



**PUBLIC PETITION NO.**

**PE01568**

### Name of petitioner

Catherine Hughes

### Petition title

Funding, access and promotion of the NHS Centre for Integrative Care

### Petition summary

Calling on the Scottish Parliament to urge the Scottish Government to ensure that Scotland-wide access to the NHS Centre of Integrative Care (NHS CIC) is restored by providing national funding for a specialist national resource for chronic conditions, to uphold NHS patient choice and cease the current postcode lottery by removing barriers to patient access and prevent institutional discrimination by helping to promote the benefits of this care pathway for patients with long-term conditions.

### Action taken to resolve issues of concern before submitting the petition

- The petitioner raised issues directly in December with First Minister Nicola Sturgeon. The Health Secretary Shona Robison later phoned the petitioner on 18th December 2014, promising to visit the hospital "early in the New Year"; this changed in March to "later in the year".
- The petitioner has personally written to numerous MSPs. The petitioner met in 2013 with the previous Health Secretary, Alex Neil.
- A petition on Change.org against patients being barred from this hospital and seeking action on future viability has received over 28,890 signatures of support.
- At a meeting of the Cross Party Group on Chronic Pain on the 24th Feb 2015, 39 people including MSPs passed a unanimous motion to the Cabinet Secretary calling on her to conduct a moratorium and investigate direct funding. The Scottish Government has still not addressed these points.
- Letter, 17th Feb 2015 sent by Ian Welsh, Chief Executive of the Health and Social Care Alliance, Scotland, after the petitioner met with him, to the Cabinet Secretary for Health, Wellbeing & Sport, Shona Robison, calling on the Scottish Government to hold a moratorium on withdrawing patients and consider better funding arrangements to ensure patient access from throughout Scotland. The Alliance represents over a 1,000 organisations and individuals involved with chronic conditions.
- Motions S4M-11962 (19th Dec 2014) and S4M-13084 (4th May 2015) by Elaine Smith MSP Expressing concern at the decision by NHS Lanarkshire to cease referrals to NHS CIC. Parliamentary questions were also lodged by Elaine Smith MSP (S4W-24721, S4W-24722, S4W-24723), Claudia Beamish MSP (S4O-04069), and Jim Hume (S4W-24877) and on the 25th Feb 2015 Jim Hume also sent a letter to the Cabinet Secretary calling for Government intervention, a moratorium and to secure funding arrangements for the CIC nationally. Health spokesperson Jenny Marra also sent a letter.

## Petition background information

The petitioner is a patient who has attended the NHS Centre for Integrative Care (NHS CIC) ([www.ghh.info](http://www.ghh.info)) for over 20 years which has recently been under continued threat. This is the only holistic hospital of its kind in the UK with inpatient facilities as well as outpatient help for patients with chronic conditions, many incurable, including multiple sclerosis, Arthritis, Motor Neurone Disease, Parkinson's, Crohn's, Fibromyalgia and ME, the majority also having accompanying chronic pain. It was custom built in 1999, aided by £2.78 million of charitable funds, and is a beautiful modern hospital. Their NHS Staff are conventionally qualified as well as gaining various holistic qualifications. The model integrates conventional and holistic methods under one roof with NHS professionals in physiotherapy, psychological support etc, specialising in an integrated model to assist people to manage their long-term conditions. Scotland is very short of facilities for chronic conditions and the CIC is a rare resource for the growing number of complex diagnoses, linked with age, longer life and demographic changes. However in the last four years, three Scottish Health Boards – NHS Highland, Lothian and Lanarkshire have voted to withdraw.

Scottish Health Survey data states that 42% of the population now report having a long-term condition. Yet some health boards are decreasing specialist help by barring patients from the CIC and their outreach clinics. Every day that goes by, patients with serious chronic conditions are denied access because they live in areas where health boards have discontinued referrals to the CIC, against patients' wishes. They are being denied the chance, despite such services not being widely available elsewhere on the NHS. Care is aimed at improving quality of life and improving self-care. The hospital is backed strongly by patients as it has 100% patient satisfaction ratings in some surveys, with patients saying it has led them to a more productive life through techniques that improved symptom control and taught them how to cope.

