HCA Healthcare UK Joint Ventures - UCH Partnership

Claire Smith, Chief Executive, HCA UK Joint Ventures
Marcel Levi, Chief Executive, UCLH NHS Foundation Trust
Why we partnered

It’s about….

• patients

• safety

• strategic alignment

• desire to partner
Our journey together

Harley Street at UCH
- HCA’s first joint venture
- opens in October 2006
- 24 inpatient beds
- 5 chemotherapy chairs
- Dedicated radiotherapy
- Haematology-oncology
- Joint JACIE accreditation

TrueBeam
- opens in July 2011
- Is the first TrueBeam in UK
- Benefits both HCA and NHS and private patients

Macmillan Cancer Centre opens September 2012
- Provides 15 new beds, increasing capacity to 31 inpatient beds

Institute of Sport Exercise and Health
- Opens in June 2013
- Providing sport and exercise health
- World class research

Molecular diagnostics:
- HCA acquires on UCL molecular diagnostics

2006 2011 2012 2013 2017
How we work together

**Governance Structure**

**UCLH - HCA Partnership Board**

- Facility CEO
- Service Lines
- Cancer
- Medical Director
- Governance Lead
- MAC Chair
- Chief Medical Officer
- Responsible Officer
- Head of Governance

**Workforce**
- Joined-up approach to recruitment
  - Post sponsorship
  - Training/Development

**Financial**
- Non-NHS income stream for UCLH
  - HCA does not compete for NHS market share

**Operations**
- HCA as ‘operator’
  - Joint accreditation (i.e. JACIE)
Governance

- HCA’s priority is to ensure that all patients are cared for in a safe, effective, efficient and fair way, and to provide high-quality clinical services that meet our patients’ needs.

- HCA is committed to being:
  - Safe
  - Caring
  - Responsive
  - Efficient
  - Well-led

Example Governance Structures:
- Medical Advisory Committee
- Clinical Governance Committee
- MDT Meetings
- Unit/Group Meetings
- Unit-based Safety Programme
What benefits partnering brings

• Shared innovation

• Shared accreditation / achievement

• Patient Choice

• A guaranteed source of income (for the NHS)

• Consultant engagement
What we’ve learnt

1. A motivated executive team is essential

2. Getting communications right (throughout the organisations)

3. Engagement of Clinical Leaders is key
### How we work together

#### SAFE
- Open & transparent culture
- Incident reporting and learning
- Staffing skills and ratios
- Safeguarding people from harm
- Low infection rates

#### EFFECTIVE
- Patient outcomes
- Resident Consultant care
- Joint JACIE accredited unit
- MDTs

#### CARING
- Patient feedback & response
- Empowering patients & service users
- Psychological support
- International service liaison

#### RESPONSIVE
- Individualised complex care without delays
- Multilingual complimentary service & International team
- ‘You said we did’
- Mortality & Morbidity meetings

#### WELL-LED
- Strong vision & strategy
- Highly visible & approachable leadership team
- Engaged & committed leadership
- Support for career development
- Strong working relationship with our Partners

---

*HCA Healthcare UK*

*University College London Hospitals*
Where next…?

UCLH’s Phase IV development opens in 2020, and will be the largest blood cancer hospital in Europe.
UCLH-HCA: the perspective of UCLH NHS-FT

• Making use of (expensive) infrastructure for complex patients
  ✓ Equipment
  ✓ Expertise of staff
  ✓ Support

• Have our medical staff working with us rather than somewhere else
UCLH-HCA: the perspective of UCLH NHS-FT

• Making innovative treatment available to patients as much as possible

• Maximise financial incentives of an excellent service
UCLH-HCA: challenges

• NHS facilities and service not always suitable to deliver private patient care

• Doctors in training cannot work on private floors (out-of-hours)

• Keeping the relationship healthy and profitable for both sides
UCLH-HCA: future

- Expand our collaboration to create win-win situations
  ✓ other services
  ✓ staffing

- Explore new models of NHS-private partnerships