## **Editor's Briefing**

## HAPPY BIRTHDAY NHS

Mahatma Gandhi is credited with saying that a nation's greatness is measured by how it treats its weakest members. The UK should be proud of its National Health Service, which still protects the vulnerable, takes away the fear of the financial consequences of illness (but no longer, alas, of social care), and greets patients with a smile rather than a request to see their credit card. The ideas of service, commitment, and altruism and the principle that health care is not a business but a social good, are woven into the fabric of British society. Commercialisation of health care will have consequences far greater than simply having to pay for medical treatment. Our front cover shows the 1946 National Health Service Act, which came into effect on 5 July 1948 to create the National Health Service for England and Wales. However, the ideas that shaped the NHS were those that created a medical fund in a Welsh mining town over half a century earlier.

The Tredegar Workmen's Medical Aid and Sick Relief Fund was formed in 1890. For a modest weekly contribution miners and their dependents had access to comprehensive health care which was free at the point of delivery. In the 1920s Aneurin Bevan, generally recognised as the architect of the NHS, served on the Society's committee, commenting later that 'All I am doing is extending to the entire population of Britain the benefits we had in Tredegar for a generation or more. We are going to "Tredegarise" you.' In a nice twist of history, AJ Cronin, the author of The Citadel, which laid some of the moral foundations for a NHS, was also working in Tredegar. There is no evidence that Bevan and Cronin ever met, although it is almost inconceivable, given their public profiles and mutual interest in the occupational diseases of miners -Cronin was appointed Inspector of Mines in 1924 — that they did not.

This month's BJGP examines the present state and future prospects for general practice and the NHS from a number of angles. The Chair of College Council leads with a strong assertion, widely, but I don't think universally, shared, that general practice must remain at the heart of the service. She looks at our current problems and foreshadows some imminent, major work that the College will be doing to try to deal with them. There are other important editorials, looking at the potential of physician associates to contribute in general practice,

and the future of nursing in primary care. What will happen after the QOF, and what will happen to written reflection in the NHS after the recent controversies? Later in the Journal, we publish interviews with four key figures in the NHS, representing early-career GPs and the British Medical Association's General Practitioners Committee, and including a broad medical perspective from a distinguished medical academic, and a cool appraisal of the options for the future from the head of the King's Fund. All were cautiously optimistic.

Research papers deal with some enduringly important topics for general practice: preventive medicine and the NHS Health Checks, avoiding emergency hospital admissions, access to general practice, and the importance of safety netting for patients with low-risk but not no-risk cancer symptoms. Two other papers set the tone for the future. The study on the crucial role of receptionists in the uptake of new technology in general practice should be widely read; health has been slower than almost every other sector to embrace digital communications technologies, and uptake remains patchy. The paper is also a salutary reminder of the need for genuine teamwork in general practice. The other study is about social prescribing; potentially extremely effective, but now threatened by funding constraints in the health and community care sectors. Dew and Wilkes' paper on avoiding emergency hospital admissions for frail, older people also highlights the importance of social networks — social safety netting if you like — as one factor which contributes to avoiding emergency admission.

Meanwhile, in Life & Times, our account of the Bromley by Bow Centre showcases an inspiring example of integration between medical and social care and, when you meet Eleanor Oliphant, you will find that it is not the medication, but the kindness of strangers, that rescues her from her predicament.

So then, dear NHS, a very happy birthday, and many happy returns to you. When you blow out the candles on your cake please don't forget to wish for a favourable political wind, plenty of fairy dust, and a shedload of extra cash.

Roger Jones, Editor

DOI: https://doi.org/10.3399/bjgp18X697541

© British Journal of General Practice 2018: 68: 305-352

Roger Jones, DM, FRCP, FRCGP, FMedSci

DEPUTY EDITOR

Euan Lawson, FRCGP, FHEA, DCH

JOURNAL MANAGER

Catharine Hull

SENIOR ASSISTANT EDITOR

Amanda May-Jones

WEB EDITOR Frika Niesner

ASSISTANT FDITOR

**Moira Davies** 

ASSISTANT EDITOR

**Tony Nixon** 

DIGITAL & DESIGN EDITOR

Simone Jemmott

EDITORIAL ASSISTANT

Margaret Searle

EDITORIAL ADMINISTRATOR

Mona Lindsay

EDITORIAL BOARD

Sarah Alderson, MRCGP, DRCOG, DFRSH

Luke Allen, MBChB, MPH, PGCE Clin Edu

Hajira Dambha-Miller, MSc, MPhil, MBBS

Jessica Drinkwater, MRes, MRCGP, DFRSH

Graham Easton, MSc, MEd, SFHEA, FRCGP

Adam Firth, MBChB, DTM&H, DipPalMed

Claire Gilbert, BA, MPH, MRCGP, PGCME, DCH

Benedict Hayhoe, LLM, MD, MRCGP, DRCOG, DPMSA

Jennifer Johnston, PhD, MRCGP

Nada Khan, MSc. DPhil, MBBS

Peter Murchie, MSc, PhD, FRCGP

Joanne Reeve, PhD, FRCGP, DFPH

Liam Smeeth, MSc, PhD, FRCGP, FFPH

STATISTICAL ADVISORS

Richard Hooper, Sally Kerry, Peter Schofield, and Obioha Ukoumunne

SENIOR ETHICS ADVISOR

David Misselbrook, MSc, MA, FRCGP

2016 impact factor: 2.760

EDITORIAL OFFICE

30 Euston Square, London, NW1 2FB. (Tel: 020 3188 7400, Fax: 020 3188 7401). E-mail: journal@rcgp.org.uk / bjgp.org / @BJGPjournal

The Royal College of General Practitioners.
Registered charity number 223106. The BJGP is published by the RCGP, but has complete editorial independence.
Opinions expressed in the BJGP should not be taken to represent the policy of the RCGP unless this is specifically stated. No endorsement of any advertisement is implied or intended by the RCGP.

ISSN 0960-1643 (Print) ISSN 1478-5242 (Online)

