

DECEMBER 2016
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FREE!

Sheffield Teaching Hospitals **NHS**
NHS Foundation Trust

Good Health

The newsletter for members of
Sheffield Teaching Hospitals NHS Foundation Trust

INSIDE:

Your invitation to the
upcoming Members' Event:
*Research Makes a
Difference to Patients*

Page 9

Pioneering research, innovations and treatment breakthroughs

Sheffield leading the way
for future healthcare

Dear member,



The weather is getting colder and Winter is well and truly here. Winter is always a very busy time for the health service and here in Sheffield we are no different. In this edition we have provided some helpful advice to

help you get the right care you need if you become unwell. Why not download the free phone app which gives you all the health information you need at the touch of a button. There is also important information about how you can help us by not visiting friends and relatives if you are ill.

The magazine also has a showcase of some of the amazing medical research which is taking place and some very exciting innovations which look set to benefit patients with long term health conditions and to help older people stay independent at home.

Sheffield has always been a leader in medical research and breakthroughs in treatment and our Members' Health Lecture is a great opportunity to find out even more and meet some of the people involved. See the advert on page 9 for more details.

I hope you enjoy the magazine and I would like to wish you a very merry Christmas and healthy new year.

Andrew Cash
Chief Executive

What's inside...

- Page 3** **Showcasing: Research and Innovation**
Pioneering 'scratching' technique research could help women have a successful pregnancy
- Page 4** Vital study into treatment of diabetes-related chronic pain
- Page 5** Sheffield: National centre for biomedical research into neurological conditions
Get involved: Join a patient research panel
- Page 6-7** First patients sign up to 100,000 Genomes Project
- Page 8** 'Technology' drive to modernise care for patients with long term health conditions
- Page 9** **Event:** Research Makes a Difference to Patients
Dates for your diary
- Page 10** Keep well this winter
- Page 11** **Sheffield Hospitals Charity**
Appeal: Searching for a cure for Myeloma
Charity boost for haematology care
- Page 12** A brave new world

Support your local hospitals

As a member you can play a role in the Trust and get more involved in your local hospitals.

To become a **public member**, you must live in Sheffield.

To become a **patient member** you must have been a patient in the last five years.

Trust members can:

- participate in the election of Governors
- have the opportunity to stand for election to the Council of Governors
- provide feedback and opinion about services and possible developments
- receive information about the Trust on a regular basis
- attend special functions which may include open days, tours and healthcare seminars

Members will not receive any preferential access to actual health services, as this would be contrary to the principles of the NHS.

Please register me as a member of the
Sheffield Teaching Hospitals NHS Foundation Trust

IT'S
FREE!

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Dr	<input type="checkbox"/> Other...	
Family Name						
First Name						
Address						
Postcode				Telephone		
Email						
Date of Birth	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>
I would describe my ethnic background as:						
<input type="checkbox"/> White British	<input type="checkbox"/> White Other (non British)		<input type="checkbox"/> Asian or Asian British			
<input type="checkbox"/> Black or Black British	<input type="checkbox"/> Mixed / Multi heritage		<input type="checkbox"/> Other Not stated			
I would like to register my potential interest in standing for election as a Governor:						
<input type="checkbox"/> Yes	<input type="checkbox"/> No					
I declare that I am eligible and would like to become a member:						
<input type="checkbox"/> Public member	<input type="checkbox"/> Patient member					
Signed						

Showcasing: Research and Innovation

Simple 'scratching' technique could help women to have a successful pregnancy

A NEW simple procedure which involves gently scratching the lining of the womb in the month before IVF treatment, potentially improving treatment success, is being tested on first-time IVF patients in a groundbreaking research study at the Jessop Wing Hospital.

Gynaecologists and scientists from Jessop Wing and the University of Sheffield are testing the technique - known as endometrial scratching - purely on women about to have IVF or Intra-cytoplasmic sperm injection (ICSI) for the first time.

If shown to improve the success rate of embryo implantation, the trial could lead to endometrial scratching being offered routinely to all women having their first IVF treatment cycle.

Previous trials into the technique have focused on women who have had IVF at least once before - but initial findings from this research are highly promising, with pregnancy rates in women undergoing IVF doubling from 29% to 49%. The number of live births also increased from 23% to 42%.

