

Health Committee - Reshaping the NHS in Scotland?

Public Debate

Monday 11 April 2005

Miss Isabella Mooney (Glasgow Homoeopathic Hospital): I thank the Parliament for letting me be here today to have my say. I am an in-patient at the Glasgow homeopathic hospital, the in-patient bed facility of which is currently under review by Greater Glasgow NHS Board and might be closed. In April last year, the health board produced a press release headed "Challenge to deliver modernising agenda". It stated that the health board would deliver that agenda by "identifying things that happen today that are not representing good value to patients and taxpayers alike."

My concern is not only for myself, but for the many who cannot be here to have their say. I believe that the in-patient bed facility in the Glasgow homeopathic hospital represents exceptional value not only to the patients who use it, but to the NHS and taxpayers, as it results in noted reductions in in-patients having costly medication, visiting their GPs, being referred to specialists and consultants and having costly investigations and surgery. That alone represents good value, saves time and frees up precious time. The exceptional value is reserved for the patient, who has access to an award-winning hospital that is the envy of the other homoeopathic hospitals in the country. It is not only surgical skills and technology that save lives.

The patients who attend the in-patient unit suffer a wide range of complex chronic illnesses, disability, emotional trauma, terminal illness and chronic pain. The commonality of the patients is the fact that they have all been down the conventional medical route and experienced the accompanying emotional rollercoaster ride. After many years of being on that emotional rollercoaster, people hear the words, "We can do no more. Take these pills and go away."

I have a degenerative bone disease that has no cure. I was referred to the homoeopathic hospital by a specialist consultant from Bristol, and I remember the words, "last resort." From the moment that I entered the hospital building, I knew that it was something different. Many of the in-patients' testimonies against the proposed closure of beds use words such as "sanctuary" and "haven". Those are powerful words to describe a hospital.

In its approach to treating patients, the hospital treats the whole person—the body and the mind. It works. I do not know the science; I just know that the approach works. I have the same bone disease that I have always had. That will not change, but I have changed and how I cope with my condition has changed. The transformation in me is nothing short of a miracle, but that is just my opinion and that of my family and friends.

If Greater Glasgow NHS Board continues with its proposal to axe those vital beds, with the loss of a unique and pioneering model of homoeopathic and integrative care, along with the team, the skill base and the experience, that will be nothing less than short-sightedness and bad money management. That would not represent good value for patients or taxpayers.

Ms Catherine Hughes: I contribute to the debate from several different aspects: as a carer for my dad, who was diagnosed with Crohn's disease when I was just six weeks old; as a former nurse; and as a patient who would be considered a frequent service user. As an in-patient, I have spent more than a year in hospital as a result of my health care needs and I feel that I can contribute positively to finding solutions. I have been asked to speak to you by several different organisations that have a vested interest in the health of our nation and the role of the NHS in the provision of care for those who have illness and chronic disease. We must address Scotland's reputation as the sick man of Europe and look for the solutions through health promotion.

I was going to take you on a journey to a hospital that is considered a centre of excellence, but Isabella Mooney eloquently took us there earlier. For those who have access to a computer, more information can be found and a virtual tour of the hospital can be taken at the www.ghh.info website. Information about the academic departments can be found at www.adhom.com.

More investment is needed nationally in chronic disease management to prevent the revolving door syndrome as, in their quest for health, patients will not stop placing demands on the finite services that are provided by the NHS. Patients require, on diagnosis, counselling on how to manage a lifetime of health care needs and chronic disease management courses to teach them the skills that they will have to call on to manage their condition effectively. That will mean the training of more specialist nurses in chronic disease care, and patients need to know that they can afford the maintenance medication that they will require to comply with their doctor's orders. The conditions that are exempt from prescription charging criteria need to be re-evaluated, as patients are often on multiple prescriptions for their complex conditions and do not know whether they can afford them.

The National Association for Colitis and Crohn's Disease—NACC—has further information on the prescription issue. This is NACC's 25th anniversary year and awareness of the disease, which affects one in 500 of the population, is the priority. NACC has a membership of 30,000, with groups across the country. More information is available at www.nacc.org.uk.

The views of the Royal College of Nursing's work-injured nurses group—RCN WING—must be considered, as it proposes a solution in utilising the skills of a group of nurses who can still make a positive contribution to addressing the current recruitment crisis. I have also carried out research on the immediate influence of the media on the recruitment of nurses. The media have a positive role to play in encouraging people to enter a profession that is both valuable and rewarding.

I hope that Glasgow homeopathic hospital receives the necessary funding for the expansion of the holistic and integrative care model throughout the health service as well as recognition for the valuable service that it provides. That must be seen as a possible solution to the problems that we currently face. Greater Glasgow NHS Board will make its decision on the plight of the hospital tomorrow.

I thank you for listening and for giving me the opportunity to share my experiences and views with you.