Health Boards admit no complaints of harm being done over many years and did not cite costs of sending patients to different conventional services. The reason they concede is because they - or some of their members and officials – oppose homeopathy, stating there is "no scientific proof" of its effectiveness. A main document used by all three Scottish Boards when voting for withdrawal was the 2010 Report by the House of Commons Committee on Science and Technology, rather than a Scottish production. This report called for an ending of homeopathy on the NHS. But what was not made clear to all Scottish members was that the UK Government rejected this report. Because of its obvious bias and opted for continuation on the NHS. But homeopathy is only one treatment offered at the CIC, which has numerous other integrated services. Boards admit that the overwhelming majority of patients say CIC methods work for them. Should the personal ideological diktats of boards and bureaucrats be permitted to disregard patients' experience and views forcing them to leave services they trust? That some patients may now feel forced to go private, in a largely unregulated market, without NHS protection, has not been mentioned by Government.

Forcing patients to change to conventional services many have already exhausted, means losing access to a specialised team of staff "under one roof", as some patients may otherwise have to travel to several services. It also prevents access to the inpatient service which is invaluable to those with complex conditions, as this is the only unit of its kind in the UK and is one of the reasons why this hospital is so successfully rated by their patients. Patients with chronic long-term conditions and multimorbidity are generally viewed as costly and difficult to treat and manage. With £7 in every £10 of the NHS patient spend being on long-term conditions, it is important to identify and expand innovative models for this patient cohort instead of, at present, reducing help. The NHS CIC care is in line with Government guidelines by helping patients with their self

management. CIC care is generally cheaper than conventional services and NHS Lanarkshire admitted they had done no cost comparisons of sending patients to conventional services.

Boards still have to pay annually when they withdraw patients, until Service Level Agreements end, an estimated £188,000 in NHS Lanarkshire's case and NHS Lothian agreement is for another two years claimed to be £53,627 annually to GGCHB for homoeopathy linked services.

The CIC model of care assists many patients with complex health needs, who have exhausted all other options. Conventional services, some short staffed, cannot be expected to provide the same ethos and wide range of treatments as a national specialist service under one roof. It is undemocratic to allow the prejudices of a few people on health boards to dismiss the many patients who said CIC services worked for them. Figures from research quoted in 'Integrating the Complementary NHS Yearbook' showed that referral to the CIC has lessened the number of other hospital admissions for 33% of patients, 40% reported less consultations with their GPs and 30% reported less outpatient ambulatory visits and 36% reduced the amount of conventional medication they required, 70% also had a useful improvement in the presenting complaint and 67% had a useful improvement in their general mood and wellbeing.

### **THE REASONS WHY NATIONAL FUNDING IS REQUIRED:**

In recent years, three Health Boards decided to cease referring patients to the CIC. Only national funding – plus an investigation of other access problems – can end patients being subjected to the diktats and prejudices of Boards, as patients' wishes were totally ignored, no matter how great the public protest is in recent public consultations. In 2010 NHS Highland decided to cease; NHS Lothian referrals ceased in March 2014 and on 9th December 2014, NHS Lanarkshire voted to prevent all future new referrals from 31st March 2015, with existing patients ending later. In NHS Lanarkshire, the Board ignored 80.6% of those responding to the Consultation wishing referrals to continue. 98 patient organisations and a 4,800 majority were outvoted by nine Board members, making this a serious democracy issue. NHS Lanarkshire also intends to close two CIC outreach clinics at Coatbridge and Carlisle. While the Scottish Public Health Minister, Maureen Watt, has confirmed that the NHS CIC is "a national resource" which should be available "Scotland wide", Board withdrawals will remove national access. Ms Watt also said the Government had "no plans to close the CIC". In effect, however, Board withdrawals could do that. It is not known if the Scottish Government has been made fully aware of the implications as now only 4 out of 14 Health Boards send patients regularly.

Robert Calderwood, the Chief Executive of GGCHB, the CIC's host Board, called increasing withdrawals a "no brainer" and has emphasised at GGCHB Annual Reviews the whole future of CIC services was dependent on other Boards around Scotland continuing to refer patients. NHS Lanarkshire's withdrawal is particularly significant as it is a neighbouring Health Board, Scotland's third largest, referring the most patients after NHS GGC. Their withdrawal ultimately could affect the whole future of the hospital for all patients. It has become illogical that a "national resource" is not funded nationally to ensure access and prevent the prejudices of some boards harming or even ultimately closing this hospital. That is why national funding must be considered to ensure services can remain available to all who can benefit. National funding will help to secure the future by restoring access nationally and giving the hospital giving patients freedom of choice. We can't have a "national resource" undemocratically denied to most chronic sufferers throughout Scotland.