The technique involves placing a small tube about the size of a drinking straw through the neck of the womb and gently scratching the womb's lining. The 'scratching' releases certain chemicals believed to help the fertilised egg implant in the womb's lining - increasing the chances of a successful pregnancy.

Mr Mostafa Metwally, a Consultant Gynaecologist and Sub-specialist in Reproductive Medicine and Surgery at Sheffield Teaching Hospitals NHS Foundation Trust, said: 'The use of endometrial scratch has not yet been fully tried in women who are about

to have IVF for the first time. If found to be beneficial then it could be used to improve the chance of achieving a pregnancy for a large group of women without the need for repeated IVF attempts, so we are delighted to be leading the way with this research.'

The study will involve 1,044 participants and run over the course of two and a half years. Women taking part will be randomised to receive the endometrial scratch or not prior to commencing their planned IVF/ICSI treatment, and need to be 37 years or younger.

To find out more about the Sheffield study visit the trial website at www.sheffield.ac.uk/scratchtrial or contact clare.pye@sth.nhs.uk



Trust is fifth highest in country for increase in clinical research

Sheffield Teaching Hospitals NHS Foundation Trust has seen one of the biggest rises in the number of research studies it is offering to its patients, according to a national league table of NHS research activity published by the National Institute for Health Research Clinical Research Network.

The new statistics reveal that the Trust increased the number of clinical research studies it undertook by 20% in 2015/16 - the fifth-highest surge in the country.

More people also took part in clinical research run by the Trust than over the same period during the previous year, with 8,587 patients taking part in research studies run by Sheffield Teaching Hospitals NHS Foundation Trust in 2015/16 compared to 7,786 in 2014/15.

Clinical research plays a key role in helping doctors and clinicians better understand how diseases work, and it is through this process that new treatments, devices or care that may one day become part of routine NHS care are tested. Not only can these bring immediate benefits to patients - but they can also pave the way for new technologies and treatments to be introduced on a wider scale.



£3m grant awarded to Sheffield to lead vital study into treatment of diabetes-related chronic pain

A world-leading diabetes team at the Trust has been awarded a £3m grant to conduct a study into the effectiveness of pain control drugs in patients with chronic pain caused by diabetes.

The study will compare the effectiveness of the three main drugs used to treat patients who suffer from painful diabetic neuropathy, and is funded by the National Institute for Health Research Health Technology Assessment (HTA) Programme.

The study, in collaboration with the University of Sheffield Clinical Trials Research Unit (CTRU), aims to establish which drug or combination of drugs is best for patients with the condition. The grant is one of the biggest awards ever given to a Sheffield Teaching

Hospitals research team. The study will last for 3½ years and will include around 400 patients at eight UK centres, led by Sheffield.

Professor Solomon Tesfaye, a Consultant Physician/Endocrinologist at the Royal Hallamshire Hospital said: 'Sheffield is a world leader in the treatment of painful diabetic neuropathy. This research will help us to find out which patients and what kind of pain responds best to which drugs. Apart from improved pain management resulting in better

quality of life for patients, it might also save the NHS a considerable amount of money in drug costs.'

Diabetic neuropathy affects about 25% of diabetes patients. Nerve damage caused by diabetes leads to chronic pain, from persistent aching to burning or stabbing sensations.

Anybody interested in taking part in the study can contact Sheffield Teaching Hospitals on 0114 271 2204.

Study offers hope to sufferers like Tracey

Patient Tracey Smythe, 47, of Parson Cross, Sheffield, was diagnosed with painful diabetic neuropathy in 2009. She said:

"When I was diagnosed a lot of people did not know what it was or have much of an understanding of it, but it has a big impact on your life. Before this I socialised a lot and went out with friends, but I don't do any of that now. Because the pain is worst at night, it leaves you totally exhausted. The results of this research could offer sufferers like me a more effective combination of drugs to improve pain control that may translate in better functioning, sleep and quality of life."



"...If this trial can help to find a more effective way of managing the pain then it will make a massive difference to me."



Are you interested in getting involved in clinical research?

If so we have a number of patient research panels where your contribution could make a big difference. Below is a list of the different panels relating to specific conditions or areas of interest along with contact details if you would like to get in touch to find out more.

