



A Day in the Life of a **CLINICAL NURSE SPECIALIST**

'A Day in the Life of' is a series written by experienced community nurses for student nurses to see what life in the community is like.

Personal details

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Location: Great Chapel Medical Centre a specialist GP practice specialising in Homelessness in Westminster, London

1. What's a typical day for you?

As a clinical nurse specialist working in a GP practice, my days are all different, working like a practice nurse, I do walk in clinics, clinic appointments and targeted clinics e.g., a monthly clinic in a day centre but more recently in my GP practice for the large Roma community working collaboratively with an outreach worker from St Mungo's who comes from the Roma community. I undertake complex case management liaising with multidisciplinary teams and other agencies. I also run an integrated care project with Groundswell supporting 10-15 of the most complex cases who need additional support navigating the care system. I also support up to 4 hostel beds for those who require short term interventions. I also undertake street outreach once a week, sometimes this is targeted and sometimes opportunistic, so you never know what the day brings.

2. What has been your proudest moment in nursing so far?

Working with people who are experiencing homelessness is a privilege, they are so open and resilient it is an honour to work with them, so working in this role makes me very proud, as well as being an independent nurse prescriber which gives me autonomy and improves the continuity of care. I am also proud of some of the small things that make a big difference, like when I enable individuals to become interested in their own health needs, which can lead them to take control and then move on from this service to mainstream primary care services.

3. What skills set would you expect a student nurse to bring to the role of community nursing?

Having really good communication skills with an ability to be non-judgemental and to see the person as an individual letting them lead the consultation and finding out what their priorities are, which may be very different to the students'. It is very important for students to know that just building a relationship can be just as important than fixing the current health problem they need to feel comfortable about this and realise that our priorities are not always the same as the individual. Specific skills include being aware of wound healing and assessment but recognising that the solution to a wound may require a more adaptive approach to care in some circumstances due to the persons living conditions.

4. What do you wish you'd known before you started working in the community?

Before moving into the community, I do not think I truly understood how many professionals work in the community and how much care, interventions and preventative work go on in so many different settings. The number of skills required, and the level of autonomy can be equal, and sometimes greater in the community than in certain secondary care settings.

5. Any advice for aspiring community nurses?

Be a really good communicator who can build non-judgemental relationships, making sure that the person is at the centre of the care being provided, and enjoy the continuity of care that can be lacking in secondary care. Every day is so different, with an abundance of skills being utilised to provide care. You also need to be willing and comfortable to challenge, asking the 'why' question, for example, 'why' are processes done a certain way when they do not meet the needs of a person, 'why' do decision makers make decisions that are not for the benefit of the person in receipt of care.

It's very important for students to know that building a relationship can be just as important as fixing the current health problem.

Katie Baxter



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