

The Future of the NHS

Following our recent Invested in the Future event, about the future of the Healthcare, we caught up with Rosemary Leonard to understand more about the future of our National Health Service. We know that technological advancements are coming, but the costs may be prohibitive. So how can the public help the NHS prosper and overcome the challenging times ahead?

The saviour of millions and the envy of more, Britain's National Health Service has been a beacon of light in the dark year of Covid-19. As medical professionals and administrative staff worked round the clock to help ailing patients, the British government implored the public to 'Protect the NHS' by protecting themselves: 'Hands, face, space.' 'Stay home. Save lives,' read messaging around the country. The mottos reminded us that putting unnecessary strain on the NHS could have deadly consequences if our hospitals became overwhelmed.

But is an unforeseen pandemic the only thing threatening our national healthcare system? With the country already in debt due to funding the fight against Covid-19, resting on our laurels – both literally and figuratively – is out of the question. How can we sustain the health of the NHS going forward? Is technology the answer? We sat down with Dr Rosemary Leonard, MBE and a GP in London's Lambeth neighbourhood, to discuss the challenges the system faces, the changes already underway, and why the ultimate key to preserving the NHS may be as low-tech as it gets.

A growing epidemic

Dr Leonard reveals that a disease far more controllable than coronavirus has the ability to debilitate our resources and funds. It's expected that in the coming years, treatment of Type 2 diabetes will take up the majority of the NHS's budget. The disease is often a direct result of obesity – a problem caused by an excessive amount of body fat that afflicts 25% of adults in the UK, and sadly, one in five 10-year-olds.

"The predicted NHS spend incurred by Type 2 diabetes and its complications is going to overwhelm the NHS budget", Dr Leonard states plainly. "If we are going to continue to have a national health service, we have got to look at preventing Type 2 diabetes. And the way we protect the NHS financially is by tackling obesity. This is nothing to do with what you look like, this is to do with your health."

The reasons for this epidemic are familiar. Cultural changes have played a big part: fewer jobs require manual labour, which equated to natural exercise. More people sit at a desk, contributing to a sedentary lifestyle. Children too play games on tablets or partake in social media instead of kicking a football or riding their bikes.

Additionally, says Dr Leonard, there is a huge socio-economic divide. People living in lower-income communities suffer higher levels of obesity, as these are areas in which processed foods are the primary source of sustenance. "It's a sign of health inequality", she says. City schools, often located in these underprivileged areas, simply don't have the space for playing fields or outdoor physical education, exacerbating the problem. Regardless, placing a premium on healthy living should be taught, Dr Leonard insists. "Schools have done a fabulous job of discouraging smoking. They need to similarly educate about healthy eating."

The future of your local surgery

As UK hospitals see a reduction in Covid patients, GP surgeries are becoming overwhelmed. "We've got a complete turnaround where the hospitals are generally quieter, but the GPs are under siege by all these problems that have been pent up over the last year", Dr Leonard says. Massively helpful, she reveals, was the rapidity with which GP surgeries adopted contactless appointments and booking systems. She succinctly summarises the significance of this change: "Technological advancements that would have taken 10 years to occur in the era before Covid have happened in 12 months". Phone and video consultations with doctors are far from suboptimal; rather, GP surgeries have become much more productive and efficient thanks to these new, digitised processes. Eliminating the need to be the first one on the phone at 8am in order to book an in-person appointment means nobody gets missed.

It's Dr Leonard's opinion that these practices should become the norm. It leads her to the item that's top of her wishlist as the NHS adapts to the post-Covid world: a master database of patients' medical histories that can be accessed by both GP surgeries and hospitals at any time, perhaps even via a patient's personal phone. The current system is, to put it plainly, antiquated, and still relies heavily on paper records and phone calls between medical professionals. This makes the possibility of human error, or a surgery rendered inert via a power outage or similar, very plausible.

Dr Leonard knows this poses challenges; for example, such a system would have to be completely secure, and

comply with data protection laws like GDPR. But the biggest battle would be getting the public to accept that these changes – namely, that digitised GP surgeries and a general database are the best way forward.

Technological advancements in healthcare

The world has just witnessed an extraordinary feat of science and medicine: the development of multiple Covid vaccines in much shorter a timeframe than could have reasonably been expected. This was partially down to a number of factors, including the proliferation of the virus, which made clinical trial participants relatively easy to find, and doctors and scientists working inhuman hours for days on end. But extreme circumstances aside, the achievement invites the question: what else is possible?

Dr Leonard points to radiology as an area of medicine that is likely to benefit from technology and artificial intelligence (AI). She predicts AI will become extremely important with regard to diagnostics. For example, mammograms and chest X-rays could be read much more quickly and more accurately by machines than by people. If a device is functioning properly, it will have a higher accuracy rate than a fallible human. Radiologists will adopt more interventionist work; AI won't replace the need for healthcare professionals.

Genetics will become more vital too. Dr Leonard makes a particularly futuristic point: "I'm sure we're eventually going to have genetics involved in managing healthcare. So that means we will all need our own genetic coding done at some point." While the costs are currently prohibitive, the benefits of such a practice are obvious. The likelihood of developing breast cancer or Alzheimer's can already be detected by determining whether a patient carries that particular gene.

On a shorter timescale, and returning to an earlier example, Dr Leonard sees the ability for Type 2 diabetes patients to be equipped with monitors that can independently communicate with their insulin pumps, allowing the pump to adapt its wearer's glucose levels. "It would essentially be an artificial pancreas", the doctor explains.

We can also expect to see robotics used in surgery shortly down the line.

How it will happen

There are two commodities the UK's healthcare system is direly lacking: time and money. In order to institute new technology, healthcare professionals from A&E doctors to admin staff need to be allotted the time to learn it. There must be dedicated hours within their workweek to commit to updating both systems and their knowledge. This protected time, Dr Leonard explains, would probably need to come from a government initiative, and would require funding that the NHS is already short of.

Unfortunately, the post-pandemic world will bring further challenges. "Realistically", Dr Leonard says, "the NHS budget is going to be reduced. National debt is now at historic levels. And some money has to go into pandemic planning because the country was not expecting what happened. It was ill-prepared, as I think every developed country was."

But there are simple ways the public can help the NHS prosper. Free up your GP's time by visiting the pharmacy for minor ailments. Add ibuprofen to the weekly grocery order rather than ringing the doctor for a prescription.

Practice good hand hygiene. Prepare a healthy meal. Protect the NHS.

Click [here < https://www.sanlam.co.uk/knowledge-hub/insights/video/future-of-healthcare-event >](https://www.sanlam.co.uk/knowledge-hub/insights/video/future-of-healthcare-event) to watch the Future of Healthcare event featuring Dr Rosemary Leonard, or check out our dedicated microsite to register for the final event in our series, The Future of Happiness, with positive psychology expert Miriam Akhtar.