Aims and objectives

This course will look to compare the National Health Service (NHS) in the United Kingdom (UK) and approaches to health in the United States of America (USA). Students will explore differences in the way health systems are funded, delivered, and differences in health outcomes of the patients they serve. The course will take a multi-disciplinary approach to health care and include health service design and aspects of health protection and health promotion. The course will focus on the NHS but we will seek to draw on commonalities and differences to the USA, where appropriate. Students will also be introduced to recent health policy developments in England and the unique relationship between the NHS and the media in the UK.

It is hoped that students will have the opportunity to meet and discuss related issues with professionals working within some areas of the NHS including clinicians, and those involved at a national level.

Learning outcomes

By the end of the course students will:

- have gained an insight into the health service in the United Kingdom, and recent policy developments,
- have a critical understanding of the implications of different health systems at a population level,
- have gained an understanding of the common challenges facing health systems across many countries, and
- have a critical understanding of the strengths and weaknesses of different data sources used for comparison across the health systems.

Course reader

This course reader contains material to support students studying Comparative Healthcare, and includes a range of peer reviewed articles, policy documents, and other sources.

Core reading

In order to gain the most from each session you are asked to please read core selected material, in your own time, prior to each lecture. These sources have been selected specifically for each lecture to introduce specific topics and provide background information. It is hoped that this reading will support you in your learning and help you develop informed opinions about comparative healthcare.

Optional reading

Additional reference material is also available in the reader exploring concepts in greater depth. These references are for those students who are interested and wish to read further. This is optional.
Overview of course content

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Abbreviations
The NHS has numerous abbreviations. Here is a list of the most common, but please ask if I use others not in this list.

A&E Accident and Emergency
CCG Clinical Commissioning Group
CDC Center for Disease Control and Prevention
CQUIN Commissioning Quality and Innovation
DH Department of Health
DRG Diagnosis resource group
GP General Practitioner
MRSA Methicillin-resistant *Staphylococcus aureus*
NHS National Health Service
NICE National Institute for Health and Clinical Excellence
PHE Public Health England
QIPP Quality Innovation Productivity Prevention
QOF Quality and Outcomes Framework

Week 1. Introduction to course

Aims and objectives
By the end of this session the students should
- understand the origins of the NHS, its principles and geography
- have an overview of the differences in the types of health systems in the United Kingdom (universal health system funded by taxation) and the United States of America (market based health insurance)
- begin to understand the implications of these different health systems at a national and personal level by exploring broad themes including inequalities in access to care, affordability of health care.
Outline of group work
Following introductions, the class will be asked to work in small groups and explore their own perceptions of the health care system in the United Kingdom and the United States of America, with regards key themes which will be covered in more detail throughout the course including: health care funding, affordability, inequality, access to advancing treatments, health outcomes (life expectancy) and innovation.
A lecture will follow introducing the NHS, and comparing the key differences between this universal health care system and the marked based health insurance in the USA. There will be time for discussion about the key concepts of universal health care such as society’s role in its people’s health.

Core reading

Optional reading

Week 2. Health care structure: How is health care delivered?

Aims and objectives
By the end of this session students should have a good understanding of:
• the structure of the NHS health systems at a local and national level, including the role of primary care and secondary care,
• the role of different organisations governing the NHS (e.g. Department of Health, Public Health England, NHS England, Care Quality Commission, Monitor) and comparable organisations within the USA health care system,
• and be introduced to the concept of patient choice of provider, beginning to demonstrate a critical understanding of the accessibility of services.

Outline of lecture 1
This lecture will introduce students to the structure of the NHS, the key points of access for patients and the public, and examine the role of health professionals working within different areas of the NHS including primary care, and secondary care. Students will also be introduced to the organisations which work at a national level to govern different aspects of the NHS including quality of care and finance.

Outline of seminar
Students will have to map components of the health systems in England and compare this with the structure of the USA system to explore the differences in health care structure. The implications of the different structures of the two health systems on access to health care services, on the health outcomes of the population will be explored.

