The McDonaldisation of medicine: Time and the day surgery patient

Mottram, A

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Time and the day surgery patient

McDonaldization of Day Surgery

Anne Mottram
Faculty of Health and Social Care
University of Salford
Greater Manchester. UK
0161 295 2721
a.mottram@salford.ac.uk
i’m lovin’ it
Introduction

In the United Kingdom a day case patient is defined as:

“a patient who is admitted for investigations or operation on a planned non-resident basis, but who requires facilities for recovery. An over-night stay in hospital is not normally required”

Royal College of Surgeons 1992
Growth of Day Surgery 1994 - 2005 Percentages

- 1994
- 1997
- 2002
- 2005
Introduction

The Growth of Day Surgery 1994-2005 - Percentages

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<th>Year</th>
<th>Percentage of All Elective Surgery that is Day Surgery</th>
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<tr>
<td>1994</td>
<td>45%</td>
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<tr>
<td>1997</td>
<td>65%</td>
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<td>2002</td>
<td>70%</td>
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<td>2005</td>
<td>75%</td>
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Although there has been a massive expansion in day surgery there has been surprisingly little sociological research concerning this development.

Within the space of three hours a patient is admitted to hospital, undergoes a general anaesthetic, followed by a significant surgical intervention and then is discharged home where responsibility for their care is transferred to the patient and their family.
Aim of the Study

- A study was devised to gain an understanding of the patient experiences within a sociological frame of reference.
- 145 patients from 2 different day surgery units were recruited to the study.
- Qualitative framework utilising grounded theory approach enabled deep insights into the patient experience.
Methodology

- 145 patients and 95 relatives were interviewed on three occasions:
  - in pre-operative assessment clinic
  - 48 hours after surgery
  - 4 weeks after surgery
Emergent themes

- The importance of time to the day surgery patient
- The ambiguity of the sick role for day surgery patients
- Issues of control
- Therapeutic relationships
- Formal Communication
Emergent theme: Time

- Patients liked Day Surgery
  (only 6 patients did not like it: “day surgery should be banned”)

Patients liked the Speed and timeliness of Day Surgery.

Patients wanted a fast speedy efficient service:

“Get me in, get on with it and get me out of here”
Core Concept: Time

"The trouble with the NHS is its all the waiting! You can be waiting for years from when the trouble first starts to when its first treated. That’s the main thing about private health care. You buy time. Everything gets done immediately."

(Colin age 44 wrist arthroscopy)
“The toilets were dirty. They reminded me of pub toilets....I told the nurse. She rang the cleaners but they took so long to come. They should have someone checking the toilets on a regular basis like at McDonalds. The NHS should take a leaf out of their book” (Colin)
“I was relieved when Mr (surgeon) said I could have it done in a day. At least I knew it meant I would be home the same day and in my own bed that night.”
“I was relieved when Mr (surgeon) said I could have it done in a day. At least I knew it meant I would be home the same day and in my own bed that night”
Time and Speed

Terence was asked if he would prefer an in-patient stay:

“You’ve got to be joking! It’s the only way I am going to have it done. I can just about cope with day surgery because I will only be there for a day. A bit like taking the car to kwik-fit” (Terence age 40)
“I don’t have time to be ill! I don’t have time to be in hospital. If it wasn’t so painful I wouldn’t bother having it done”

(Katherine age 28, tendon repair)

The doctor told me this operation is two-a penny. Its like roll –on roll-off. That suits me fine. The sooner I’ll roll on then the sooner I’ll roll off”

(Nancy age 42 knee arthroscopy)
Moral use of Time
Wasted Time
Time as a conveyor belt
Weber:

"waste of time is thus the first and deadliest of sins. . . . .

Time is infinitely valuable because every hour lost is lost to labour for the glory of God" (1948: 157)
Wasted Time

“I have had a wasted two years. It’s been getting bigger and more painful. It’s made going to work difficult. I blame my own doctor for this (G.P.) He did nothing. I’m glad to be here though. They seem to waste no time here”

(Malcolm age 40, hernia repair)
“She, (G.P.) kept giving me ear drops and then when nothing happened she gave me two lots of antibiotics. I was in agony with my ear. I’m in my final year at uni. The pain was interfering with my studies. Once I got here though things have been pretty quick and I was pleased to know I can have it done in a day. I can’t afford any more time away from my studies. I’m aiming for a first” (Yasmin, aged 23, student)
“Goodness. I don’t know what I shall do with all this time. I am usually knitting or sewing. I never sit still. The devil finds work for idle hands! That is what my mother always used to say”

(Millicent aged 55, wrist arthroscopy)
Day Surgery as a conveyor belt

“ I was very uncomfortable with what I would call the rush factor. No sooner had I woken up when they were saying ‘do you feel like getting out of bed yet?’”

I felt like saying “hang on a minute! I’ve just been split open, and have only just come to my senses after the anaesthetic”

( Geoff, age 42, repair of hernia)
Day Surgery as a conveyor belt

“...I felt the whole experience was like going shopping for a washing machine at ‘Comet.’

…….you want to look at ten washing machines but the assistant is looking at his watch and saying its minutes to closing time so can you just look at one and make your mind up quick…..having day surgery is bloody hard work”

(Donald, age 40 hernia repair)
McDonaldization of Day Surgery

McDonaldization:

“the process by which the principles of the fast food industry are taking over more and more of the western world”

(Ritzer 2000, 2004)
McDonaldization Process

- Consists of four alluring dimensions:
  - Efficiency
  - Calculability
  - Predictability
  - Control

(Ritzer 2004)
McDonaldization of Day Surgery

One further important feature of McDonalds

- It puts its customers to work

Day surgery patients and their relatives now perform the work that was previously performed by health service professionals.
McDonaldization of Day Surgery

- However patients are willing to undertake these roles.

They appear to see this as a “trade off” between the extra control allowed on the day of surgery and minimal disruption to their lives against the worry, responsibility of caring for themselves in the post-discharge period.