

Ms Rhona Brankin
Convener
Public Petitions Committee
TG.01
The Scottish Parliament
Edinburgh
EH99 1SP

25 February 2011

Dear Ms Brankin,

St Margaret of Scotland Hospice (Petition PE 1105)

Thank you for the copy of letter of response from NHS Greater Glasgow and Clyde's Chief Executive, Mr Robert Calderwood, dated 15 February 2011. There are a number of areas in his response which I would seek to address.

There was no excuse for his delay in responding to the Petitions Committee since the idea of raising another Debate was not suggested until 7 December 2010 and the actual date was not finalised until early January. Therefore, at the time of the Committee's request – 24th November 2010, the Health Board could not have known such a Debate was to take place.

NHS Greater Glasgow and Clyde was specifically asked the following question:

- What action(s) will you take as part of the quarterly meetings between the Board representatives and the Hospice to discuss and resolve the issues raised in the petition?

As Mr Calderwood accurately accounted, "The quarterly meetings between Board officers and the Hospice are to consider the funding, and operation, of the specialist palliative care services at the Hospice. The most recent meeting was on 13th January." These meetings are not between the Hospice Chairman, Health Board Chairman or Chief Executives nor do they address or allow for the discussion or resolution of the items raised in the petition. The two people in attendance from the Health Board will not discuss the elderly care unit because they are only allowed to discuss Palliative Care. These matters would be raised in meetings between the Health Board Chairman and Hospice Chairman, however, there has been no such meeting since 22 October 2010 and they certainly do not take place with such regularity as being held "quarterly." The lack of meetings is despite the Cabinet Secretary's instruction to the Health Board to engage in constructive dialogue with the Hospice, an instruction repeated to the public and the Health Board at the Annual Review of NHS Greater Glasgow and Clyde on 1 November 2010. No such dialogue has taken place.

Mr Calderwood referred to the Hospice not signing the Service Level Agreement. St Margaret of Scotland Hospice wrote to the NHSGGC Chairman, Andrew Robertson, on 15 November 2010 to outline the reasons why the Hospice was not in a position to sign the SLA. To date there has been no response from him. St Margaret of Scotland Hospice has outlined quite clearly to the Health Board the reasons for not signing the SLA, also there was ongoing work being carried out by the Scottish Government around the HDL (in which our own Vice Chairman was one of the selected representatives). This group's work has not yet been concluded. In addition, the Hospice is not able to sign the Service Level Agreement given the continuing care element of the Hospice will be affected from 2012 – i.e. there will be a fundamental service change in 2012 and the SLA will not expire until 2013. As was explained in my last letter to the Petitions Committee, the Health Board is still withholding Hospice money, now amounting to £170,000 for two years, until the SLA is signed. I repeat: this is a form of blackmail.

Mr Calderwood commented on the possibility of adopting a different approach to St Margaret of Scotland Hospice, in relation to the five other Hospices in Glasgow. Is he forgetting St Margaret's has been treated differently in that it has never been funded at the same level as other Hospices within the Board area. St Margaret of Scotland Hospice is the only Hospice within the Health Board area to have both Specialist Palliative Care and NHS Continuing Care. Therefore a different approach **must** be implemented. Mr Calderwood suggested in his letter a proposition would be sent to the Hospice in the next week. Isn't it extraordinary that yet again, the Health Board have chosen to make their intentions public without first having the courtesy of communicating it to the Hospice? In addition to this, no such proposition has arrived.

Mr Calderwood explained there is now a change to the redevelopment plans for Blawarthill Hospital. At the Health Board meeting on Tuesday, 15 February 2011, it was disclosed the Health Board had been aware of this since the end of last year. However, this knowledge was not released into the public domain until the day before the Parliamentary Debate regarding St Margaret of Scotland Hospice on Thursday, 10 February 2011. At the Debate in Parliament, Shona Robison made it quite clear when she stated "We will ensure NHS Greater Glasgow and Clyde is at the table with an open mind". Furthermore, Shona Robison stated "I remain confident that, by working together, it is possible to seize the opportunity that has undoubtedly arisen through the situation at Blawarthill to have the discussion that perhaps should have happened, has not happened and should happen now about the option of retaining the beds at St Margaret's." Therefore, St Margaret's should be **part** of the review, not as Mr Calderwood described, "be informed of the details of the review in the near future."

Also, the paper presented to the Health Board members on 15 February 2011 was very vague. The paper did not mention:

- Who is conducting the review, i.e. is it an independent third party?
- Who are the parties involved in the review?
- What is the remit of review?
- What is the timescale of the review?

Also, will there be public consultation after the review has been completed in order to test the robustness of the outcome? We understand NHSGGC have already met with Glasgow City Council Social Work regarding the future of the Blawarthill development.

At the Health Board meeting on 15 February 2011, the Director for Corporate Policy and Planning presented the paper to the Health Board members regarding Blawarthill Hospital. This paper notes the review which is now taking place will be complete at the **end of** the summer, rather than "by the summer" as Mr Calderwood stated. When questioned by a Health Board member over the political statements made in support of St Margaret of Scotland Hospice and the fact the review will be concluded after the election, the Director for Corporate Policy and Planning replied "political statements may not come to pass" and "the Cabinet Secretary may not be the same Cabinet Secretary after the election." It was also stated the decision will be made by the Health Board. Is there any point in having elected politicians when Health Board employees are in a position to ignore their instructions? Perhaps the time has now come to put into practice the desire of the Cabinet Secretary to have **elected** Health Board members who are able to instruct the employees – after all, it is the taxpayers' money which pays their salaries.

Only on Thursday, 24 February 2011, Jackie Baillie, MSP raised the funding of the continuing care beds at the Hospice by the Scottish Executive in the General Question Time in the Scottish Parliament. During her response, Nicola Sturgeon, Cabinet Secretary for Health and Wellbeing, advised "The chair of the NHS board has written to the chair of St Margaret's seeking a meeting to discuss the Hospice's involvement in the review. I hope that

members will welcome that. I have asked the Chairman of the board to give me a full report immediately following the meeting. I encourage the Health Board to do what is right in the circumstances. I hope that all members will welcome the fact that the Chairman of the Health Board has written to the Hospice seeking its involvement in the review. All members will accept that the fundamental change in the circumstances, however it has come about, presents an opportunity to look at the situation afresh and an opportunity for the board of St Margaret's to make its case. I therefore welcome the approach that the Health Board has made to the Hospice. I hope that it responds to that approach and I look forward to receiving and considering the report of the meeting immediately after it has taken place...As I said to Jackie Baillie, the changed circumstances give St Margaret's an opportunity to make the case that it has been making. I expect the Health Board to listen to that case and I look forward to hearing the outcome of the discussions." Why should St Margaret's have to **now** make a case when they have already spent the last 3 years defending the rights of patients and their families to secure good End of Life care.

It is my hope the Health Board will follow the Cabinet Secretary's instruction and take this opportunity to engage in constructive dialogue as the Hospice has had a long wait for "meaningful discussions."

We are very grateful to the Petitions Committee for continuing with the Petition. As neither of the issues raised in the Petition have yet been resolved, we appeal to the Petitions Committee to keep the Petition open until these matters have been concluded.

Yours sincerely,

Jean Anne Mitchell