Outline of lecture 2
This lecture will provide a brief introduction into patient choice within the NHS and USA health care systems.
Core reading
Please look at the information on NHS Structure on the Department of Health website link
http://www.nhs.uk/NHSEngland/thenhs/about/Pages/nhsstructure.aspx

Optional reading
NHS Choices http://www.nhs.uk/Pages/HomePage.aspx : NHS Choices is the online 'front door' to the NHS. It is the country's biggest health website and gives all the information you need to make choices about your health.

Week 3. Health policy: Implications of recent health reforms in the USA and England.

Aims and objectives
By the end of this session students should have a good understanding of:
- the underlying case for change and subsequent aims of the “Affordable Health Care Act” in the USA
- the underlying case for change and the subsequent aims of “Health and Social Care Bill” in the English NHS system,
- the implications of both health reforms on their respective populations.

Outline of lecture 1
This lecture will briefly summarise the case for change and the subsequent aims of the recent health reforms in the USA.

Group task
Students will be asked to work in small groups to discuss the impact of the changes on specific groups (individuals and employers). The class will then reconvene to share thoughts and to hear specific case stories from a cross-section of the USA population.

Outline lecture 2
This lecture will introduce the recent health reform in England and explore the implications for patient care.

Core reading
Department of Health (15th June 2012). The Health and Social Care Act explained. Various factsheets about the Health and Social Care Act including:
- Overview of the Health and Social Care Act 2012
- The case for change
• Integrated care
• Inequalities in health (and others available at [www.dh.gov.uk/health/2012/06/act-explained/])

Optional reading

Week 4. High quality care: initiatives to ensure a quality health service

Aims and objectives
By the end of this session students should:
• have a good understanding of different ways in which quality can be defined and measured in England and the United States.
• be familiar with current initiatives to improve the quality of care in England including QIPP and payment for performance.
• have an overview of the regulation and governance mechanisms for quality in England.

Group task
Students will be asked to work in small groups for 15mins to decide on how they would define quality in healthcare, and will be prompted to think of defining a high quality service at (i) an individual level, and (ii) at a group (population) level.

Outline of lecture 1
This lecture will look to answer the question “what does high quality care look like?”. Different definitions of quality will be considered including that of Lord Darzi in England (‘clinically effective, personal and safe’) and in the USA. This lecture will also review some of the ways to measure quality.

Outline of lecture/class discussion 2
This lecture will provide students with background information on different initiatives to ensure delivery of a quality health service including payment for performance, and balancing quality and cost through QIPP (in England) and Triple Aim (in the USA). Students will be asked during the lecture to consider the advantages and disadvantages of a number of initiatives on patient care.

Core reading

Optional reading
Week 5. Health financing and efficiency

Aims and objectives
By the end of this session students should:

* understand the levels of health care spending in the UK and USA, and future trends.
* have a good understanding of the different funding mechanisms which can be used in health care, and be able to describe the advantages and disadvantages of each method against the cost and quality of care.
* be introduced to recent initiatives in England and the USA to drive efficiency in a health care system.

Outline of lecture 1
This lecture will briefly summarise the level of health care spending in the UK and compare that to the USA and population level indicators of health. Future trends in health care spending will also be examined, and underlying reasons for those trends explored.

Outline of seminar
Different funding mechanisms will be introduced (including block contracts, and payment for results), and students will be asked to work in small groups to consider the effect of each method on the cost and quality of care.

Outline of lecture 2
This lecture will discuss the need for greater efficiency in health systems and recent initiatives in England to drive efficiency savings.

Core reading

Optional reading

Week 6. The health system and infectious disease

Aims and objectives
By the end of this session students should:

* have an understanding of how protection against infectious disease operated in the NHS (i.e health protection), including the role of different components of the health care system and wider organisations.
* Be familiar with the responsibilities of Public Health England and the similarities with the

Outline of lecture
The lecture will introduce infectious disease control in the NHS and the roles of different parts of the health care system (such as infectious control teams in hospitals and management of patients with Tuberculosis, Environmental health teams and control of Salmonella related food poisoning). The responsibilities of Public Health England and the overlap with CDC will be discussed.
**Workshop**
Students will work in small groups, as if they are in a Public Health Team, and review real data and reports from a measles outbreak in South Wales in 2012/13 – the largest measles outbreak in the UK for many years. Students will have to discuss the actions taken, response from the public and the media and explore the underlying reasons for the measles outbreak. An indepth knowledge of the clinical management of measles is not required, and key points will be provided to help understand the context of this disease.