Sheffield becomes national centre for biomedical research into neurological conditions

Sheffield Teaching Hospitals has been awarded over £4m of Government funding to pioneer medical breakthroughs in the treatment, diagnosis and prevention of devastatingly progressive illnesses such as dementia, Parkinson's disease, motor neurone disease, stroke and multiple sclerosis.

The Trust's partnership with the University of Sheffield will now be designated as one of twenty NIHR Biomedical Research Centres.

Chief Executive Sir Andrew Cash said: 'Sheffield is a recognised leader in neurosciences, and together with our strong partnerships with the city's universities, this £4m will help

us further develop and pioneer medical breakthroughs which aim to improve the lives of patients with neurological disorders and their families across the globe.'

Professor Dame Pamela Shaw, Consultant Neurologist at Sheffield Teaching Hospitals NHS Foundation Trust and Director of the University's Sheffield Institute for Translational Neuroscience (SITraN), said:

'The funding will enable us to develop exciting discoveries emerging from basic neuroscience research into experimental medicine studies aimed at developing new treatments and better outcomes for our patients.'

Pioneering medical breakthroughs in neurosciences currently being developed at Sheffield include:

- New neuroprotective and symptomatic treatments for motor neurone disease including gene therapy studies
- Improving the acute care of patients with cerebrovascular disease, linking with research to improve long term disability following stroke
- Innovative treatment using bone marrow stem cell transplantation to halt disease progression in patients with severe multiple sclerosis as featured on BBC Panorama
- Using new technologies including advanced neuroimaging, genomics and predictive medicine measurement and modelling to better sub classify neurological disorders and to allow us to find the right treatment for the right patient on a more rapid timescale than is currently possible.

Yorkshire and Humberside Consumer Research Panel (Cancer)
crpadmin@yhcrp.org.uk

Cardiovascular Research Patient Panel
charlotte.culver@sth.nhs.uk

Research Advisory Panel for Infectious Diseases (RAPID)
tracey.sutton@sth.nhs.uk

South Yorkshire Dementia Research Advisory Group
sydemrag@sheffield.ac.uk

Lay ADvice on Diabetes and Endocrine Research (LADDER)
sharon.caunt@sth.nhs.uk

Reproductive Health Research Public Advisory Panel
clare.pye@sth.nhs.uk

The Lay Advisory Panel for Bone Research
julie.walker4@sth.nhs.uk

Sheffield Addiction Recovery Research Panel (ShARRP)
a.d.irving@sheffield.ac.uk

Sheffield Emergency Care Forum
enid38hirst@gmail.com

Lay Expert Advisory Panel (LEAP) for the South Yorks HIV Network
charlie.hughes@sth.nhs.uk

Sheffield Motor Neurone Disorders Research Advisory Group
smndrag@sheffield.ac.uk

Therapeutics and Palliative Care Directorate Patient Panel
sabrina.eltringham@sth.nhs.uk

Specialised Rehabilitation Lay Advisory Panel
debby.hawkins@sth.nhs.uk

Lay Advisory Panel for Oral and Dental Research
r.bolt@sheffield.ac.uk

Online Patient Advisory Panel
jacqueline.palmer@sth.nhs.uk

First patients sign up to the 100,000 Genomes Project in Yorks and Humber



Children and families affected by rare inherited diseases and some forms of cancer are being given new hope as the Yorkshire and Humber Genomic Medicine Centre recruits more than 100 patients into the 100,000 Genomes Project, one of the largest gene mapping studies in the world.

Genomics is a rapidly-evolving area of medicine. Through the ground breaking project scientists and researchers hope to find and share vital information that could unlock the genetic roots of how rare inherited diseases and some forms of cancer develop.

A genome is an individual's unique sequence of DNA, 3.2 billion letters long, and found in almost every cell in

the body. One patient hoping to raise awareness of genomic medicine is Donna Proctor, a 49-year-old domestic supervisor at Seacroft Hospital, who has become the first person to provide a blood sample for the Yorkshire and Humber GMC as she is being investigated for a rare disease which results in an inherited predisposition to cancer.

Donna said: 'This could make all the difference for people in the future if it helps researchers find different treatments or cures for cancers. I think it is a really positive thing to do and I would encourage everyone who is eligible to take part if they can.'

