Surgery waiting list targets remove choice and penalise services

The 18 week target will prevent patients from choosing when they have surgery. Staff should be able to use their clinical judgement to meet patients’ needs, says Linda Nazarko.

In the past, people needing elective surgery were forced to wait months or even years on NHS waiting lists. Now they should expect to wait no more than 18 weeks, and soon those waiting longer will be entitled to private healthcare. Is this a triumph for consumer choice?

Sometimes targets, such as the 18 week wait, can have unintended consequences and can actually limit choice and potentially penalise services that aim to offer patient choice.

I have been a nurse for 31 years and those years have taken their toll on my feet. Last year, I decided to do something about it, and the patient choice initiative enabled me to decide where to have surgery to correct the bunion on my left foot. So far so good; the operation was scheduled and the podiatry surgeon succeeded in making a silk purse out of my sow’s ear of a foot.

I recovered quickly but not as quickly as I would have liked. My foot remained swollen for many months and I wore below the knee compression stockings for months to control the foot oedema. The surgeon assured me that this swelling was normal after surgery, but the trouble was that I had another foot that also needed surgery. The surgeon asked me when I would like it done.

The government seems to think that those of us who wait more than 18 weeks are being forced to do so but, sometimes, it is a matter of choice. I wanted to give my left foot the chance to completely heal. I knew I would have to put all my weight on it after surgery on my right one.

I had other reasons for wanting to delay my second operation. I wanted to time it so it would not interfere with my summer holiday since it is not possible to fly for six weeks afterwards, while wounds interfere with swimming and heat exacerbates foot swelling. Also, I did not want to be on crutches over Christmas, and January can be an extremely busy month at work.

I worked out that it would be best for me to have my operation seven months after my initial consultation. However, if the surgeon allowed me to choose when I had my operation, the hospital would not meet its targets.

This demonstrates how hospital staff who are being truly patient centred can appear on the statistics to be failing patients.

Had I been a private patient, I could have chosen when to have my surgery and could have scheduled it to meet my personal circumstances.

Fortunately, there are always ways to circumvent inflexible systems that get in the way of providing good patient care. Unfortunately, circumventing systems is not always the most efficient way to work, but needs must.

If the system had been flexible, my surgery could have been booked months ago. Staff would be able to plan surgery in advance and patients could be allocated dates that meet their needs, rather than arbitrary targets that actually reduce choice. Instead of this, I must return to the hospital for another outpatient appointment so I can officially go on the waiting list at the right time.

The care I have received throughout my patient journey has been excellent; all staff have treated me with dignity and respect. I just wish they too could be treated with dignity and respect. They should be allowed to use their clinical judgement about when to schedule elective surgery rather than being forced to meet targets that would not be out of place in a factory production line.

LINDA NAZARKO is consultant nurse for older people, Ealing and Harrow Community Services.

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