Patients Council, Royal Edinburgh Hospital

**ANNUAL GENERAL MEETING 2022**

**2.00-3.30pm on Monday 28th February 2022**

**Via Zoom Link & In-person**

**Notes**

15 people attended the meeting & 3 apologies were received from people.

 Simon will chair the meeting in-person & Stephen Muirhead, as Chair will join us via Zoom link.

Simon began by welcoming everyone via Zoom & in-person including our Guest Speaker Mhairi Snowden. We mentioned that hopefully by the AGM next year we will be able to offer an in-person meeting fully in the usual format which was in place before Covid. We went over our Code of Conduct and online rules.

 1a) **Guest Speaker: Mhairi Snowden is the Director of Human Rights Consortium Scotland and will be discussing how Human Rights are for everyone - (10 minute talk** **followed by a Q & A session)**

**Human Rights- (HR) - abbreviated throughout this document**

Human Rights are international, for everyone and in some countries protected by law. For this discussion we are focusing on the UK, rather than abroad. We are all the real experts in (HR) & they are freely in use in everyday life; they are universal and available to all! HR are not about luxuries, they can be about retaining some fundamental freedoms like being treated with dignity and respect, food, having liberty, a right to life, education and healthcare, a standard of living as well as being free from things like torture and slavery etc. There is a power dynamic between the government – a decision making power and the general public ; HR can help determine how decisions are made and to hold people to account when they are not upheld. They are also about making sure the individual voice can still be heard and protected. The United Nations monitor the UK and can still take them to court. In Scotland, 42% of people are supportive of HR & the values they can represent- (dignity, fairness & equality being a few); only 13% are opposed, sometimes through misunderstanding. Opposition can still lead to an open discussion, upon further explanation and how they can be used generally people are usually more receptive.

Despite laws, rhetoric, & policies being in place, in daily life persistent human rights infringements can still occur, often in multiple forms e.g. poverty, lack of education & abuse. Although there is some evidence of public authorities starting to apply HR to their decision-making processes, general evidence is still limited with sometimes a lack of accountability. A Human Rights Report can be filled in and forwarded onto the United Nations when violations have occurred and laws have not been upheld.

Greater transparency in how decisions are reached are generally thought to be helpful, especially if things have gone wrong and need to be examined further. Things like Covid have shown that temporary restrictions can be put in place but they must be proportionate to the situation, stated in law and usually clearly time-limited. We discussed how in modern society, many people still feel excluded, not everyone has access to the digital world which can mean a lack of information and support which can be detrimental to many especially with health issues. There is also an on-going discussion in whose rights are more important as seen in debates like Trans verses female rights, people’s rights while in prison and other instances of racism in which there are often clear violations of the law, sometimes by those also in authoritive positions.

We then had a Q & A session in which various questions were discussed. Topics included Individual’s Rights & Responsibilities when accessing justice verses the laws implemented by the UK government, Duty Holders of rights especially in work environments, accountability in the administration of medications in which who is protecting the Individual’s rights? If something is forced on someone, surely that person has a right to be heard and respected? Do professional’s rights supersede the patients? We chatted about how if HR are implemented early on in schools with the values of dignity, respect and equality being taken on board how society could change for the better! The issue of Covid and if some will be accountable in the future is interesting as many felt unnecessary restrictions took away basic HR like saying goodbye to your loved ones when dying, attending funerals and visiting people in hospitals. (A Covid Enquiry has been set up by the Scottish Government to address things). A Right to life also became very pronounced during Covid with many vulnerable and elderly people being forced into signing a ‘Do not resuscitate form’ if they became critically ill. Surely this can be seen as a HR violation? We discussed the importance of basic rights being protected, tools put in place to learn from mistakes and better ways forward; HR may not be perfect but we agreed that they are a good starting point; we thanked Mhairi for her presentation and time in what proved to be a lively and interesting discussion!

 **1b) an Introduction from our ‘Mind Your Rights Education Programme’ – (MORE-P), Educators Joyce & Kat**

**Joyce and Kat are part of a team of part-time Educators within the new project known as MORE-P- (Mind Our Rights Education Project) which is funded by the Edinburgh Health & Social Care Partnership. It started in August 2021 initially for two years with the possibility of future funding if successful. The project looks to offer a two hour training programme, open to those either working in the REAS or a Social Care setting which is carried out near the Patients Council offices. It’s main objectives are to raise awareness of human rights generally, offer a better understanding of why they are important and how they can be used. They also look at how any changes in Human Rights legislation can affect general practice. The Educators bring their own lived experience to the roles, along with other skills including couple of backgrounds in law which will come in handy! The workshops began with a few pilot sessions which were then offered on a more regular basis. The training was scenario-based which meant they were taken from people’s real experiences (maintaining confidentiality & anonnominity) within mental health or care, discussing how things could have been done differently or better to allow for a more positive outcome! The participants have ranged so far from art therapy students, trainee nurses and other professionals. This is a new exciting project with further scope to extend in many ways in the future!**

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1. **Notes of the Annual General Meeting on 30th November 2020**- these were proposed and seconded.
2. **Annual Report and Financial Report-** The Financial Report was made available & has also been added to our website; as usual it will be submitted to OSCR to meet our charitable statutory requirements. As Alison as Chair was ill, Stephen Muirhead kindly stepped in to sign them so we could forward them on in time.
3. **Election of members of the Management Committee-** Nominees have filled in the appropriate forms for submission as usual.

Alison, as existing Chair has decided to step down as she has joined the Scott Review. She is on the Executive Team who are working on recommendations to put to the Scottish Government to make changes within the current Mental Health laws. This is a very lengthy and important piece of work & Alison is offering valuable experience and debate. As it is very time consuming Alison feels she cannot do justice to this as well as being Chair. We thank Alison for her time and support and will welcome her back as a valued member of the Patients Council when she is ready! (Alison says the Consultation Document for the Scott Review is available next week for everyone to view)

New members were proposed and seconded; we will discuss at the next MC meeting whether they are all full members or co-opted members for a limited time first.

1. **Date of first meeting of new Management Committee** – Commenced 10th January 2022

1. **A.O.C.B-**
2. ­– **SCIO Update –** We are hoping to change our status as a Charity to that of a SCIO – (Scottish Charitable Incorporated Organisation). There are various reasons for this, including offering our management committee members more protection legally - since the beginning of the new MORE- P project, for this they now have the additional role of employers. At present the Patients Council has an unincorporated status; upon completion of the appropriate paperwork and submission to the relevant organisation, we will come back to the membership for approval and update of any changes!
3. **– Future Directions for the PC-** At present, we are in a hosted arrangement with AdvoCard, a partnership which also includes the Carers Council. We will need to decide whether to stay with this format or change to either a different partnership or bid independently in the forthcoming tender. In the Third Sector, we, along with others need to keep bidding for our existing contracts to be renewed; usually this is every 3 years – (sometimes with a further two year extension). It is worth noting that at present Simon & Carolyn are still officially employed by AdvoCard, not the Patients Council themselves, the structure of the existing organisation is quite complicated; these things need to be looked at, it’s also important to look at any previous tensions that have arisen with this partnership and discuss them openly going forward. By the next AGM we will hopefully know more information to give to our members.
4. – **Thoughts from our Members-** James & Greg from the Carers Council have pointed out that they may also be considering becoming Independent which will affect how they bid in the tendering process. We also discussed the importance of retaining our independence & User-led experience within offering Collective Advocacy, regardless of how the bids are submitted & also the possibility of with some future funding perhaps a good way going forward could be adding a Patients Council Research wing to explore & evidence the various issues which arise!

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