Anyone taking part in the 100,000 Genomes Project gives a sample of their DNA, along with their relatives, to one of the 13 NHS Genomic Medicine Centres. This is usually taken from a blood sample of about 5ml (a tablespoon).

Cancer patients also donate a small piece of their tumour. After DNA samples are collected, they are sent securely to be sequenced. Genomics England then analyse the data. Results are then sent back to the local Genomics Centre for validation and clinical action.

'The '100,000 Genomes Project' intends to deliver the sequence of 100,000 whole human genomes by 2017, from patients with rare inherited diseases and patients with a range of cancers, and will involve more than 4,000 participants from the Yorkshire and Humber region.'

About the Yorkshire and Humber Genomic Medicine Centre

The Yorkshire and Humber NHS Genomics Medicine Centre is one of 13 centres involved in the national genome project and serves 5.3 million people from across the region.

It is led by Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield Children's NHS Foundation Trust, and Leeds Teaching Hospitals NHS Trust. It is supported by the other 11 acute trusts in the region

along with the Yorkshire and Humber Academic Health Science Network and our major Universities. It was also supported by direct input from patients and the public, which places the people of Yorkshire and Humber at the heart of crucial developments and improvements in healthcare.

Our aim in the Yorkshire and Humber is to collect samples from 4,700 participants with rare diseases plus their families, and patients with

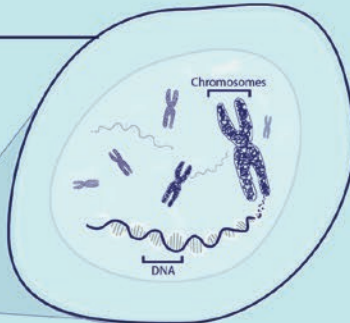
certain types of cancer, including breast, colorectal, lung, prostate, ovarian and sarcoma by December 2017.

For further information about the Yorkshire and Humber NHS GMC please contact **Gill Wilson**, Programme Manager for the Yorkshire and Humber NHS GMC at gill.wilson@sch.nhs.uk or on **07788 416 125**.

What is a genome?

Human cell

Most cells in the human body have a **complete** set of genes



Your **genome** is one whole set of all your genes plus all the DNA between your genes.

There are around **20,000** genes in your **genome**

What is genomics?

Genomics is the study of the whole genome and how it works, but has also come to have a broader meaning to include the way that the genome is interpreted and the technologies that have been developed because of it.

Why?



Looking at the whole genome will help us understand how disease develops and which treatments will be most effective.

80% of rare diseases are genomic



Around **40,000** people with cancer and rare diseases will take part in the project

over **330,000** new cases of cancer reported every year and growing



We compare books (that is, other patients' genomes) and try and find letter relationships that match to better understand gene activity.

Sequencing

This means reading the human genome letter by letter (all 3 billion pairs of letters)

In the past it has taken
13 years & £2 billion
to read every letter of our genetic code

Today it only takes **2 days & £1k** to read every letter

Before



Your **genome**
with

3 Billion
pairs of letters in the
human genome

5%
were analysed
Only the active genes
were looked at

AAGTAATATGC
TTCTAGGCGTC
TCAAGATGCAT
CTAGCACAGC
GCCCTTTATTA
TCTCTATACTCA
ACTACTAGGGC
TATTTTCATATCT
AAATACCTCG
AGGCTACTGAC
TTATGCTATCG
ATCTCGAGCGC
TDCCGTAATTT
TCGCGAATCAG
AAGTAATATGC
TTCTAGGCGTC
TCAAGATGCAT
CTAGCACAGC
GCCCTTTATTA

95%
were unused
All the non-gene
sections that we
didn't understand
were disregarded as
useless

Now



We know that the non-gene (non-coding) parts of your genome may have a role to play so we look at the whole thing, every single letter, and how the different parts work together.

Think of it as reading a book, **every letter counts**.

'Technology' drive to modernise care for patients with long term health conditions

The Sheffield City Region has become one of seven national 'Test Bed' innovation centres to take part in a major drive to modernise how the NHS delivers care.