**Core reading**
- Center for Disease Control and Prevention (CDC) http://www.cdc.gov/
- Public Health Wales. What is measles?

**Week 7. Role of primary care/general practitioners**

**Aims and objectives**
By the end of this session students should:
- have a good understanding of the role of a family doctor (general practitioner (GP)) in the NHS
- understand the advantages and disadvantages of having a “gatekeeper” in a health service
- understand the changing role of general practitioners in England, as the new commissioners, the aims of a clinical led health care organisation and the possible pitfalls.

**Outline of lecture 1**
This lecture will be delivered by a guest speaker (a General Practitioner (GP) in training working in North London). The lecture will explore the role of the GPs in the NHS as the patients advocate and “gatekeeper” to secondary services.
There will also be time for discussion about how medical training is structured in the NHS, opportunities for professional development within the NHS, and what it is like to be a student doctor working within the NHS.

**Seminar**
Students will be asked to explore the advantages and disadvantages to individual patients and the population of having a “gate keeper” role in the health service.

**Core reading**
- Forrest C. (2003). Primary care gatekeeping and referrals: effective filter or failed experiment? BMJ;326:692.1

**Optional reading**

**Week 8. Half term**
Week 9. Using health technology: the 21st century advances in healthcare

Aims and objectives
By the end of this session students should:

- understand the rationale for health systems to innovate, and factors which can encourage innovation (e.g. competition) or discourage innovation (e.g. cost control).
- be aware of the role of the National Institute for Health and Clinical Excellence (NICE) in the advancement and implementation of new medical technologies in the UK
- be able to question the aims of advances such as Telehealth to critically appraise their effect on patient outcomes.

Outline of lecture 1
This lecture will briefly cover the policy context in England driving innovation in healthcare and then go on to explore the different driving forces for innovation in England and the United States, and factors which can encourage or discourage innovation in health. Students are encouraged to add to discussion throughout the lecture.

The role of NICE will also be explored and the importance of comparative effectiveness research when considering the implementation of new advances in care.

Seminar
Students will be given brief descriptions of Telehealth (innovation in care delivery being piloted in England) and one other innovation from the USA (Health Information Technologies), and asked to work in groups to consider the effect of these innovations on the patients’ perceptions of care, quality of care, and on the health care system.

Outline of lecture 2.
This closing lecture will present the findings from a recent randomised trial examining the impact of Telehealth on the health care system, the response from the DH, and the lessons for future innovation in care delivery.

Core reading

Optional reading

Week 10. Should the individual or the state ensure people look after their health (Health promotion)

Aims and objectives
By the end of this session students should:
• have a good understanding of the role of the individual or the state to improve health
• understand some ethical considerations of mass health promotion campaigns
• have an overview of the current initiative in the UK using nudge to encourage people to make the right health decisions.

Outline of lecture 1
This lecture will provide a brief overview of a model of the determinants of health, and students will be asked to consider which components may be changed at an individual or state level. The lecture will go on to explore the social responsibility and individual responsibility for health, and health promotion which can be applied at a population wide (e.g. smoking ban) or individual (e.g. informed choice) level.

Seminar
Students will be asked to work in small groups and review different mass health promotion initiatives (e.g. smoking ban, tax on alcohol) and consider the impact on different sections of society, and to assess each initiative against Kass’s ethical framework for public health.

Outline of lecture 2
This lecture will be delivered by a guest speaker from the Behavioural Insights Team within Public Health England to discuss the adoption of Nudge, a concept initially developed by two American academics, here in the UK to encourage people to make the right health decisions.

