

The QNI's Annual Conference
Healthcare in the Community 2022



Inspired Intrepid Indispensable

Creating a Supported Community
Nursing Workforce

Day 5 summary
10 - 14 October 2022



Day 5:

Integrated

Welcome from
Dr Crystal Oldman CBE,
QNI Chief Executive

Thank you to all our sponsors:



1. 'Staff Wellbeing in the Pandemic'

Rob Webster CBE, Chief Executive, West Yorkshire Health and Care Partnership, ONI Fellow

- We have to see people as partners. We're a guest in people's lives and we're not the only ones.
- If we're serious about improving tackling inequalities, much better to prevent than treat.
- 80% of things that affect people's health have nothing to do with the NHS. It's about education, a house to live in, the environment you live in. I always say: have you got somewhere to live, someone to love, something to do?
- Nobody gets out bed to be mediocre. You make a difference every single day, people like me need to make sure you have tools to make that difference.
- Our whole ethos is that real change happens in real work.
- The health care system and the NHS is made out of people, not drugs, kits or buildings. It's pretty obvious but that gets missed too much. We need to look after the people
- If you can't see, you can't be it. Increasing the fairness and equity of access to roles.
- We have empathy with staff and people. I've no idea what it was like to deal with so much death in the last 2 years. I can empathise but I can't know. But I do know that our teams need support.



1. 'Staff Wellbeing in the Pandemic'

Rob Webster CBE, Chief Executive, West Yorkshire Health and Care Partnership, ONI Fellow

- A learning disability is not a health condition. Serious mental illness like schizophrenia, if you're man you'll die 18 years sooner than the general population. We have to improve to life expectancy for people with a learning disability and serious mental illness authority.
- You will do things for people if you have a good relationship with them. Often in the system, we base things on rules. But is the world fair and equitable because of those rules? No. Relationships at every single level, and good rules. Compassion, kindness, warmth, story telling: it's the stories that we tell that help drive what we do.
- Trees are made of sky. If you don't understand that you focus on the ground not what comes out of the sky. The health care system is made of people, not drugs, kits or buildings.
- Mental consequences of the pandemic. What we've seen over 2.5 yrs is the mental health of our citizens has deteriorated. We have to address it now and moving forward.
- Our people plan is to help to ensure that people feel like they belong and if you feel like you're part of a team then you're resilient, your wellbeing is supported.



Ensuring the West Yorkshire Health and Care Partnership leadership is reflective of communities

Recommendation: To increase the fairness and equity of access to roles

- To tackle the disparity that exists between the ratio of colleagues appointed to posts following shortlisting, a redesign of recruitment practice has been conducted across the partnership.
- This has resulted in the design of a suite of resources available on the WY Partnership website due to launch in September 2022.
- The approach was piloted in the NHS WY Integrated Care Board's People Directorate with positive results and is currently being piloted in Bradford Place.
- Opportunities for sharing and spreading of the approach into social care are being explored with Skills for Care

Inclusive Recruitment Strategy

Recruitment Strategy
Inclusive Recruitment Strategy
Recruitment Strategy



Our People Plan

People Plan
Workforce Strategy 2021-2025
Summary

- 1 Looking after our people
- 2 Belonging
- 3 New ways of working to deliver care
- 4 Grow for the future

2. 'Meet the QNI Networks'

Association of Academic General Practice Nurse Educators (AAGPNE):

Angie Hack, QNI, AAGPNE Network Lead and Lisa Clarke, Co-Chair of the AAGPNE

- Members: Representation from all 4 countries of the UK; 65 Members with specific roles in educating GPNs within HEIs; Meet quarterly – currently virtually; 1 hour members only - Discussions around programmes/ consistency/funding; 2 hours members and associate members – National updates from standing speakers: QNI, NHSE, HEE and additional contributors; Outputs GPN focussed publications, policy informers; Associate members: opened to application this year: now have 18 associate members.
- All GPN work that the QNI is involved in was shared
- To find out more or join the network, go to: <https://gpnen.org.uk/login/>

GPN Programmes	
Specialist Practice	<ul style="list-style-type: none">• 4 Member universities• NMC Validated pre - 2022
MSc	<ul style="list-style-type: none">• NMC Validated 2 SPQ pre - 2022
Fundamentals	<ul style="list-style-type: none">• 17 Universities Level 6 / 7• Close links with partner organisations
1 other University NMC validated but not members currently	



Above left: Angie Hack,
Below left: Lisa Clarke



2. 'Meet the QNI Networks' Homeless and Inclusion Health Network:

