In the past few years, the NHS has been subject to massive media scrutiny. One of the big topics of discussion has been the government encouraging more privatisation of healthcare services and increasing the proportion of income trusts can make from private patients. This has led to media reports claiming this is the first step in the ultimate demise of the NHS, which has been the backbone of Britain since 1948.

It’s understandable that the public has a negative view of private healthcare services. However, I believe that NHS and private patient services can work together to mutual benefit.

I work on a private patient ward in an NHS hospital; before this, I worked on an NHS elective surgical ward. Since the ward opened in October 2013, its staff have received a lot of negative comments from some of those who work on the general wards in the hospital. This appears to be mainly due to the ideal of the NHS being free for everyone and that treating private patients goes against this.

The ward is seen by some as a separate entity to the hospital despite being part of the trust. This seems to be due to a lack of communication about how these types of ward work and the benefits they provide the trust.

The private patient ward is a great source of revenue for the trust. This helps pay for new staff, equipment and NHS services. Several trusts are now opening private patient wards. This helps to make more beds available on the NHS wards where these patients previously would have gone. This is of great benefit, particularly with winter pressures.

One of the main worries about the increase in the private patient cap is that NHS patients will be left waiting even longer for elective surgery. However, some trusts have dealt with these concerns by building new operating theatres for use by both private and NHS patients. In addition, private outpatient clinics have been built that allow patients to have clips, stitches and drains removed. These services are traditionally performed by community or practice nurses and such clinics allow them to spend more time with NHS patients.

On a personal basis, I feel that the benefits of private patients are overlooked and undervalued. In the future, private services could be a major factor in the financial sustainability of the NHS. With more NHS trusts opening such services, it is crucial that their benefits and goals are effectively communicated to all staff. Increasing their knowledge and understanding of how private services can benefit all users of the NHS may help reduce the resentment felt by staff who have to treat private patients.

Mark Lambert is deputy charge nurse at the Candover Suite, Basingstoke North Hampshire Hospital

Eileen Shepherd is deputy practice editor of Nursing Times.
eileen.shepherd@emap.com
Twitter @EileenShepherd. Don’t miss the practice blog, go to nursingtimes.net/practiceblog