

ELECTIVE (SSC5a) REPORT (1200 words)

A report that addresses the above four objectives should be written below. Your Elective supervisor will assess this.

Objective 1: What are the most common elective orthopaedic procedures in Bahrain, where healthcare is largely privately funded? How does this differ from the UK?

Interestingly, the elective orthopaedic procedures done most frequently here in Bahrain are comparable to those observed in the UK. During my UK-based elective, it was clear that the long waiting times for elective arthroplasties were often the reason for patients seeking to have these operations in the private sector. This is no different in Bahrain – during my time spent in the orthopaedic clinic at American Mission Hospital, it became evident that elective hip and knee replacements were by far the most commonly performed procedures. This was interesting as being a predominantly private healthcare system, I had expected there to be a clear difference between the two. On reflection, this could be attributed to the prevalence of osteoarthritis worldwide; as the most common indication of joint arthroplasty, it can be inferred that the condition is similarly prevalent in the UK as compared to Bahrain. This makes sense as both countries have an increasingly ageing population, with OA being a condition largely associated with old age.

Second to arthroplasties, the next most commonly performed procedure were meniscal and ligamentous knee injury arthroscopies. As expected, the patient demographic presenting with these injuries were varied drastically from those presenting for elective arthroplasties. These patients were often young and otherwise fit. In observing their management in clinic, it was interesting to observe the interplay between conservative and surgical management options. Often these patients were initially managed with physiotherapy, followed by an elective procedure if conservative measures alone were insufficient.

Objective 2: What is the process by which emergency and elective surgeries are provided in Bahrain? How does this compare to that of the UK?

I was surprised to learn that patients in Bahrain are able to access secondary care services without first seeing a GP. This meant that a lot of the patients presenting to the orthopaedic clinic were undifferentiated. As a consequence, these patients were often redirected to the correct service - whether that be an alternative specialist or a GP. After speaking about this with the consultant, I learnt that one of the key limitations of a largely private healthcare system such as the one in Bahrain is that oftentimes patients present to the wrong healthcare professional - resulting in wasted time and resources for all parties involved. This was not something I had previously considered and highlighted to me the importance of having a two-tiered system, with only patients that cannot be managed in primary care being referred for secondary care services.

With regards to the actual process by which emergency and elective services are provided, this is largely similar the UK; patients present to specialist services and are consented for the appropriate operation. Following this, they are booked in for the surgery. The most obvious difference I was able to observe was the massively shorter waiting time for certain procedures such as arthroplasties in Bahrain's private system. This was to be expected as the service is not pressed for time or resources, as in the UK. This was also observed on my UK elective, where I noticed that patient satisfaction was markedly higher as a direct effect of a more efficient and well-funded service. Another key difference that I had not previously considered was the role of the insurance company in the private system. This not only had a direct influence on the patient's interaction with the healthcare system, but it is also a huge part of the doctor's job. Both investigations and treatments need to first be approved by the patient's insurance company. As a result, a large part of the doctor's job is to justify clinical decisions to the insurance company - this then has direct consequences on the services offered by the healthcare professional. Doctors need to be able to provide a rationale for each of the investigations and management options proposed, resulting in more prudent resource consumption. One major drawback of this, however, was how time consuming this can be - as I was able to observe in clinic, the paperwork required for each patient was a major contributor to clinics running overtime.

Objective 3: How does the culture surrounding healthcare differ in a private healthcare system as compared to a public one?

One key difference between the healthcare system here in Bahrain and that of the UK that really stood out to me was the doctor-patient dynamic. In the UK, the public healthcare system means that while a patient-centred approach is still taken, patients themselves have very little say in which investigations and management options are carried out; these decisions are primarily made by the medical team. In Bahrain, however, where patients are paying for the service, it was clear that they had more of a say in the formulation of their management plan. I discussed this with the consultant who pointed out that because this is a private service, there are more complex considerations in terms of maintaining positive patient attitudes towards their health and the healthcare system more broadly. Patients paying for a private service inevitably feel more entitled to having a greater say in their management.

Another interesting observation was the level of patient satisfaction with the service provided as compared to that of the UK. During my UK elective, I was able to observe how a lot of the patients managed within the NHS had expressed some level of frustration at the inefficiencies within the system. Examples of this include waiting times for particular services and discrepancies in the management plan when referring within the multidisciplinary team. This was to be expected as the NHS is a publicly funded system; time and resources are scarcer. The healthcare system in Bahrain provides a sharp contrast to this - in a system that is predominantly privately funded, hospitals are better able to share resources between departments and both staff and resources are better able to meet patient demand. This has a direct impact on patient satisfaction with the service provided and more broadly, their interactions with the healthcare system. In a system where patients feel as though their needs are attended to in an efficient and effective manner, their approach to the management of their condition is generally more optimistic.

Objective 4: How do you manage patient expectations in a private healthcare system? Does this differ between elective and emergency systems?

Patient expectations were noticeably higher in Bahrain as compared to patients managed within the NHS. A large contributor to this is the fact that the patient is paying for the service directly, thus expecting more from the consultation both in terms of the investigations performed and management options considered. This was reflected in the doctor-patient relationship, there is a greater responsibility on the healthcare professional's part in making sure patient expectations are met to a standard where the patient feels they are paying for an efficient and effective service. In the NHS, where there is generally less financial incentive on the patient's part, this element is less evident in the doctor-patient relationship. In the private healthcare system, doctor's also have a responsibility to communicate clinical decisions with insurance companies, this further feeds into higher patient expectations. This was interesting to learn as I had previously thought that despite higher patient expectations, workload for the healthcare professional would be less owing to better resource availability. This was not the case however, as the private healthcare system comes with its own complexities, the interplay between the patient, doctor and third parties such as insurance companies being one such example.