'Test Beds' are new collaborations between the NHS and innovators which aim to harness technology to address some of the most complex issues facing patients and the health service. Successful innovations will then be available for other parts of the country to adopt and adapt to the particular needs of their local populations.

The 'Perfect Patient Pathway', is the Sheffield City Region Test Bed and it aims to create the 'perfect patient pathway' to bring substantial benefits for patients suffering from long term health conditions, such as diabetes, mental health problems, respiratory disease, hypertension and other chronic conditions.

By using new technology, coupled with new ways of delivering care, the intention is to keep patients with these conditions well, independent and avoiding crisis points which often result in hospital admission, intensive rehabilitation and a high level of social care support.

A range of home-based monitoring devices and smart phone apps will mean patients can be supported to understand their condition and how they can manage it at home. It will include monitoring falls risk, tracking

locations for people with dementia as well as sensors in the home, for example, on televisions, kettles and fridges to monitor mobility, nutrition and general wellbeing.

Data received from these devices will then be collated and interpreted in an integrated intelligence centre to assess individual patient wellbeing and anticipate changing demands and patterns of care requirements in long term conditions both at patient and at a regional level, enabling a timely and effective response by GPs, community health specialists, hospital teams or social care.

Initially the Perfect Patient Pathway will focus on people with three or more long term conditions.

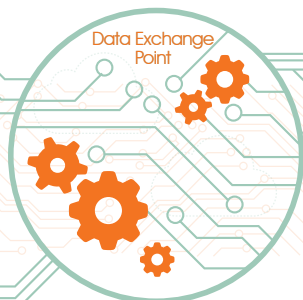
Sir Andrew Cash, Chief Executive of Sheffield Teaching Hospitals NHS Foundation Trust said:

'The Perfect Patient Pathway test bed is a fantastic way of bringing together the region's health and social care providers with a number of technology and research organisations. By utilising this expertise we will be able to share data and plan, in partnership with patients, the best way to deliver care to people with long term conditions based on their needs using the latest technology to support this.'

Roz Davies, a patient who lives with Type 1 Diabetes added: 'Many people in our region like me live with complex health conditions. We are all different but we all want to live as well and independently as possible. This is an opportunity to work together to unleash the potential of digital resources which could help us to feel more confident, informed, connected and in control of our health.'



Working together in partnership to design and test care of the future



Dates for your diary

2017

18 January, AM

Board of Directors
in Public Seminar
Room 1, R Floor, RHH

6 February, 10:30am

Members' Event
about Research,
Medical Education
Centre, NGH

15 February, AM

Board of Directors in
Public Board Room,
Clocktower Building,
NGH

21 March, 5pm

Council of Governors
Meeting, Seminar
Room 1, R Floor, RHH

27 June, 5pm

Council of
Governors Meeting,
Undergraduate
Common Room,
Medical Education
Centre, NGH

5 September, 5pm

Council of
Governors Meeting,
Undergraduate
Common Room,
Medical Education
Centre, NGH

6 December, 5pm

Council of
Governors Meeting,
Undergraduate
Common Room,
Medical Education
Centre, NGH

For more information
about any of these
meetings please contact
jane.pellegrina@sth.nhs.uk
or ring the
Membership Office on
0114 271 4322.

RHH - Royal
Hallamshire Hospital
NGH - Northern
General Hospital



Sheffield Health and Social Care **NHS**
NHS Foundation Trust

Sheffield Teaching Hospitals **NHS**
NHS Foundation Trust

Learn about:

- National Test Bed Innovation Centre
- D4D - Devices for Dignity
- Organ Donation
- Diabetes Research
- Cancer Research
- Patient Research Panels

FREE EVENT - OPEN TO ALL

Research

Making a difference for patients

**Join us for this fascinating event
to learn about the benefits that
research can bring for patients.**

Hear leaders in their fields discuss:

- ➔ Medical breakthroughs in neurosciences
- ➔ Groundbreaking treatment for MS
- ➔ The 100,000 Genomes Project
- ➔ Mental health
- ➔ And much more.

6 February 2017

10:30am - 3.30pm

Medical Education Centre
Northern General Hospital

**Refreshments and
light lunch provided**

To register

please contact
jane.pellegrina@sth.nhs.uk

0114 271 4322

Keep well this winter

Helping you to keep well this winter

If you're feeling unwell and you are unsure about where to go then our Choose Well guide will help you choose the right place for treatment. Here in Sheffield we have a range of local NHS services to choose from and it doesn't have to be A&E.

