

LET A LITTLE COLOUR INTO YOUR LIFE

Our attention has been drawn to the science of colour psychology and, in particular, its applications in marketing (including branding, packaging and product design). But before you dismiss this as pure gimmick, you might want to examine the evidence. According to one commentator, colour is more than the mere cosmetics of how things look. 'The truth is that colour is light - the source of life itself.' (It gets better). Apparently, there is a large body of scientific research that has explored the relationship between colour and behaviour. The same commentator gives us some useful insights:

- There is no such thing as a universally attractive colour. (We thought everyone's favourite colour was blue. Or was it red?)
- There is nowhere that colour does not exist
- There are no wrong colours

And if we want to be a bit more specific, here is a sample of her interpretation of the psychological properties of colours. (We are not making this up).

- **Red:** Not technically the most visible colour. It has the property of appearing to be nearer than it is. Hence its effectiveness in traffic lights
- **Blue:** It is the colour of clear communication (so always speak in blue tones). Blue objects do not appear to be as close to us as red ones
- **Orange:** Focuses our minds on physical comfort. Or alternatively, the exact opposite - deprivation. (All bases covered then)
- **Violet:** It takes awareness to a higher level of thought, even into the realms of spiritual values. It has associations with time and space and the cosmos
- **Brown:** Can indicate a lack of humour, heaviness and a lack of sophistication

So, which one did she get right? We couldn't possibly comment.

FINAL THOUGHTS

The *Sunday Times* (16th September) reported a return to secondary picketing. Workers for IBM in Italy have been refused an increase in pay. Not only that, but staff benefits have been cut as well. Naturally, this being Italy, a strike was called. But not content with calling out the workforce, they are also arranging the world's first virtual strike. The alter-egos of IBM workers in Second Life, the online virtual world, are also being urged to take industrial action.

Also in Italy, the *Health Service Journal* reported an initiative in one town that will reward overweight residents who lose weight. 50 euros will be paid to every man who loses 9lb and every woman who loses 7lb. A further 200 euros will be given if they keep the weight off for five months. That should be enough to keep you in pizza and Peroni for a while, after which you can start all over again.



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Newsletter



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LORD DARZI TO THE RESCUE

Lord Darzi has presented his interim report, *Our NHS Our Future*. And in truth it is short on substance. For that, we must wait until July 2008, when he will report more fully on the work of his 72 champions (8 for each of the regions outside London) who are charged with working out local solutions. For now, what he offers is a vision of an NHS that is 'fair, personalised, effective and safe' (essentially the same as every other vision of the NHS for the last twenty years) and a heartfelt belief that the NHS just is not responsive enough. This accords with the latest Wanless report, published by the Kings Fund because the Government would not commission it. In it, Wanless predicts that the NHS is not yet on track to meet the middle of his three future scenarios, let alone the fully engaged scenario. And he states that productivity is still far too low.

In his earlier review of NHS services in London, Darzi challenged the ability of District General Hospitals 'to provide all services to a high enough standard', and proposed polyclinics as the preferred model for core primary care services. But in his latest pronouncement he has been at pains to point out that what is right for London may not be right for the regions (hence the regional champions). Even so, general practice has been placed quite firmly in the spotlight, especially in terms of access. 100 new surgeries are proposed in the country's most under-doctored areas. Polyclinics will undoubtedly be on the agenda, and evening and weekend opening hours are a must do. The response of the BMA was predictable enough - demand more money (not to line the pockets of GPs, of course, but to provide longer opening hours) and lambast the polyclinic model. Additional money for GPs is about as likely as a white Christmas in the Sahara, especially with private providers forming an orderly queue and quite prepared to provide what the public apparently wants. And chief amongst the counter arguments for polyclinics is the BMA's view that they erode the ethos of traditional general practice. But the mobility of the UK population has increased enormously since the 1990s. Data from the British Housing Panel Survey indicate that a household will move home every 5 to 10 years, and 1 in 10 adults moves home every year. If by 'traditional general practice' the BMA means continuity of care for every patient over many years, then that horse bolted long ago.