Core reading

Optional readings
Have M, Beaufort I et al (2010). An overview of ethical frameworks in public health: can they be supportive in the evaluation of programs to prevent overweight? BMC Public Health, 10:638

Week 11. Longer life and or a healthier life?

Aims and objectives
By the end of this session students should:
• have an understanding of key measures in health including life expectancy, mortality and morbidity (incidence and prevalence of disease) and what those measures reflect in patient care.
• have a good understanding of the factors to consider where comparing health outcomes and to be able to apply that knowledge.
• know where to look for population level data sources on health in the USA and UK: including examples from Dartmouth Atlas, HEDIS and CMS measures.

Outline of lecture
The lecture will review different measures of health including mortality and morbidity. Each term will be explained and students asked to contribute to discussion about what each indicator might reflect in patient care. The lecture will also highlight key considerations when comparing different data sources.

Class discussion/Seminar
Having read the Faehem and Ham articles before the session, we will explore the comparison of the NHS and US Health care systems initially made by Faehem et al, question it’s validity and compare the results from Ham.

Workshop
Students will be asked to work in small groups and be provided with reports and figures on specific health outcomes in the UK and USA. They will be asked to compare the information provided, assess its validity and report back to the class drawing conclusion about the differences in health outcome. This information will be useful for The Big Debate later in the course.

Core reading

Week 12. Visit to a NHS Acute Trust (Hospital).

Aims and objectives
The aim of visiting the Royal Free London NHS Foundation Trust (www.royalfree.nhs.uk) is to give students the opportunity to see how a NHS hospital functions, to understand the financial aspects of running an NHS hospital, and to view some clinical areas.
The Royal Free is one of the UK’s leading teaching and research trusts employing over 5,000 staff and seeing around 600,000 patients a year from all over the world, and managing over 93,000 accident and emergency patients, and has operating costs of approximately £600 ($900) million.

Week 13. Integrated care in the NHS and the USA

Aims and objectives
By the end of this session students should:
- understand the concept of integrated care and realise it’s potential to improve patient care
- be aware of two examples of integrated care in the English NHS and the American health system
- understand some of the methods used to try and measure the impact of integrated care on patient outcomes.

Outline of lecture 1
The opening lecture will provide the theoretical background to integrated care, how it is defined, the potential benefits for patients. The policy context driving integrated care in the English NHS system will also be explained.

Group work
Working in small groups students will be asked to explore to integrated care systems, Torbay in South west England and Kaiser Permanente in America. Students will be provided background information to the two health systems and asked to work together to answer a series of questions to draw out similarities and differences between the two systems. This will be followed by class discussion.

Outline of lecture 2
This lecture will present the findings of a study completed by Feachem et al which compared measures of efficiency and quality of care between the NHS and Kaiser Permanente. The results of the study were lively debated in the academic literature – we will discuss the key themes arising and consider if there are still lessons to learn from respective health systems.

Core reading

Optional reading
Feachem RGA, Sekhri NK, White KL (2002). Author’s reply to getting more for their dollar: Kaiser v the NHS. BMJ;324:1583.

Week 14. The NHS and the media

Aims and objectives
“The NHS and the media” will examine how the NHS is portrayed in the media and the roles of the national and local press in presenting “good” and “bad” news stories about the NHS and it’s status as a National Treasure.

Week 15. The Big Debate

Aims and objectives
This session will encourage students to:

- begin to develop well structured, informed opinions on the health care system in the UK and the USA.
- develop presentation skills.

Students will be asked to work in small teams to develop a well-structured presentation arguing for or against a debate topic (the debate topics will be provided two weeks previously). Students will have to work together to develop their arguments drawing on the material throughout the course. Students will then be asked to present their case to the class and the debate will be opened to the floor, with a vote deciding on the winners.

Closing lecture
The final lecture in the series will summarise the key themes from the course in preparation for the examination.

Week 16. Exam week
The examination will take place in the ACCENT International center. Students will be asked to write answers to three out of six possible questions. The questions will relate to themes covered during the course and will assess students understanding of key concepts of comparative healthcare.