Why not download our FREE app so you've always got this information to hand? Download for iPhone and Android. Go to the app store and type in 'NHS Sheffield'.



Self care
Hangover.
Grazed knee.
Sore throat.
Cough.



NHS 111
Unsure?
Confused?
Need help?



Pharmacy
Diarrhoea.
Runny nose.
Painful cough.
Headache.



GP (Doctor)
Unwell.
Vomiting.
Ear pain.
Back ache.



NHS Walk-in
If you cannot
get to the GP
and it's not
getting better



A&E or 999
Choking.
Chest pain.
Severe bleeding.
Blacking out.

Please do not visit hospital patients if you are unwell

Visitors to the hospitals are being asked to consider whether they are well enough to visit sick patients this winter in a bid to reduce the spread of common bugs including Norovirus.

Each year up to one million people across the country are affected by Norovirus. It is the most common cause of infectious gastroenteritis in England and Wales and can affect people of any age. It is very contagious, is spread from person-to-person and through food and water and is more likely to spread where people are in close proximity, such as in hospitals, schools and on cruise ships.

Whilst this condition, sometimes called 'winter vomiting' virus (because of its tendency to affect people during colder months when people spend longer indoors) is an unpleasant experience, the infection tends to only last between 12 and 60 hours and most healthy people will just need to drink plenty of fluids and rest up. However, the illness can have a worse effect on patients in hospital by making them weak and dehydrated and interfering with the effectiveness of the medicines they are taking.

Dr Christine Bates, Director of Infection Prevention and Control said:

'What we would like people to think about is whether they or anyone close to them such as family, friends or colleagues has had diarrhoea, vomiting or fever within the last 72 hours. If this is the case then they should avoid visiting the hospital and use alternative methods of contact to speak to the patient such as the hospital's bedside telephone system. If they really feel they can't postpone their visit they should contact the ward for advice prior to coming to the hospital.'

This year the Trust is asking visitors to the hospital to follow these simple steps in a bid to reduce the spread of the bug among patients:

- ✓ **Always wash your hands** with soap and hot water and/or use alcohol hand rub when entering and leaving the ward.
- ✓ **Ask staff to wash their hands.** Do not be afraid to check that staff have decontaminated their hands either by washing them with soap and water or using the alcohol hand rub - they do not mind and expect patients and visitors to ask.
- ✗ **Do not visit if you feel unwell.** If you, your family or close work colleagues have experienced vomiting and diarrhoea in the last 72 hours please contact the ward for advice before visiting.
- ✗ **Do not sit on the patient's bed.** If you intend to visit your friend or relative please do not sit on their bed or the patient's chair. Visitors' chairs are provided - please ask the nurse if you need more.

Searching for a cure for Myeloma

Sheffield Hospitals Charity is appealing to local people this Christmas to give a gift that could make a real difference to someone's life.

Research is being undertaken to look for a cure for myeloma, a cancer of the plasma cells that are found in bone marrow.

There is currently no cure for this devastating disease, but the research undertaken to date by staff in the Haematology Department has been extremely positive. A genetically engineered virus has been used to target and kill the cancerous myeloma cells without affecting healthy cells. After just two days of being introduced to the virus, myeloma cells were reduced by around 50% and 100% after four days.

The team are the only researchers using this virus at the moment so it is vital that the work is continued. £90,000 is needed to fund the research project for the next three years. Dr Andrew Chantry leader of the research team said: 'We are very close to a number of key breakthroughs including manipulating viruses to attack only myeloma cells and a number of bone targeted agents that stop bone destruction and encourage repair of the damage done.'

To make a donation this Christmas to support the research, visit www.sheffieldhospitalscharity.org.uk/curemyeloma, call 0114 271 1351 or email charity@shct.nhs.uk



Charity boost for haematology care

Patient care at the city's newest hospital ward has been given a huge boost, thanks to a £300,000 Sheffield Hospitals Charity donation.

The charity has funded furniture, artwork and other patient comforts designed to make the new ward rooms at the Royal Hallamshire Hospital's busy haematology department a 'home from home.'

