enquiries@hscic.gov.uk or visit the events section of our website at www.hscic.gov.uk
Kingsley Manning, chair, Health & Social Care Information Centre, Leeds

THERE IS NO SUCH THING AS A UK OR BRITISH NATIONAL HEALTH SERVICE
Claire Reed is right to ask: ‘Is there such a thing as a UK or a British National Health Service?’ (Features July 9).
The answer is that there is not. Rather, there are pockets and silos of health care delivered to varying standards across the UK.

Patient choice is limited. A classic case in point is the lack of robotic-assisted surgery for early prostate cancer patients in Wales, Scotland and Northern Ireland. England has more than 40 sites.

Robotic-assisted intervention can minimise the incontinence, impotence and depression associated with prostate surgery, and the inevitable effects on personal, employment and social relationships.

One would think that this would be a readily accessible treatment throughout the UK. But men from Wales, Northern Ireland and Scotland face personal bills of more than £13,000 to have this intervention in NHS facilities in England.

This is one clear example among many showing there is no longer a UK NHS, and that is a sad state of affairs.
Professor Kevin Davies MBE, RRC, TD, by email

IS WORK BEING DONE TO COMPARE MENTORING ACROSS NHS TRUSTS?
I welcome the new patient safety section on the NHS Choices website (News and Reviews July 2). With good data, we will be able to see how hospitals in England perform on a range of patient safety indicators such as staffing levels on wards.

Many trusts put ward-level data on their websites. But much of this information is patchy. It would be good to see this uploaded to one central online location for checks and comparisons to be made. Perhaps such information could include staffing numbers on day and night shifts during the week and at weekends, skill mix, sickness absence rates and the use of temporary staffing.

I am particularly interested in mentoring as a tool to improve nurse education and the overall quality of patient care. Mentoring takes time, planning and a great deal of effort, but the effort made is worth it.

Is any work being done on ways to quantify and assess mentoring arrangements, and how to make mentoring comparisons?
Michael Walker, by email

COMPLIANCE OVER POLIO AND ITS EFFECTS IS NOT AN OPTION
I read with interest prime minister David Cameron’s comments on why so few anti-microbial drugs have been introduced in recent years and the growing threat of bacteria resistant to antibiotics (News July 9).

Mr Cameron spoke about the role that the UK played in the fight against polio and called for scientists in the UK to be once again at the forefront of developing new, lifesaving medicines.

He also spoke about the UK’s role in ‘getting rid’ of polio. It is true that medicines have helped to eradicate new cases of polio in the UK, but the disease still exists in a number of countries.

On May 5, the World Health Organization declared a public health emergency of international concern, describing outbreaks of the disease in Asia, Africa and the Middle East as ‘extraordinary’. Complacency is not an option.

The effects of polio are still with us – even in the UK. More than 120,000 people in the UK are living with the effects of polio and post-polio syndrome. The British Polio Fellowship is dedicated to helping, supporting and empowering those in the UK living with the effects of polio. For more details or information, call us on 0800 018 0586, email info@britishpolio.org.uk or visit our website at www.britishpolio.org.uk
Ted Hill MBE, chief executive officer, The British Polio Fellowship

TWEETS OF THE WEEK

Having opt-out organ donation across the UK could create a culture of ‘sharing’, in which donating is seen as the norm
@whoisdavidprice

Presumed consent is dangerous principle especially where life & death concerned and in prevailing health culture
@NScareersEd

Shropshire Council is surveying the views of its population about opt out or opt in for organ donation
@remet_r

71% of ppl who responded to our online poll were in favour of opt-out system https://t.co/6Op4o95gm1 #health
@patientuk

If the NHS remains public I’m happy to sign a donor card, but seeing the NHS being sold off for profit of big companies, I wont
@annodoremouse

Presumed consent – live debate in #nationaltransplantweek http://t.co/PUbBh9MNvK From the grateful husband of an organ recipient #NScomment
@sonofedd

If we ask everyone as part of EoL care, we will break the taboos
@fionadmurphy

Removes the altruism a bit? Also can you be sure they consent or did they not get round to opting out?
@MsNaughtyCheese

If the NHS remains public I’m happy to sign a donor card, but seeing the NHS being sold off for profit of big companies, I wont
@annodoremouse

Presumed consent – live debate in #nationaltransplantweek http://t.co/PUbBh9MNvK From the grateful husband of an organ recipient #NScomment
@sonofedd

If we ask everyone as part of EoL care, we will break the taboos
@fionadmurphy

Follow Nursing Standard @NScomment and join the #NScomment chat on Thursdays at 12.30pm