Kendra Schneller, QN, Homeless and Inclusion Health Network Lead

- 'Inclusion health is a research, service and policy agenda that aims to redress extreme health and social inequities among the most vulnerable and marginalised in a community.'
- System level barriers to care: Patients are stigmatised; Medical reductionist model – health care managed in silos; Patients turned away from GP registration; Recent changes in GP services - total triage, remote by default, the demise of drop in; NHS Charging Regulations; Chances to Make Every Contact Count are missed; CPD options for qualified staff are limited; Lack of culturally appropriate, trauma informed, gender informed services
- Think about your local area and/or your service: Is mainstream GP / community care enabling access? Are there any barriers to accessing your service? Are there any excluded populations, and/or populations with special needs? Are there any specialist services locally you can partner with?
- Read about Kendra's HITPlus project here: <https://qni.org.uk/wp-content/uploads/2019/07/Homeless-Health-Innovation-Projects-2018.pdf>
- Fill in the HIH survey here: <https://eu.surveymonkey.com/r/HHNewsletter>
- Find out more and join the network: <https://www.qni.org.uk/nursing-in-the-community/homeless-health-programme/>
- The new collection of HIH case studies was published today, find it here: <https://qni.org.uk/news-and-events/news/homeless-and-inclusion-health-nursing-case-studies/>



2. 'Meet the QNI Networks' Community Children's Nurse Network

Rebecca Daniels, QN, Community Children's Nursing Network Lead

- The CCN role is highly complex and requires skills in negotiating, coaching, teaching and supporting children and young people and their carers, whilst effectively collaborating with a range of other agencies and services involved in enabling children and young people to remain safely in the community and transition to adult services in due course.
- CCN services are described as the 'bedrock of the pathways of care' for children with: acute and short-term conditions; children with long-term conditions; children with disabilities and complex conditions, including those requiring continuing care and neonates; and children with life-limiting and life-threatening illness, including those requiring palliative and end-of-life care.
- 350 members of the QNI CCN so far, by joining you connect with CCNs from around the UK
- CCNs learn how to roar! We need to develop the additional skills that will allow us to become more business conversant; explore how our service fits within the organisation of the NHS; be aware of national drivers that are informing social policy and how as CCN's we can exert influence; be proactive in tackling barriers that prevent equality in service provision; articulate the value of what we do through undertaking; research to provide the evidence.
- Find out more and join the network here: <https://qni.org.uk/nursing-in-the-community/uk-community-childrens-nurses-network/>



2. 'Meet the QNI Networks'

Long Covid Nurse Expert Network:

Eve Thrupp, QN, Long Covid Network Lead

- Symptoms of Long Covid: breathlessness, depression, fatigue, chest tightness, loss of concentration, anxiety, muscle pain, sleep disturbance, palpitations, joint pain, chest pain etc
- The network gives you access to: expert knowledge, champion Long Covid, shape policy development, network with like-minded people, be an advocate, support development of resource.
- Read about the background of the network here: <https://qni.org.uk/nursing-in-the-community/long-covid-nurse-expert-group/about-the-long-covid-nurse-expert-group/>
- Read about Long Covid experiences and case studies here: <https://qni.org.uk/nursing-in-the-community/long-covid-nurse-expert-group/long-covid-experiences-and-case-studies/>
- 'Living with Long Covid' resource about to be launched (please check this page in the coming days: <https://qni.org.uk/nursing-in-the-community/long-covid-nurse-expert-group/>)
- Find out more and join the network: <https://qni.org.uk/nursing-in-the-community/long-covid-nurse-expert-group/>



2. 'Meet the QNI Networks' Care Home Nurse Network:

Caron Sanders-Crook, QNI, Co-chair of Care Home Nurse Network

- Network: Existed pre-Pandemic; really came into its own during the pandemic as a way of sharing information and raising concerns and seeking support for care home nurses- online; Learn from and listen to the latest research and their findings and how it impacts; Share best practice, innovation and policy; significant high-level representation from QNI to influence change; voice for care home nurses; care home information hub, information on various subjects and topics / Covid 19/supporting people with dementia/technology; Transition to Care Home Nursing Resource- a resource for nurses new to working in care homes: <https://qni.org.uk/resources/transition-care-home-nursing/>
- Forum: launched during the pandemic by the QNI and CNO England – major funding boost by RCN Foundation; to share best practice ideas, innovations, conferences and research about your care home; Opportunity to have an open and honest conversation about some of the issues and challenges you face and how to overcome them with peer support; Community of care home nurses; Raise the profile of your work; Input from experienced and seasoned nurses in the sector as well as expertise from QNI
- Just under 800 members
- Find out more and join the network here: <https://qni.org.uk/nursing-in-the-community/care-home-nurses-network/>



2. 'Meet the QNI Networks'

Infection Prevention Control (IPC) Champions Network:

Charlotte Fry, QN, IPC Champion Network Lead

- DHSC commissioned QNI to develop & deliver the IPC Champions Network to support staff working in Adult Social Care across England including: registered Nurses and support staff, Nursing Homes, Care Homes, Domiciliary Care.
- Purpose of the network is to provide a platform for peer learning that maybe supported by other organisations that work in partnership with social care. To share good practice, ideas & resources; to share any new learning and how this has been put into practice; to provide a safe space for practitioners to be innovative and learn; to support each other with practice issues that may arise through reflection; provide links to organisations for networking to take place outside the meeting if participants wish
- Over 1000 network members
- Join IPC Champions Network: <https://qni.org.uk/nursing-in-the-community/infection-prevention-and-control-champions/>
- Register for next event: <https://qni.org.uk/news-and-events/events/infection-prevention-and-control-ipc-champions-meeting/>



3. 'Reflection on the Life and Legacy of Mary Seacole'

Kayla Meikle (KM) lead actor in the play 'Marys Seacole', is interviewed by Dame Elizabeth Anionwu (EA), QNI Vice President and Patron of the Mary Seacole Trust

EA: What was the impact of your experience of playing Mary Seacole?