The 17 single rooms provide a space where patients can undergo treatment in isolation to protect their weakened immune systems, and provide greater peace and privacy. They were created in response to a rise in the number of people needing treatment for blood cancer and other diseases.

Charity bosses met with patients, families, staff and support groups to design the rooms and choose features to enhance patient care.

There are large windows, bespoke artwork and mood lighting, and extra-comfortable reclining chairs to aid circulation whilst personal fridges, safes and cupboards also allow patients to bring their own belongings, food and drink during treatment. Wi-Fi, televisions, games

consoles and DVDs help to break the monotony of treatment for patients, as well as allowing them to stay in touch with family and friends.

Sarah Fulcher, aged 32, from Retford, Nottinghamshire was diagnosed with Acute Myeloid Leukemia in September 2013. Sarah was transferred to the Royal Hallamshire Hospital to be given a stem cell transplant to help fight her cancer, where she spent nearly a month in one of the existing haematology isolation rooms. Sarah said:

'Being able to watch TV when you want, in a nicely decorated room, with access to Wi-Fi, so you can keep in contact via Skype, will make a huge difference.'

A brave new world

Nowadays, we take the existence of the NHS for granted and its origins the stuff of history; hardly surprising, since virtually no one now working in it was born when it came into being. But to the citizens of post-war Britain the arrangements outlined in this simple leaflet sent to all households would have been seen as nothing short of revolutionary.

It was part of a brave new world which came into being on 5th July, 1948, with the Welfare State incorporating a comprehensive range of measures designed to overcome the 'five giants' of poverty, squalor, ignorance, idleness and disease identified in the ground-breaking Beveridge Report (1942) on post-war social reconstruction. The cornerstone of these arrangements was the new NHS, a comprehensive health service available to all solely on the basis of clinical need and regardless of ability to pay.

'Your dealings with your doctor will remain as they are now: personal and confidential... The difference is that the doctor will be paid by the Government, out of funds provided by everybody.'

First get a recommendation from your family doctor that your eyes need testing. Then hand that recommendation to any doctor with special qualifications (lists will be available) or to any ophthalmic optician taking part in the new service. If you need glasses, these will be provided without charge. For re-testing you can go direct to any of the doctors with special qualifications, or to an ophthalmic optician.

The National Health Service will provide several kinds of spectacles of different types. For specially expensive types you will have to pay the extra cost.

Deafness Specialist ear clinics will be established as resources allow. At them you will get not only an expert opinion upon deafness but also, if necessary, a new hearing aid invented by a special committee of the Medical Research Council. Production of these aids is now going on, but will not meet all demands at once. They will be supplied free, when ready, together with a reasonable allowance of maintenance batteries.

Home Health Services Your local County or County Borough Council will, as soon as it can, make special provision for: (1) advice and care of expectant and nursing mothers and children under five (for particulars ask your doctor, health visitor, or Welfare Centre); (2) midwifery (ask your doctor or Welfare Centre); (3) home nursing where there is illness in the family (ask your doctor); (4) all necessary vaccination or immunisation (through your doctor or Welfare Centre); and (5) a health visitor service to deal with problems of illness in the home, especially tuberculosis.

Health Centres Special premises known as Health Centres may later be opened in your district. Doctors may be accommodated there instead of in their own surgeries, but you will still have "your own doctor" to give you personal and confidential treatment. He will still come to your home as necessary. At the Health Centre he will be able to use equipment supplied from public funds. These Centres may also offer dentistry and other services on the spot.

WHAT TO DO NOW

1. Choose your doctor.
2. Get application forms from him or from the Post Office, Public Library, or office of the local Executive Council.
3. Fill one in for each member of the family.
4. Hand them to the doctor.

ACT AT ONCE

PREPARED BY THE CENTRAL OFFICE OF INFORMATION FOR THE MINISTRY OF HEALTH

(82077) W1.30108 2/48 H.W.



THE NEW NATIONAL HEALTH SERVICE

Your new National Health Service begins on 5th July. What is it? How do you get it?

