PE1568/II

Lothian Homeopathic Group letter of 23 August 2016

NHS Greater Glasgow & Clyde - Proposal to close CIC inpatient beds

I am writing on behalf of patients across Scotland following the NHS Greater Glasgow and Clyde Board meeting on Tuesday 16 August, where the Board accepted a proposal to close the inpatient beds at the Centre for Integrative Care and to begin a consultation process.

Since the Public Petitions Committee is currently considering a petition (PE1568) seeking central funding for the CIC, I am astonished that NHS GG&C appear to be pre-empting Parliamentary process. Despite having been called to appear before the Public Petitions Committee and to produce written answers to their questions, Mr Calderwood denied all knowledge of any petition when challenged at the recent NHS GG&C Annual Review.

NHS GG&C's Chief Executive and his team repeatedly assured both the Committee and the Cabinet Secretary that the withdrawal of out-of-area referrals would not lead to any reduction or closure of services at the CIC. These have proved to be empty words.

I had assumed that a consultation meant listening to the views of those involved, particularly the clinicians and patients, who will be most directly affected, and taking account of those and all the arguments before weighing these up and reaching an open-minded and rational decision, based on the facts. However, it would appear that the Board has already made its decision and the 'consultation' is no more than a paper exercise. This is further underlined by the disclosure that the final decision will be taken at the December meeting of the Board and the closure will be effected shortly thereafter. In addition, I have just learned that the personnel involved in the proposed national Pain Clinic have been told that they will be in place in the present CIC inpatient facility next April.

In the CIC, Scotland has a model of service modernisation, one with an international reputation and the envy of doctors worldwide. The use of a wholly patient-centred integrative system of care which supports self-management for even the most vulnerable patients is an exemplar of the World Health Organisation's recommendations for the future development of healthcare, one endorsed by Scotland's Chief Medical Officer, Dr Catherine Calderwood, and the Scottish Government. There is ample documentary evidence from both the USA and many European countries that Integrative Medicine is the way forward: patients treated in this way require fewer visits to GPs and specialists, spend less time in hospital and are able to take more responsibility for their own health. Particularly when there is pressure to save money, moving away from this model is a retrograde step.

The short-term gain to be made by closing wards can only be a sticking plaster solution to the crisis which the NHS is facing. A more radical and longer view will have a long-lasting impact in the end, not only financially but on people's overall health and wellbeing.

Closing the inpatient beds will leave the most vulnerable patients in an impossible position: they will be forced back into a system which has not helped them in the past and which will involve more GP and specialist visits – and therefore be more costly.

It is most unfortunate that one of the therapies offered by the CIC is at the centre of a campaign by sceptics to have its use withdrawn from the NHS. They claim, despite well-documented evidence to the contrary, that homeopathy is not evidence-based. Interestingly, a British Medical Journal study of Clinical Evidence (enclosed) shows that 50% of conventional treatments were of unknown effectiveness and only 11% could be said with certainty to be beneficial. Nevertheless, clinicians are able to use their judgement, based on observation and experience to treat patients using the method which they deem to be most appropriate. It would therefore be a travesty if this prejudiced opinion by a small but vocal minority were given precedence over the vast majority of those patients and doctors who have found this treatment to be beneficial, often when other methods have failed and people have been left with nowhere to turn.

I ask the Committee to require NHS GG&C to withdraw their proposed closure of the inpatient facility at the CIC whilst the petition regarding it is still under consideration.

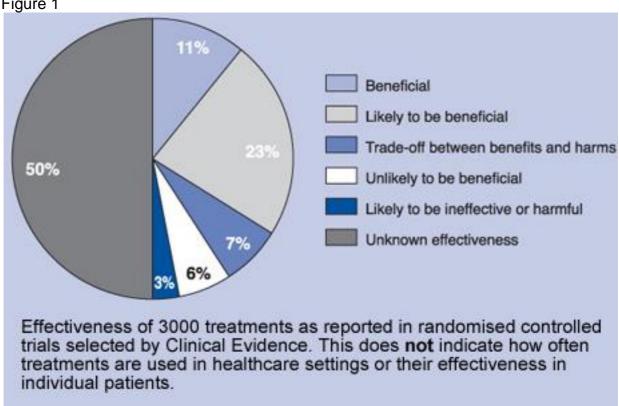
Yours sincerely

Margaret Wyllie Chair, British Homeopathic Association Convenor, Lothian Homeopathic Group

Enc: BMJ Clinical Evidence

A recent study of 3,000 clinical trials conducted for the BMJ database Clinical Evidence found that 50% of the treatments were of unknown effectiveness and only 11% could be said with certainty to be beneficial (see Fig 1 below).





(http://clinicalevidence.bmj.com)