



# PATIENTS COUNCIL NEWSLETTER

July 2018

NEWS, VIEWS AND COMMENT FROM THE ROYAL EDINBURGH HOSPITAL

## Patients Council Meeting – 28 May 2018

We enjoyed a very interesting conversation with Evonne Rendall, Health Improvement Practitioner with Smokefree Lothian. Evonne is currently based 4 days per week within REH and developing the service and relationships with ward staff, management and patients. Her role is to support patients to become smokefree and implement consistency, enabling patients experiencing nicotine withdrawal to be supported by ward staff timely with quick access to NRT. A recent visit by the smokefree team to Maudsley London provided examples of NRT being commenced within 30 minutes of a hospital admission within the mental health setting. As the Scottish Government updates the smokefree grounds legislation due to be implemented later in 2018 (date not yet confirmed), the smokefree team await further guidance on how enforcement will be managed within the 15 metre parameter of all buildings. The REH policy implementation group will resume to support implementation of the legislation.

We pointed out that the admissions process can be chaotic and demeaning – sometimes patients don't see a nurse or doctor for ages after admission. Evonne thinks that consistency is needed across all wards while keeping sight of the human, compassionate approach. However, we wondered if different approaches might be needed in acute wards and rehabilitation wards, especially with regard to long-term patients.

We discussed health inequalities and the financial implications of smoking. We queried the Scottish Government's 'Big Brother' approach. We feel the culture is changing anyway, patients are more aware of their physical health nowadays. We stressed the need for more activities on the wards to combat boredom which encourages smoking. We pointed out how hard it is for smokers who are restricted to the ward or on very short passes.

Alexis Rumbles, Acute Team Lead for Smoke Free Lothian, told us about her visit to the Maudsley Hospital in London where they use a non-confrontational approach to change the ethos by promoting smoking cessation as a positive thing to do, motivating patients to change, get on board, take control.

## Emotional-CPR

We invited Dr Daniel Fisher to tell us about E-CPR in The Hive on 28 June. Over 50 people attended, including service users, advocacy workers, researchers, third sector staff, psychologists, physiotherapists, mental health nurses, social workers, a GP and a psychiatrist.

Daniel trained in psychiatry at Harvard Medical School and practiced for 25 years but it was his lived experience of recovery from schizophrenia that inspired him to dedicate himself to helping others to find their voice and to recover. Developed by people with lived experience, Emotional-CPR is a holistic, hopeful and empowering approach to helping people through emotional crises.

**Connecting** – unconditional, accepting, non-judgemental, developing relationships based on mutual trust and respect.

**EmPowering** – helping people to visualise practical solutions to shift the conditions causing their distress.

**Revitalising** – finding or regaining a valuable role or relationship in the community.

It's a way of life, designed to build stronger and more cohesive communities, it's not just for people in immediate emotional distress. We need relationships with others but trauma leaves people angry, numb, unable to feel. Other people can help them to look at the world in another way, by just being with them, sitting with them, sharing what they feel, acting like an additional heart for them. Distress is a way of trying to solve problems – sharing makes it less overwhelming. Each person knows themselves what's best for them – other people can only accompany them, not fix them which leads to perpetual dependency. Medication should only be used during crisis for as short a time as possible – it's no more important than other things in life. Seclusion and restraint make people feel they don't exist, beyond feeling excluded and isolated. We need to develop an emotional conversation together, caring for each other's emotional well-being, offering mutual support, healing each other, sharing a bit of each other, listening, not giving advice.

## Keeping in Touch

The new General Data Protection Regulations came into effect on 25 May 2018. To receive your own copy of our newsletter, please complete the form on Page 3 and return it to us. Thank you!

## **Group Advocacy**

There has been a definite recovery flavour to our group advocacy over the past few months. Patients often praise the strong recovery focus in the Orchard Clinic and its use of innovative approaches e.g. in employing peer support workers, so it was good to speak to Trevor Jones, one of the people responsible for this happy state of affairs, just before his retirement. Trevor has been in mental health nursing since the 1980's, ending up as Senior Charge Nurse in Cedar Ward. We began by discussing the importance of nurses having a good moral compass, which for us includes the need to speak out and report questionable practice by colleagues. We will always admire those nurses with the courage to advocate for patients in this way, while appreciating the challenges in doing so. Those who are able to raise their voices on behalf of patients help make the NHS a safer place for us all.

Trevor spoke about being one of a group of Edinburgh-based nurses around 20 years ago who had a vision to change things in Scotland's forensic system and who went on to set up what became the Orchard Clinic. They had evidence that a less custodial approach could lead to much speedier recovery and rehabilitation and this continues to be borne out in the clinic to this day. We asked Trevor how to preserve this legacy and he said the fear is that people become complacent about recovery and so there is a constant need to keep encouraging and maintaining recovery-oriented approaches amongst staff groups. Trevor had no truck with the idea that "recovery has gone too far" nor that it involves a shirking of personal responsibility: it isn't simply about nurses saying to patients "Oh well, that's your choice" and leaving things there. I think many patients would want to thank Trevor for his services to patients and their recovery and hope his legacy can continue.

**Have a look at our website**

**[www.rehpatientscouncil.org.uk](http://www.rehpatientscouncil.org.uk)**

**Lots of information about the Patients Council and links to other interesting items**

**[www.facebook.com/rehpatientscouncil/](http://www.facebook.com/rehpatientscouncil/)**

**[twitter.com/rehpatients](https://twitter.com/rehpatients)**

**The Royal Edinburgh Hospital  
Patients' Council**

The Patients Council is an independent collective advocacy project for people who use or have used the services of the hospital. We provide a forum for common issues about mental health treatment and care and represent patients' interests in order to improve services. We hold general meetings every two months. To get involved with mental health issues from the service-user's viewpoint, contact our staff.

**Telephone:** 0131 537 6462

**Email:** [info@repatientscouncil.org.uk](mailto:info@repatientscouncil.org.uk)

**Write:** The Patients' Council, Royal Edinburgh Hospital, Morningside Terrace, EH10 5HF

**Our Management Committee**

Martin McAlpine, Stephen Muirhead,  
Alison Robertson, Patricia Whalley

*Co-opted members:*

Cathy Robertson, Isla Jack

**PATIENTS COUNCIL  
MEETINGS 2018**

**2 – 3.30pm, The Hive**

**29 January**

**19 March**

**28 May**

**23 July**

**24 September**

**26 November:**

**Annual General  
Meeting**

**1.30 – 3pm**

**with refreshments**

Please contact us if you would like a copy of the History of the Royal Edinburgh Hospital Patients Council.

To receive the newsletter direct, by post or e-mail, please complete and return this section. We will hold your information securely and only ever use it when we have news to share. You can ask us at any time to stop sending you the newsletter and we will then delete your information.

*I would prefer to receive the Newsletter by post*  *email*  *(tick as appropriate)*

Name \_\_\_\_\_

Address \_\_\_\_\_

Post code \_\_\_\_\_

Email \_\_\_\_\_



The Royal Edinburgh Hospital Patients Council is a registered charity  
Scottish Charity No SC021800  
Our offices are in the Outpatients corridor in the Andrew Duncan Clinic  
[www.repatientscouncil.org.uk](http://www.repatientscouncil.org.uk)

All patients, former patients, staff and visitors are warmly invited to attend

# PATIENTS COUNCIL MEETING

From 2.00 – 3.30pm on

Monday 23 July  
in The Hive

for a chance to find out more  
about the Mental Health  
Assessment Service and the  
Intensive Home Treatment  
Service