### **WHY A REVIEW OF ACCESS CRITERIA TO THE NHS CIC IS REQUIRED:**

Patients and carers are extremely concerned that the recent blocking by Boards is forcing them, against their will, to leave a respected, valued service and that discarding their views shows that whatever patients say, they do not count in reality. It is against all promises in the Patients' Charter, 20-20 Vision and every "mission statement" on being patient-centred and it goes against patient choice. While Governments on both

sides of the Border support freedom of choice on complementary methods, unelected Health Boards are defying elected governments' policies since 1948 by barring patients because of the ideologies of some of their members and officials.

The ability of how to access the many service at the NHS CIC should be considered, eg. access to conventional physiotherapy services in many places elsewhere allow patients to self-refer when needed. Patients seeking referral to the CIC can encounter many barriers. To counteract the barriers and institutional discrimination experienced by many patients regardless of where they live and their clinical needs, a reconsideration of how referrals can be made to the CIC is needed.

### **PROMOTING THE MODEL OF CARE AVAILABLE AT THE NHS CIC:**

Health Boards accepted that the NHS CIC has consistently high rates of patient satisfaction (100% in some surveys). Boards have made it clear that decisions are not based on cost but on their views against homeopathy being, they say, scientifically unproven. No other hospital would be evaluated on just one treatment from the many available, including conventional, holistic and integrated services and neither should this hospital. The work is far from being confined to homeopathy, as this top award shows: The CIC physiotherapy service won a UK award for Service Excellence from the Chartered Society of Physiotherapy in 2012, for evidence-based work on complex co-morbidities and long term conditions.

It would be beneficial for a positive campaign by the Scottish Government to help explain to health professionals and patients the wide model of care and range of treatments available at the CIC and how those patients with complex chronic conditions can benefit from a very individualised approach which can increase their resilience and capacity to help with their own self-care and ultimately improve quality of life. This will also help to counter the misinformation.

### **BACKGROUND INFORMATION ABOUT NHS CENTRE OF INTEGRATIVE CARE**

- The hospital treats a wide range of chronic conditions including multiple complex conditions. These include Multiple Sclerosis, Motor Neurone Disease, Parkinson's Disease, cancer, Crohn's Disease, ulcerative colitis, arthritis, chronic pain, lupus, fibromyalgia, ME, and psychological and mental health issues. Many conditions treated are incurable and patients have generally exhausted other conventional NHS treatments, many of which have caused serious side-effects or are contra-indicated.
- In 2004/05 NHS GGC attempted to close the in-patient integrative care unit at the hospital, but following a high-profile patient campaign, resulting in widespread media and cross-party political support, the Board concluded that closing the unit would cost much more in the long term and patients would not be able to access the same quality of care elsewhere.
- After that, there was a change of senior Health Board Members in GGCHB and, despite the rejection of their earlier wish to close the inpatient unit completely, GGCHB in 2010 reduced the inpatient unit from 15 to 7 beds. They also closed the hospital at weekends and ended the on-site pharmacy. This does not bode well for GGCHB's attitude in future.

The provision of national funding for the CIC will help many patients who can benefit from this care pathway to be able to access the hospital regardless of where they live and help end the current postcode lottery by removing a barrier to referral. Reassessing how patients can access the hospital will also open access and maintain patient choice. If the Government can also help to promote the benefits of referral and the many services that the CIC provides, this will help to challenge the institutional discrimination that exists. Patients with long-term conditions need to access a specialist service that provides support for improving quality of life to some of the most seriously ill patients in Scotland.