LEAGUE TABLES

Health Consumer Powerhouse has recently published its 2007 index of 29 European health services. Britain was placed 17th, two places lower than last year. Of the countries beneath Britain, only one, Italy, is not significantly less rich. Britain was criticised for long waiting times, regional variations in the supply of healthcare, low rates of five-year cancer survival, and the scale of MRSA infection in NHS hospitals. The top five countries (Austria, Netherlands, France, Switzerland and Germany) all have healthcare systems based upon competing insurance companies that work independently from health service suppliers. Health Consumer Powerhouse argues that this approach runs rings around the British system of unified funding and provision when it comes to overall value for the consumer.

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COMMISSIONING

Are Primary Care Trusts (PCTs) going to find themselves fighting for their lives? A pamphlet issued by the New Local Government Network proposes the abolition of failing PCTs, the work of managing local NHS services passing to local councils.

The pamphlet's author, Dr Victoria Barbary, argues that finance and the commissioning of care are managed better by local authorities than by PCTs. She states that few PCTs have specialist commissioning skills. Furthermore, because local authorities are democratically elected, they are more responsive and transparent in their management. Their involvement in commissioning would 'give more control to citizens and drive up standards.'

HERE AND THERE

- The poorest fifth of the population now receives more than half its income in state benefit. In Glasgow, 55 per cent of households have no earned income and male life expectancy is 69 years, lower than in the Gaza Strip, North Korea and Iran. [The Spectator, 30th June 2007](#)
- The CBI estimates the time spent by employees attending appointments with GPs during office hours costs the economy £1 billion. [The Observer, 22nd July 2007](#)
- Last year there was a 53% rise in the number of cosmetic surgery operations in Britain. The market is now worth an estimated £500 million per year. [The British Association of Aesthetic Plastic Surgeons](#)
- The actual size of Labour's majority at the last general election has been calculated as 13,515. Had these people voted differently, Labour would have secured 322 seats and would have been in charge of a minority government. [Daily Telegraph, 10th September 2007](#)

THE POWER OF THE INTERNET

Mountains of rubbish (thanks to fortnightly bin collections) combined with torrential rain brought a plague of rats to the streets of Britain in July. But the UK's very own corporate Pied Piper, Rentokil, leapt to the rescue and enjoyed its busiest month for 10 years as a result. Chief

UNCONVENTIONAL WISDOM

Most doctors will be familiar with the principle of Occam's Razor. It teaches us that the simplest explanations are invariably the best - if you hear hooves, think horses not zebras. However, one must be careful not to oversimplify

To the sceptics this sounds like a land-grab, promoted by a think-tank with a clear vested interest in the outcome. But politicians are taking this matter seriously. Health minister Ben Bradshaw has warned of problems with the accountability of PCTs. And more recently, Liberal Democrat health spokesman, Norman Lamb, has nailed his party's colours to the mast - PCTs should be replaced with elected health boards, or their work should be transferred to local government to improve democratic accountability.

A note of caution comes from the Audit Commission, which has challenged the quality of local government commissioning. And giving NHS commissioning powers to local government will not reduce the democratic deficit per se. If anything, such a move will ensure the continued politicisation of healthcare at a local level.

- Russia produces more natural gas than the next six countries combined and has over a quarter of the world's proven gas reserves. [NationMaster](#)
- You are 500 times less likely to drown on a life-guarded beach. The extra cost to the RNLI of providing lifeguards on all of our beaches is a little over twice the cost of its VAT bill. [Daily Telegraph, 27th August 2007](#)
- Last year, the National Patient Safety Agency received nearly 25,000 reports of patients being 'mismatched' with their care. In nearly 3,000 of these cases, mistakes happened because someone misread a patient's identity wristband. [The Guardian, 26th July 2007](#)
- Life expectancy varies by more than 30 years between communities according to latest figures. People in Didcot can expect 86 healthy years, compared with 55 in parts of Middlesbrough. [Office for National Statistics](#)

Executive, Doug Flynn, acknowledged that rubbish and the weather had something to do with the dramatic upturn in business. But it also had a lot 'to do with our online marketing.' Don't think so, Doug.

the implications of routine observations. Written in a patient's medical records, 'The patient's past medical history has been remarkably insignificant with only a 40 pound weight gain in the past three days.'