It will provide you with all medical, dental, and nursing care. Everyone—rich or poor, man, woman or child—can use it or any part of it. There are no charges, except for a few special items. There are no insurance qualifications. But it is not a "charity". You are all paying for it, mainly as taxpayers, and it will relieve your money worries in time of illness.

Choose Your Doctor Now

You and everyone in your family will be entitled to all usual advice and treatment from a family doctor. Everyone aged 16 and over can choose his or her own doctor. A family need not all have the same doctor, but parents or guardians choose for children under 16.

Your dealings with your doctor will remain as they are now: *personal and confidential*. You will visit his surgery, or he will call on you, as may be necessary. The difference is that the doctor will be paid by the Government, out of funds provided by everybody.

Choose a doctor now—ask him to be your doctor under the new arrangements. Many will choose their present doctors. Any doctor can decline to accept a patient. If one doctor cannot accept you, ask another, or ask to be put in touch with one by the new "Executive Council" which has been set up in your area (you can get its address from the Post Office).

If you are already on a doctor's list under the old National Health Insurance Scheme, and if you do not want to change your doctor, *do nothing*. Your name will stay on his list under the new Scheme.

But for your family, and for yourself if you are not already in the old National Health Insurance Scheme, now is the time to decide. Get an application form for each member of the family from the doctor you choose, or from any Post Office, Executive Council Office, or public library. Fill in the forms and give them to the doctor.

Later, your local Executive Council will send a "medical card" to everyone who has been accepted by a doctor. If you want to change your doctor, you can do so at any time without difficulty. If you need a doctor when away from your own district, you can go to any doctor who is taking part in the new arrangements. You will not have to pay.

Help to have the Scheme ready by 5th July by choosing your doctor at once.

For any further information about these arrangements, ask at the offices of the local Executive Council.

Maternity Services

An expectant mother can have the services of a doctor who undertakes maternity work (whether he is her usual doctor or not), and of a midwife, as well as general care before and after confinement. If her usual doctor does not undertake maternity work, he, or the Welfare Centre, will put the expectant mother in touch with another doctor. It will be the doctor's responsibility, with a midwife, to give all proper care and (if he considers it necessary or is called in by the midwife) to be present at the confinement.

Hospital and Specialist Services

You will also be entitled to all forms of treatment in general or special hospitals, whether as an in-patient or as an out-patient. These include, for instance, maternity care, sanatorium treatment, care of mental health, and all surgical operations.

The help of consultants and specialists of all kinds will be made available to you as national resources allow, whether at hospital, at special health centres, or at your home.

Your doctor will arrange this help when you need it.

Hospital charges will cease on 5th July. Where accommodation permits, however, you can pay something for greater privacy (for example, in single rooms or small wards). Or, if you do not want to use the new service itself, there will be private pay-bed accommodation for which you can make your own private fee arrangements with doctors.

Medicines, Drugs, and Appliances

Your doctor will give you a prescription for any medicines and drugs you need. You can get these free from any chemist who takes part in the Scheme. In some country areas the doctor himself may dispense medicines.

The same is true of all necessary appliances. Some of them will be obtainable through hospitals; some your doctor can prescribe for you. There will be no charge, unless careless breakage causes earlier replacement than usual.

Care of the Teeth

A dental service will be provided, but at present there are too few dentists to make a full service available to all without delay.

After 5th July you can go to any dentist taking part in the new arrangements (there will be a list at your Post Office). You need no application form. Just call, by appointment, on the dentist of your choice when you need him. At his surgery you and he will sign a form for your treatment under the new arrangements. All necessary fillings and dentures will be supplied without fee, but if you want anything specially expensive, and beyond what is necessary, you will pay the extra cost yourself.

Until a full dental service, without delays, can be made available, a special priority service for expectant and nursing mothers and young children is being organised by local authorities (in addition to the school dental service). Full information about this priority service can be obtained at Welfare Centres.

Care of the Eyes

Care of the eyes will be undertaken by specialists at hospitals, or at special clinics which will be part of the hospital service, as fast as these can be organised. Meanwhile, a Supplementary Eye Service will be available after 5th July.

'Everyone - rich, poor, man, woman or child - can use it or any part of it.'

If you would like to find out more about the Sheffield Hospitals History Group, please visit <http://bit.ly/HistoryGroup> or email: sheffhgh@gmail.com