## Related information for petition

### FURTHER INFORMATION & REFERENCES

NHS Centre of Integrative Care website [www.nhsggc.org.uk/patients-and-visitors/main-hospital-sites/gartnavel-campus/centre-for-integrative-care/](http://www.nhsggc.org.uk/patients-and-visitors/main-hospital-sites/gartnavel-campus/centre-for-integrative-care/) Virtual Tour [www.ghh.info](http://www.ghh.info)

The Herald 8/2/2011 Doubts over future of homeopathic hospital  
[www.heraldscotland.com/news/health/doubts-over-future-of-homeopathic-hospital-1.1083878](http://www.heraldscotland.com/news/health/doubts-over-future-of-homeopathic-hospital-1.1083878)

The Herald 9/12/14 Health board to stop sending patients to homeopathic hospital  
[www.heraldscotland.com/news/health/health-board-to-stop-sending-patients-to-homeopathic-hospital.114310546](http://www.heraldscotland.com/news/health/health-board-to-stop-sending-patients-to-homeopathic-hospital.114310546)

Evening Times 10/12/14 Scotland's only homeopathic hospital could be facing a fresh threat after another health board axed funding for services  
[www.eveningtimes.co.uk/news/glasgows-homeopathic-hospital-facing-new-threat-191570n.114301234](http://www.eveningtimes.co.uk/news/glasgows-homeopathic-hospital-facing-new-threat-191570n.114301234)

Telegraph 28/4/15 Homoeopathy on the NHS to be reviewed  
[www.telegraph.co.uk/news/health/news/11566362/Homeopathy-on-the-NHS-to-be-reviewed.html](http://www.telegraph.co.uk/news/health/news/11566362/Homeopathy-on-the-NHS-to-be-reviewed.html)

A current and live petition on Change.org has already reached over 28,890 signatures in support of securing the future of the NHS Centre of Integrative Care at the Glasgow Homoeopathic Hospital.

[www.change.org/p/nhs-greater-glasgow-and-clyde-save-the-glasgow-homoeopathic-hospital](http://www.change.org/p/nhs-greater-glasgow-and-clyde-save-the-glasgow-homoeopathic-hospital)

NHS Lanarkshire Review of Homoeopathy Services Final Consultation Report  
<http://www.nhslanarkshire.org.uk/Involved/consultation/homoeopathy/Pages/default.aspx>  
<http://www.nhslanarkshire.org.uk/Involved/consultation/homoeopathy/Documents/NHS%20Lanarkshire%20Review%20of%20Homoeopathy%20Services%20Final%20Consultation%20Report.pdf>

Health Board Minutes NHS Lanarkshire Health Board Minutes 9th December 2014  
<http://www.nhslanarkshire.org.uk/boards/2015-board-papers/Documents/January/Board-Minute-9-December-2014--January-2015-Board.pdf>

The Herald 19/12/13 Minister vows to protect homeopathic hospital's future  
[www.heraldscotland.com/news/health/minister-in-vow-over-hospital.22734956](http://www.heraldscotland.com/news/health/minister-in-vow-over-hospital.22734956)

The Herald 28/11/2012 GPs caught up in row over homeopathic prescriptions  
[www.heraldscotland.com/news/home-news/gps-caught-up-in-row-over-homeopathic-prescriptions.19530550](http://www.heraldscotland.com/news/home-news/gps-caught-up-in-row-over-homeopathic-prescriptions.19530550)

Lewith, G., Reilly, D., Integrating the Complementary NHS Yearbook 1999 Pages 46-48. Publ. Medical Information. Reproduced from NHS Doctor and Commissioning GP. Summer 98:50-52.

The Health and Social Care Alliance Scotland [www.alliance-scotland.org.uk](http://www.alliance-scotland.org.uk)

Many conditions, One life (Multiple Conditions Action Plan) –  
[www.alliance-scotland.org.uk/download/library/lib\\_5469c0678579e/](http://www.alliance-scotland.org.uk/download/library/lib_5469c0678579e/)

'Gaun Yersel' The Self Management Strategy for Long Term Conditions in Scotland –  
[www.alliance-scotland.org.uk/download/library/lib\\_54b668b3d492a/](http://www.alliance-scotland.org.uk/download/library/lib_54b668b3d492a/)

The WEL Programme. A wellbeing and chronic disease self-management programme delivered at the NHS Centre of Integrative Care. Audited results available from page 5. [http://www.thewel.org/theWEL/Results\\_files/TheWEL%20Summary%2030%20June%202014%20.pdf](http://www.thewel.org/theWEL/Results_files/TheWEL%20Summary%2030%20June%202014%20.pdf)

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NO

**How many signatures have you collected so far?**

0

**Closing date for collecting signatures online**

N/A

**Comments to stimulate online discussion**