KM: Mary Seacole is a lifelong heroine of mine. I learnt about her from school, in one lesson during #BlackHistoryMonth. My life long fascination of her started then. My family are from Jamaica, it's very important for me that I created a very authentic impression of her. It was really special to step in her shoes and represent her respectfully. I felt her guiding me. This play was my first lead in a London theatre. I had to step into my power and share this story with the audience. I had to summon her strength and her resilience.

It's not a historical retelling of her life, I think that's a misconception. This is about her and women today, now.

EA: I'm very very short, there was a phrase I learnt when I was in Jamaica, 'We Likkle But We Tallawah' what does that expression convey to you?

KM: It means you might be short in stature but you possess the power and might of many; you have self courage, self belief. Mary was definitely Tallawah.

EA: What is the relevance of Mary Seacole's work today?



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KM: The play was about Mary Seacole, but it's called Marys Seacole, plural. There are so many Marys today, the women in their home, the women who care for us. The women in the NHS. I refer to you Elizabeth as the modern Mary. She's with us. Especially in this time we've just gone through.

EA: How do you think Mary would have reacted to Covid pandemic?

KM: I think she would have rolled up her sleeves and got stuck in and got into the front line as she did during Crimean war.

EA: Florence Nightingale and Mary Seacole lived at the same time

KM: There's space for both of them in history. Nurses are undervalued, under paid and under-appreciated, in particular our black nurses. It's sad we are still drawing parallels with them now.

EA: Now you've finished the play, how did you feel personally as an actor?

KM: I went to Jamaica in February and from February on I was preparing and then we had rehearsals and previews. Doing a play is a commitment for everyone involved. We were due to finish in June but finished a week early as half of the fell ill with Covid. I was sad there wasn't space for closure. So I took myself away for a couple of days to deal with that. I would love to have a week at the Donmar where we invite healthcare workers to come and see the play for free; or tour the play around the UK. We need to start a campaign!

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Kayla Meikle (KM) lead actor in the play 'Marys Seacole', is interviewed by Dame Elizabeth Anionwu (EA), ONI Vice President and Patron of the Mary Seacole Trust

Question from audience: Are the barriers as great today? How should we dismantle them for black nurses?

EA: I was born and brought up in this country, I'm 75 now. When I was younger I did have the idea that racism could be eradicated by education. I'm a bit more cynical now and I think racism is here to stay sadly. But there's the know-how for organisations: for being transparent and quick in their actions to any members of staff that are displaying racism. For staff to feel confident that if an incident is reported that it won't be brushed under the carpet and that action should be publicised and continually tell staff that. For two reasons: one that the staff who are thinking about being racist will think again, so they know that once you work with us, any behaviour of such kind will not be tolerated, these are the sanctions, it could lead to dismissal. This is the action we have taken and we will continue to take action however uncomfortable it is for the staff or managers, we don't care about political correctness. You don't treat individuals in a racist manner, full stop.

KM: We need our allies to work along side us to publicly and actively fight racism. It's not enough to personally disagree with it.

To read more about the life of Mary Seacole, go to: <https://www.maryseacoletrust.org>.



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'Inspired, Intrepid, Indispensable: Creating a Supported Community Nursing Workforce'

Day 5 - Friday 14 October, 9.30am - 12.45pm



Simply scan this QR code above, with your phone and it will take you to the donate part of the QNI website.

Please consider donating to the QNI - your donations are very important to us as a charity and enable us to continue our support of all nurses in any setting in the community in health and in social care. It also allows us to organise a free conference like this one - and come back and do it again next year. Thank you.

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EVENT STATISTICS



228 delegates



304 likes

145 retweets

19.4k

impressions



Thank you to all QNI staff who made the conference happen.

COMMENTS

A selection from delegates:

Fascinating conversation.
Thank you so much. It
would be great to see the
Mary Seacole play being
put on again! Let's
campaign!

Amazing
conference I feel
quite emotional !!

Wow, such an
inspiring presentation from
a truly inspiring person,
thank you Rob

I am completely mesmerised
by this presentation...
Acknowledging the problems/
issues in a truthful way and
providing real time solution is
extraordinary!!

This has been an
excellent conference,
thank you to all in-
volved for making it
happen :-)

Truly inspiring, intrepid and you are most certainly
indispensable! Thank you so much for all you do and for
enabling others to do amazing work for people through your
vision and mission.
Made me cry and I've been a RN for 25 years!

This has been an
excellent conference.
The platform is great
really easy to use.

What a fantastic session to
end a fantastic week,
thank you to all involved
it's been such an inspiring
week

What an
amazing
week!

What a fabulous
session. Thank you
both so much.

I don't know how to sum up how I am feeling listening
to Rob - so overwhelmed by his compassion and
depth of understanding of what is fundamentally
important for us all, such an emotive insight - why is
he not the PM?