

## Surviving and thriving in challenging times: Annual Affiliated Group Leaders meeting



**Fran Robinson** PCRS-UK Communications Consultant reports on the recent PCRS-UK Affiliated Group Leaders Meeting held on 28th September 2017

Managing stress and looking after both yourself and your local group was the theme of the Affiliated Group Leaders Workshop held at the Telford International Centre in September.

'The NHS is changing, it's a really stressful place to work, the line between work and home has become blurred and life in general is fast paced. So it is time we all stopped, reflected and acted on what is going on with our lives and took some time out for ourselves in this world that is driving us all to distraction. Sometimes it is important to just breathe and be,' said Carol Stonham, Primary Care Respiratory Nurse, Gloucestershire CCG and PCRS-UK Vice Chair, introducing the workshop.

The event covered:

- How to plan for the success and longevity of your group
- Reasons to be cheerful: an optimistic vision of primary care for the future
- Mindfulness: learning how to relax

### Planning for the success and longevity of your group

Mel Canavan, a respiratory nurse specialist and co-founder of the Leeds Respiratory Network, explained how she had set up an education committee to share the workload and responsibility of running her group.

She and her colleague, Sarah Anderson, who she co-founded the Leeds Respiratory Network with, first sent out an email to everyone in the group inviting anyone who was interested in helping to form an education committee to come to a meeting.

A small group of nurses turned up. 'They all felt quite sheepish when they first attended and in turn we were honest with them saying this is the first time we have done anything like this but let's give it a try. And that is how it started,' said Melissa.

Now the group meets two or three times a year and over a meal they plan the agenda for their meetings. 'When we first met we were all a bit shy and nervous but coming to the meetings and working together and sharing ideas to make a success of the network, we have all now bonded as a group and become friends. It has worked because we are a group of like-minded people passionate about improving respiratory care.

'The role is voluntary but everybody has gained in confidence and have all negotiated pay rises or moved on to new jobs. I have really enjoyed nurturing people on the committee. We are now friends for life and

### How an education committee can support your local group

- Committee members will share ideas and jointly steer the professional development of the group
- The committee will share the workload
- It will lead to succession planning and the long term survival of the group
- Members can celebrate successes
- And support each other if the going gets tough

there are plenty of people who are now investing in securing the long term future of the network,' said Melissa.

Carol says: *'If you say to somebody, can you come and help me run the group, please, because I can't do it all on my own? – that isn't a very appealing idea. But if you say, I really want set up an education committee and I need the help and advice of bright and interesting people around me - that sounds like a much more attractive proposition and is likely to help you to recruit your volunteers.'*



Other tips for ensuring the survival of your group:

- Issue reminders to encourage people turn up.
- Make the meeting relevant to the audience, give it a snappy title and tell people what they will learn
- If people fail to turn up email them and explain that although the meeting was 'free' their meal cost X amount, paid for by the sponsors, and that they have taken the places of other people who wanted to come.
- Explain to non-attenders that if they don't come it could result in the group not getting any sponsors in the future
- Charge a deposit which will be returned when people turn up
- Email people after the session with a brief list of bullet points about what they missed, to entice them to come to the next meeting

- Consider the value of a multidisciplinary group
- Set up a closed Facebook or messaging group, such as What's App, to communicate with members
- Send regular emails with news about respiratory developments to create a sense of community

## Reasons to be cheerful

PCRS-UK Chair Noel Baxter said although the NHS environment was currently relatively hostile there were still many reasons to be optimistic and cheerful about the future.

*'It's very easy in general practice or community care to be around very negative conversations all the time. But if you keep going, keep edging forward and improving a bit further, as Mel has done in setting up the Leeds Respiratory Network, you will get there in the end.'*

Noel said that when he sat on interview panels he was always really interested to find out from candidates what got them up in the morning.

He said one of the things that motivated him was being part of a team and realising how valuable supporting the team was: *'It is so important to make your team feel positive because then you will want to come back and work with them every day.'*

Other reasons for getting up contributed by group leads at the meeting ranged from 'working in an environment where we all talk to each other'; 'doing a small thing in a great way'; 'seeing that lightbulb moment when you are teaching someone'; 'making a breakthrough with somebody such as helping them to stop smoking' and 'realising that what you say as a clinician to a patient can have a positive impact'.

Noel went on to say that he could think of many reasons to be optimistic about the future. The development of Accountable Care Systems was likely to improve care as health and local authority finances were pooled. This, for example, would remove the argument about who was going to treat tobacco dependency. 'What we are going to do is say, what is the highest value intervention for this population that has got this particular need, and then there's a real opportunity we might talk together with secondary care or public health about what should be doing.'

Another example might be - instead of primary care having to fight for extra pulmonary rehabilitation services, commissioners would be talking to

hospital doctors about the best way to deliver required outcomes for the population. 'This could be an opportunity for us to communicate better. With larger scale organisations there could be new opportunities for primary care generalists to improve respiratory care for a whole population.'

Noel went on to give a recent example of an uplifting session when in Southwark practice learning time event had changed from a didactic style to one where they started looking at doing things differently.

*'We discussed how we could do a care plan after a patient has had a holistic health assessment and then we brought some actors in. The really wonderful thing for me was to see a fantastic new generation of young GPs, qualified in the last five years, working on being creative.'*

*'A year ago the room was full of negative comments with people saying we can't do this and we can't do that and over time with the right positive attitude we've ended up retaining amazing people on a journey trying to improve things and enjoying their jobs.'*

*'I can see a way forward where not just GPs but all of us in the community can do some more productive work with our patients,'* he said.

## Mindfulness: learning to relax

The meeting ended with a session by Sally Whitely, an ex-army nurse and now a personal developmental coach, on recognising and managing stress in the workplace.

She discussed relaxation techniques and mindfulness, which she said involved making people take control of their breathing and think about where they are in the present.

*'So many of us never stop but just go from task to task. We need to be more aware of what is going on around us, all the positive things such as a tree, kids laughing – the things that lift you up and make you feel good. Unless you stop, you don't remember things. Take a break and you will be more productive,'* she said.

Melissa Canavan described how mindfulness has helped her to tackle her nerves and stress, particularly when she was working in a failing practice.

Carol Stonham said she found practising three minutes of mindfulness first thing in the morning really beneficial. There were a number of apps that people could use to help them learn the technique.

## A shared affiliated group project

As a community of PCRS-UK Affiliated Groups it was agreed that there was an appetite for shared project work between the groups.

The initial project will focus on the new PCRS-UK Fit to Care publication which summarises the key knowledge skills and training required by healthcare professionals caring for people with respiratory disease in a primary or community care setting, at three clearly defined levels of practice (standard, advanced and expert).

The publication was discussed during the meeting and its place both in negotiating funding for individuals planning CPD during appraisal, and at a larger scale when commissioning workforce education.

The shared project will involve each affiliated group discussing Fit to Care with their members, helping them to assess their levels of respiratory practice as defined by Fit to Care. Each member will be asked to reflect on and report back to the group how their knowledge and education compare to levels of practice defined by the publication. If there is an educational gap, members will be asked whether there is a plan in place to address this and if they are unable to do so, what barriers are hindering them. This will be captured in a standardised survey.

Once all surveys are returned a collated report will be produced highlighting the level of practice, knowledge and education that members have in local areas and the barriers they face in accessing further training. It will reflect the multidisciplinary nature of the group membership.

The Affiliated Group Leads are keen, if this project goes well, to embark on other joint projects.