system.

Closing

In 2050 the NHS - set up to care for us from the 'cradle to the grave' - will be over 100 years old. But here in Wales we are not preparing its obituary, we are planning for its future.

We believe in its future, but we cannot be complacent, we cannot stand still. We must adapt and plan for a health service we can all be proud of in 2050.

Born in Wales, the modern health service can be reborn in Cymru.

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School of Management,
Swansea University Bay Campus,
Fabian Way, Swansea SA1 8EN

www.bevancommission.org
bevan-commission@swansea.ac.uk
+44 (0)1792 604 630
