



CURE THE NHS's BLUEPRINT FOR A NEW NHS

The name of this group was deliberately chosen to express its ambition, to **cure** the NHS. Cure it of what? Of the malaise that has gripped it in recent years, particularly in the way it treats the vulnerable elderly, so clearly set out in the evidence to the Public Inquiry from Cure the NHS members and other witnesses..

That requires three fundamental transformations in the way the NHS, principally the acute sector operates. These transformations can and should apply equally to services delivered by care homes, in fact to all provision of healthcare services, state and private.

i. A transformation of the way the NHS behaves minute by minute with its patients to rebuild the culture of care and embed in it a culture which focuses solely and continuously on the safety of patients and on the quality of the care they are receiving. To ensure that all patients in the UK whether of the NHS or any other provider receive their care *right first time* with *zero harm*.

ii. A transformation in the way the NHS operates day by day in its implementation of all the disciplines which keep patients free from harm during hospital treatment, which by its very nature has many inherent hazards, "*Patient Safety Management System*".

A transformation in the way the NHS (a) defines the standards "*best practice*" for each and every element of the treatment and care it provides, the "quality" of care, (b) how it delivers those standards to each and every patient during every minute of their stay, "*right first time with zero harm*", (c) how it monitors and measures how well it is delivering those standards, "*quality assurance*", (d) how it makes changes to fill gaps and draw in new ideas, "*continuous improvement*"; in total a "*Patient Care Quality Management System*". This will mean a well-ordered system of guidance without duplication which does not deflect staff from their primary task of patient care.

iii. A transformation of the regulatory structure to assure patients and the public that all providers of health services have the "*capability*" to deliver safe care to these standards of quality, have been delivering it, are continuing to deliver it, and will be able to deliver it in the future, by consolidating the activities of the many disparate elements of healthcare regulation into one regulatory body.



We recommend that the Health Secretary needs to get on with (should have got on with years ago) :-

ii. Rebuilding the culture of safety and care

iii. Implementing Two Essential Systems – safety management and quality management

iv. Establishing a Single Regulatory Body

v. “Stop and Make Safe” – Assuring Patients and Communities

vi. Re-establishing Clinical Leadership of the NHS

vii. A Rapid End to Whistleblowing

viii. Drawing Coroners into the Assurance of Patient Safety and Quality of Care

ix. Complaint Handling

x. Investigation of Healthcare Failures

xi. Giving HealthWatch a Stronger Voice

xii. Putting the Nursing Back in Nurses