

Mr Frank McAveety
Convener
Public Petitions Committee
TG.01
The Scottish Parliament
Edinburgh
EH99 1SP

2 February 2009

Dear Mr McAveety,

St Margaret of Scotland Hospice (Petition PE1105)

I have been asked to reply to the response you have received in relation to the Petition from Ms Nicola Sturgeon, Cabinet Secretary for Health and Wellbeing (dated 11 January 2009).

The Hospice has always maintained and can evidence the NHS Continuing Care beds are required. However, in the spirit of compromise and negotiation, at a meeting between NHSGGC and the Hospice on 11 June 2008, the Hospice outlined a proposal for Palliative Care for the Elderly. This proposal was sent to NHSGGC on 4 July 2008 – to which the reply was “it had been read with interest”. There was no feedback on the proposal, nor was there any indication such proposal was of no interest to NHSGGC. Clinical members of the Hospice team met with the NHSGGC Director of Rehabilitation and Assessment on 26 September 2008 to expand on this proposal and, in light of the Audit Scotland report, a further proposal was produced looking at Palliative Care for patients with Non-Malignant Diseases. At the meeting on 26 September, it was agreed the proposal should be drawn up in more detail and forward to NHSGGC. The proposal was sent to NHSGGC on 20 October 2008

Indeed, the Cabinet Secretary will recall Mr Divers making reference to such a proposal at the Annual Review in August 2008.

The Health Board have not responded to this letter of 20 October 2008. The Hospice specifically asked for this proposal to be presented to NHSGGC Board Members, and yet this was not done either. The proposal was written in light of the National Action Plan and the recent Audit Scotland Report on Palliative Care and therefore clearly reflects the needs of the population based on current and recent research.

The Chairman of NHSGGC advised his Board Members on 16 December the Hospice was refusing to co-operate with the work. This is simply inaccurate and misleading the Board members. The Hospice has consistently attempted to work with NHSGGC as can be evidenced from the 2 papers submitted on 4 July 2008 and 20 October 2008, neither of which have received the courtesy of a reply.

The Hospice’s “rejection” of the two options put forward by NHSGGC is not new. The Hospice has made clear to the Chief Executive and Chairman of NHSGGC at the first meeting on 2 May 2008 why these options, of a care home with nursing or continuing care for the mentally ill, are not viable options within a Hospice setting. Furthermore, the Members of the Hospice had rejected both proposals. This position remains.

As has been highlighted to NHSGGC, neither option put forward by the Health Board can be considered in light of the Hospice’s Memorandum and Articles of Association, which clearly state the purpose as being a Hospice. Indeed, NHSGGC have confirmed they were not aware the Hospice operated under clear Memorandum and Articles of Association.

With regards to the funding of the Hospice, this is not as clear cut as making reference to 50% limit imposed by the HDL.

From the table below, it is clear to see St Margaret of Scotland Hospice receives the lowest level of funding per bed at £31,000. However, other Hospices receive £126,000 per bed. Indeed, the Scottish average per bed is £86,000. St Margaret of Scotland Hospice receives only £31,000 per bed. I do not think anyone with any integrity or common sense could consider this to be fair.

Hospice	2007-08 Estimated total revenue expenditure	Total Health Board Funding	Contribution from voluntary hospices	Number of Beds	Cost per Bed	Funding per Bed
Accord	2,075,938	958,190	1,117,748	8	259,492	119,774
Ardgowan	2,209,265	959,510	1,249,755	8	276,158	119,939
Ayrshire	4,253,547	2,052,924	2,200,623	20	212,677	102,646
Bethesda	485,077	231,840	253,237	4	121,269	57,960
Highland	3,309,383	1,248,282	2,061,101	10	330,938	124,828
Marie Curie Fairmile	3,572,525	1,440,930	2,131,595	27	132,316	53,368
Marie Curie Hunters Hill	3,857,501	1,815,997	2,041,504	35	110,214	51,886
Prince & Princess of Wales	3,396,050	1,399,800	1,996,250	14	242,575	99,986
St Andrews	4,200,588	2,166,100	2,034,488	20	210,029	108,305
St Columbas	5,067,081	2,387,440	2,679,641	30	168,903	79,581
St Margarets *	1,943,624	938,040	1,005,584	30	64,787	31,268
St Vincents	1,686,400	826,121	860,279	8	210,800	103,265
Strathcarron	3,758,702	1,757,865	2,000,837	24	156,613	73,244

Source – Scottish Partnership for Palliative Care

The simplest way of controlling and understanding costs for a Hospice is to work on a cost per bed per annum. This allows costs for various Hospices to be compared on a like for like basis and would ensure that funding is based on a fair and equitable system. In the past the Health Board have refused to discuss this method even though they use a similar system in the Blue Book. Any normal accountant in a commercial situation would also use this method.

It is important to understand all of the facts surrounding the ongoing situation with the Health Board. You the members of the Petitions Committee will be aware that the Hospice is in possession of a letter from Chairman of the Health Board in which he states that funding for the Continuing Care beds will cease as of April 2009, and while this has not be ratified by the full Health Board, it may well take effect in just 7 weeks. Therefore I crave the indulgence of the Petitions Committee in that they allow this letter to be submitted to the Health Minister before their next sitting, requesting that she urgently respond prior to the next meeting of the Petitions Committee, as time is of the essence. This is a Health Board in disarray and in that respect, I would echo the sentiments of Jo Swinson MP and Jackson Carlaw MSP and call for the Cabinet Secretary to order an independent review of the situation.

Yours sincerely

Marjory McCance
Campaign Manager

