

# PATIENTS COUNCIL NEWSLETTER

# September 2018

NEWS, VIEWS AND COMMENT FROM THE ROYAL EDINBURGH HOSPITAL

# Patients Council Meeting – 23 July 2018

19 people attended. Martin welcomed everyone, and introduced our guest speakers, Dr Ishan Kader, Intensive Home Treatment (IHT) consultant psychiatrist, and Derek Myers from Mental Health Assessment Service (MHAS). The Edinburgh teams were set up 10 years ago — there has been a substantial reduction in admissions and a 9 day reduction in the average length of hospital stay. The Mental Welfare Commission is positive about home treatment.

People experiencing mental distress should first go to their GP who can refer them to MHAS or Community Mental Health Teams (CMHT), who can then refer them to IHTT who can admit them to hospital. Key features of IHTT in Edinburgh are: 24/7, rapid response, gatekeeping all admissions, flexible home visits, medical staff available, mobile, clearly targeted caseloads, remaining involved through crisis, and facilitating early discharge. Challenges include risk management; rising compulsory admissions; inconsistent application; shift working which affects therapeutic relationships; and having different doctors in IHT, CMT and REH. Patient feedback has been very positive - 90% say contact with MHAS was helpful, even if they were signposted elsewhere - only around 10% are admitted to hospital.

We suggested a crisis centre in each locality. Crisis houses and remote monitoring could be considered. Hospital stays can provide respite for carers and a safe environment.

Assessments are needs-based but some patients feel that self-presenting counts against you for admission.

We raised concerns about the privacy and dignity of people waiting for MHAS. Staff are actively seeking a solution because the current waiting areas can be traumatic for both people in distress and people witnessing their distress. In an ideal world, Ihsan thinks a few more beds are needed but the crucial first step must be to fix things in the community – CMHTs are short of staff but it is better for people to be treated in the community.

**New Issues** The UNCRPD moves away from compulsion and the use of force - human rights mean that alternatives need to be offered, although the patient group is split on this. We also use recovery arguments and dispute the primacy of the medical model.

### **New Patients Council Staff**

**Advocacy Organiser** 

We are delighted to welcome Carolyn Macpherson, our new Advocacy Organiser, who is taking over on a phased basis from our Development and Administration Worker, Maggie McIvor, who will be retiring at the end of the year. Carolyn has been volunteering with the Patients Council since the end of last year. She has been delivering group advocacy on most of the wards we cover, as well as representing patients' views at meetings and other events both within and outside the hospital.

Welcome, Carolyn

**Patient Experience Development Worker** 

Isla Jack has been appointed to our new temporary role of Patient Experience Development Worker. The purpose of the post is to promote and develop the provision of independent collective advocacy by the Patients Council, by making improvements to the systems by which feedback on the patient experience is gathered, as well as enhancing the ways in which these patient issues and concerns are addressed by hospital management. Isla will be taking up her new post in the next few weeks and we are all looking forward to welcoming her as a member of Patients Council staff.

# **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**

At the end of June, the planning for the design of the next phase of the hospital began in earnest - Phase 2 will focus on brand new buildings for the hospital's rehabilitation services, as well as for a new 'low-secure' service. The Patients Council has been given four places on the group which will meet several times this year in workshops to create a brief, a design and a 'schedule of accommodation' for the new buildings which are currently ear-marked to open in 2021.

These workshops will look at the current service as well as consider what likely changes may occur in the future e.g. with technology or in recovery and rights-based models of care and incorporate these into any designs. They have considered the type of things that seem to work well – good relationships between staff and patients; a sense of community; the variety of therapies, interventions and activities on offer to patients- as well as the less positive aspects that patients have raised with us around length of stay, pace of rehab, securing patient property and feelings of disempowerment at times.

This is a challenging and interesting process for us to become involved in and we're keen to make the most of the opportunity to make sure that the patients' voice is heard in the inclusive design process. In Phase One we advocated for everybody having their own room, each with a view out to a green space and it is likely we will do exactly the same this time around. Other ideas from patients so far have included making sure any new rehab buildings have a welcoming reception area, ideally with a café. People seem to have a preference for smaller wards too and so far patients have liked the idea of different 'pods' or even individual 'flats' rather than the old-style traditional wards. We know that Rehab can be life-changing for people and think a modern service focusing on recovery, rights, choice, control and autonomy could be very popular with patients.

### Have a look at our website

www.rehpatientscouncil.org.uk

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

www.facebook.com/rehpatientscouncil/

twitter.com/rehpatients

# The Royal Edinburgh Hospital Patients' Council

The Patients Council is an independent group advocacy project. We aim to improve mental health services by representing patients' views. We provide a forum where people who use or have used the services of the hospital can discuss hospital related issues and mental health services more broadly. We hold open meetings every two months. To get involved with mental health issues *from the service-user's viewpoint*, please contact us.

Telephone: 0131 537 6462
Email: info@rehpatientscouncil.org.uk

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

We are always keen to welcome new volunteers!

### **Our Management Committee**

Martin McAlpine, Stephen Muirhead, Alison Robertson, Patricia Whalley Co-opted members: Cathy Robertson, Isla Jack

### **Our Staff**

Simon Porter, Patients Council Coordinator Carolyn Macpherson, Advocacy Organiser Maggie McIvor, Devt. & Admin. Worker

# 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.

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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.rehpatientscouncil.org.uk

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

# PATIENTS COUNCIL METING

From 2.00 - 3.30pm on

Monday 24 September in The Hive

Our guest speaker,

Jamie Martin,

will be telling us all about

the role of the

Co-ordinating Charge Nurse

in the hospital.