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# St. Margaret of Scotland Hospice

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Professor Leo Martin, LLB (Hons) Dip.LP NP Chairman

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Frank McAveety MSP Convener of the Committee Public Petitions Committee The Scottish Parliament Edinburgh EH99 1SP

Dear Frank

#### St Margaret of Scotland Hospice (Petition PE1105)

I understand the Petitioner, Mrs McCance, has submitted a response to the Health Board's recent letter to the Petitions Committee. However, I know you have an interest in this and just in case you did not get the chance to read all the papers sent through, I simply wish to send a summary of where we currently are with the Health Board.

We have met twice with the Health Board, firstly on 2 May 2008 and then on 11 June 2008. We raised a number of questions at the meeting on 2 May 2008 which, somewhat frustratingly, remain unanswered. We have continued to forward these outstanding points to the Health Board in subsequent correspondence and await their reply. For your information, I have attached a note detailing the outstanding points. Furthermore, from our meeting of 11 June 2008, Tom Divers undertook to revert to me personally on a few issues, in particular the possibility of removing the deadline date of 1 April 2009; I have not heard anything further from him. In Tom Divers' last letter to the Hospice dated 15 July 2008, he advised he would hope to revert to us within the following 2 weeks. We have heard nothing further from either the Chief Executive or the Chairman of the Health Board.

During the meeting on 11 June 2008, we presented the Health Board with a third option; for the Hospice to provide Palliative/End of Life Care for elderly patients. We forwarded detailed documentation based on current research to the Health Board on 3 July 2008 to which they replied they had "read this with interest". We had heard nothing further from them and were therefore extremely disappointed Tom Divers did not refer to this third proposal in his letter to the Committee. However, following the NHSGGC Annual Review on Monday, at which Senior Hospice Management were present, it was the first time the Chief Executive of the Health Board agreed with the Hospice's preferred option of providing Palliative Care/End of Life Care for patients with complex and end of life issues.

In light of the Audit Scotland report issued today, we feel this further substantiates this third option. You will recall when Sister Rita and myself presented to the Petitions Committee in December, we outlined the Hospice has always accepted patients with non-malignant conditions. The Audit Scotland report has highlighted St Margaret of Scotland Hospice has the highest number of patients with non-malignant conditions. It is now hoped Frank, that in light of the above, yourself and your Committee will be able to encourage the Health Board to bring this matter to a speedy conclusion.

I will keep you informed.

Kind regards

Yours sincerely

Professor Leo Martin

Chairman

## List of Outstanding Points from Meetings with Health Board

### Points from meeting of 2 May 2008 not addressed:

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- a. Why Anne Harkness altered the balance of care report of 2005 in 2008 from 30 beds to 26 beds thus further compromising the integrity of the report.
- b. The full waiting list transparency and being upfront. The Hospice has been informed that "it doesn't need to know that information".
- No acknowledgement that 40% of patient admissions to the Mary Aikenhead Centre fall outwith Glasgow City Council
- d. The 16 different reasons presented in letters and reports for the Health Board decision.
- e. The whereabouts of the 'Final copy of Balance of Care report' ratified when and by whom?
- f. A copy of the tool Anne Harkness used for collecting, analysing and predicting less demand for continuing care
- g. The reduction of choice for individuals who choose the Hospice as a preferred place of care for NHS Continuing Care, as referred to in Scottish Government Publications, Care Commission Standards and CEL 6 2008?
- h. What happened to the draft contract with the Hospice in 2000 and why was it not completed? Why did this disappear in 2005 when it became apparent the Hospice would be affected by the Balance of Care Findings.
- Comments of ward managers who came for training in the Hospice who clearly identified end of life care is an
  area they neither have confidence nor skill of delivery mainly due to the shift of balance of care that has already
  occurred within NHSGGC.
- j. Why not open up access to the ward to all Geriatricians?
- k. Lack of consultation and basic manner of communication with a service the NHS & Glasgow City Council constituents have benefited from for 58 years. It could be interpreted it was better to consider the deal done and push the process through in order to avoid that which has ensued. Was that the intention behind the shambolic consultation process?

### Points from meeting of 11 June 2008 not addressed:

- a. NHSGGC did not forward their press statement on the afternoon of 11 June 2008 as promised.
- b. Tom Divers did not call Professor Martin before 24 June 2008 as promised regarding the 1 April 2009 deadline date. Professor Martin telephoned Mr Divers and Mr Divers did not return the call.
- c. Tom Divers stated he would sent out a terms of reference on the next piece of work to be carried out, which Andrew Robertson confirmed would be in draft. This has not yet been sent.