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Public Petitions Committee  
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Your ref: PE1568  
24 July 2015

Dear Mr Sharratt,

Thank you for your letter of 10 June 2015 to Melissa O'Reilly, Committee Liaison Officer, concerning petition PE1568 (funding, access and promotion of the NHS Centre for Integrative Care). As Head of Strategic Planning and Clinical Priorities, the team with responsibility for policy relating to the Centre for Integrative Care (CIC), I have been asked to provide a response on behalf of the Scottish Government.

It may help if I first provide the Public Petitions Committee with some background information. The CIC is one of the range of services provided by NHS Greater Glasgow & Clyde (GG&C), who have confirmed that they have no plans to change the services provided by, or indeed to close, the CIC. Additionally, this was restated to Shona Robison MSP, Cabinet Secretary for Health, Wellbeing and Sport, and Maureen Watt MSP, Minister for Public Health, during their visit to the centre on 3 June 2015. Ms Watt also gave her personal assurance in that regard at the meeting of the Cross-Party Group on Chronic Pain on 20 May 2015.

The Committee's letter asks if the Scottish Government is supportive of the petition's proposal to provide national funding for the CIC as a '*specialist national resource*'. I can advise that it is not usual practice to designate a centre or facility as a national resource. Rather, it is a specific highly specialised clinical service that may be considered for national designation through the National Specialist Service Committee. Full information about highly specialised services and the application process for national designation is available at the following website: <http://www.nsd.scot.nhs.uk/%5C%5C/about/nssc.html>.

In regards to whether the Scottish Government will provide leadership and direction to NHS Boards to ensure that patients across Scotland have access to the CIC, we recognise that complementary and alternative medicines/therapies, such as those provided by the centre and elsewhere, may offer relief to some people suffering from a wide variety of conditions.

It is, however, for individual NHS Boards to decide which complementary and alternative medicines/therapies they make available to their patients based on the assessed needs of their resident populations and in line with national guidance. It is also a matter for individual clinical assessment and agreement between a consultant (or other healthcare professional) and the patient as to whether or not onward referral is appropriate.

Additionally, although it is current Scottish Government policy to ensure that services are delivered as locally as possible, it is well recognised that the CIC delivers services that may not be available in every Board. The Scottish Government has offered to work with NHS GG&C to explore how we may be able to assist in raising awareness of the CIC and the full range of services it provides.

I hope that this information is helpful.

Yours sincerely,

**Elizabeth Porterfield**  
Head of Strategic Planning and Clinical Priorities  
Planning and Quality Division