A FAMILY AFFAIR

'Screening and treating middle-aged people with a family history of coronary heart disease could have prevented 42% of premature myocardial infarctions and 8% of all myocardial infarctions.'

This was the finding of a recent study by the Glasgow Cardiovascular Research Centre. It has long been understood that blood relatives can have identical genetic triggers - a predisposition for heart disease. And those who share a home probably also share a lifestyle. The conclusion - being related to, or even just living with someone with heart disease is a significant risk factor for heart attacks.

But because we do not routinely screen relatives for familial and other risk factors, a wealth of potentially life-saving preventative work is never undertaken. Of course, we need to understand the cost of extending primary prevention. This must be weighed against the probable future benefits (added life years and reduced costs in acute care and secondary prevention). And it must be viewed in the light of

WHAT THEY CAN'T DO THESE DAYS

Family history is a significant risk factor for many chronic diseases. General practice is uniquely placed to provide holistic, preventative care centred on the family unit. However, one GP has redefined the extent of familial risk,

WHAT TO BELIEVE?

Baffled by conflicting health advice? *The Observer* has kindly summarised the latest thinking on a number of health questions. Here is a snapshot of what they found.

- Vitamin C helps to keep colds and other illnesses at bay. 'Oh no it doesn't', says the latest scientific research, which finds such claims unsupported. It is 'one of the great health myths of our time', said Professor Ron Eccles.
- Moderate drinking is good for us, especially for the over 50s with heart and circulatory disorders (allegedly). But it now appears to be bad for you in terms of bowel, breast, mouth and oesophageal cancer.
- Forget mobile phone masts - that's so last year. Wi-fi is the new silent killer. And there is particular concern for the fate of children, who are advised not

MY BAD BOSS

The *Evening Standard* has announced the winners of this year's My Bad Boss contest in America. Now in its second year, the contest has hailed two victors. First, a man with cancer whose boss threw away his disability benefit papers.

Sir Derek Wanless's latest pronouncement on personal responsibility and NHS productivity.

But there is a much bigger issue lurking behind this research. It touches on the whole subject of wellness and how we keep fit and healthy those people who are not ill and want to stay that way. Currently, most primary prevention is directed at people with existing chronic conditions. It focuses on reducing the impact of those conditions on day-to-day life and the prevention of acute exacerbations. This is valuable work, but there is precious little targeted at those whose principal concern is their wellness, not their illness. And terminology such as 'the worried well' betrays the attitude of many providers to this cohort.

If we are serious about fostering personal responsibility and better public health, we must make it easier for people to obtain advice and appropriate screening. Cultural and attitudinal change must be supported by systemic change.

as evidenced by this referral to a paediatrician, 'Kindly see four-year-old James, who has had a cough since yesterday. Also, the family pet dog has had a similar barking cough for the last few days'.

to use laptops on their laps, but on a desk, like a desktop. (Note to self: must find a new name for 'laptops').

- Caffeine increases your chances of having a heart attack (or so we are told). But researchers at the Harvard Medical School believe that regular coffee drinkers have a lower chance of getting type 2 diabetes, gallstones, liver damage, colon cancer and Parkinson's disease. The Alzheimer's Society points to evidence suggesting that three cups of coffee per day can help men maintain mental performance as they get older. And research from Rutgers University found that a combination of exercise and coffee might help prevent skin cancer.

So there you have it. Until next week, when it will all have changed again.

And secondly, a help-desk worker who was ordered to stay at his desk during an office fire. Presumably this was just a precaution in case the fire brigade rang to say they were going to be late.