

## Working in neighbourhoods and communities

## **Opportunities**

Working within neighbourhoods and communities would provide an opportunity for the care provided through nursing and midwifery to be tailored to the needs of individual communities. To make sure that these needs are met, direct engagement with the people of these communities would be required to understand what exactly they would need from a community nursing and midwifery service. People may also feel more encouraged to engage with professionals from these services to facilitate this understanding since they are based outside of formal settings which may have been hard to access and potentially intimidating for members of certain communities.

A shift towards community working also provides an opportunity to improve continuity of care for patients. Regarding midwifery, we have heard that several people have been unable to see the same midwife throughout their pregnancy when accessing this service through their GP or at the hospital. This hinders continuity and does not allow for trusting relationships to be built between people and professionals. By having these services based within communities, continuity could be improved allowing for these ongoing trusting relationships between patients and professionals to be built over time.

#### **Barriers**

Not properly engaging with the communities themselves early in this process may create a barrier to delivering high quality care within communities. If communities are not properly involved in the planning stages of how nursing and midwifery care can be provided, care may not meet the specific needs of this community. It is therefore essential that work is done to engage these communities directly to hear their particular care



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needs whilst planning the move to community working and continue to do so whilst working within these communities. As such, despite being part of a multi-professional team, nurses and midwives will also need to ensure it is clear to the public how to provide feedback about their care, or who to contact if they wish to make a complaint about an individual's professional conduct. This is to ensure that the voice of these communities continues to be heard once these changes have been implemented.

There are also concerns regarding the venues for this type of care. Information needs to be provided regarding how nursing and midwifery will be integrated into existing community venues so that patients are properly informed of what they can expect from this care compared to more traditional venues. The accessibility of these venues must also be considered to ensure all patients are able to access care in their communities. For example, we know that community diagnostic centres are not always accessible for those who need reasonable adjustments. This includes patients with additional communication needs as well as issues with English language interpretation. Venues need to consider how these accessibility features will be implemented alongside nursing and midwifery services to ensure that these services are accessible to all patients.

## What we would expect to see included

To ensure that community-based nursing and midwifery services are meeting the needs of people within each community we would expect a detailed description of planned engagement conducted to understand the specific needs of these communities. Plans regarding how nurses and midwives will be integrated into existing community venues should also be included so that patients are able to raise any concerns they may have regarding the accessibility of these venues.



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# Focus on prevention and prosperity and role in health promotion

#### Opportunities in this area

By working to improve health outcomes within communities through nursing and midwifery the burden on traditional health services may be reduced.

Work can also be done to address health inequalities by working within communities to hear what would help them to live healthier lives. Nurses and midwives are able to act as a point of direct contact within the community for populations who may be more isolated. This represents an important opportunity to signpost people towards further support or information. This also nurses and midwives to act as a trusted source of information to tackle misinformation which can potentially be harmful to long term health outcomes.

#### **Barriers**

Poor promotion of the services that are available could act as a barrier to uptake therefore hindering the capability to improve outcomes. This can be the case due to a lack of investment or for different ethnic groups we know that a lack of information available in people's first language can be a barrier. Direct engagement within the community may also be required to rebuild trust in professionals to tell the truth about health information due to the erosion of public trust in health institutions.

We also have concerns about the venues being used to utilise nursing and midwifery to improve outcomes for children, which is mentioned as a key aim for the professional strategy. Children's centres have been shown to be key in improving these outcomes for children aged 0-5 yet across Birmingham we are seeing planned closures of these services with them being moved to family hubs. We know that community and neighbourhood



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facilities across the country are being closed on a wide scale due to funding pressures, in direct contradiction to the ambition to use such facilities more for care. As such, consideration needs to be given to how nursing and midwifery can support these services to continue to produce these positive outcomes.

#### What we would expect to see included

We would expect to see a clear outline of the exact measures being taken within nursing and midwifery services to improve public health. Within this outline we would also expect to see planned engagement to identify what people within different communities need to live healthy lives and reduce the burden on traditional healthcare services.

As part of the strategy professionals should also be made aware of clear routes to share and learn best practice and up to date health literacy information, enabling them to share accurate information with people in an accessible way.

## Addressing global health challenges

## Opportunities in this area

The focus on a move towards community working provides an opportunity for nurses and midwives to engage specific communities regarding these global health challenges. They can identify how these challenges are impacting communities in order to provide targeted care whilst also raising awareness of these issues within communities. This would also provide an opportunity to combat misinformation through the implementation of awareness campaigns by professionals working directly within communities.





#### **Barriers**

One potential barrier is that communities vary in terms of how easy it is to engage with them directly. Vaccination campaigns and screening services for example would need to be tailored to specific communities through engagement to help build trust. This engagement is essential to prevent widening health inequalities created by distrust in the health and social care system.

#### What we would expect to see included

As part of the professional strategy, we would expect to see a clear outline of the role that nurses and midwives will play in addressing global health challenges through community working. Further to this we would also expect a clear plan for how communities are engaged to inform the role of nurses and midwives going forward.

## Research and innovation-based professions

## Opportunities in this area

We know that some health inequalities are entrenched by the lack of diversity in research participation. Increasing the diversity of professionals working in this area could lead to them working with more diverse participants.

There needs to be improved access to allow people from all areas of our communities, especially those more at risk of certain conditions to be involved, so treatments can be developed that are more effective.

#### **Barriers**

We know that populations need to trust in the skills and credibility of professionals working in this area and may be concerned whether they are trained enough to undertake such tasks. Work must be undertaken to



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address these concerns to ensure that people feel comfortable taking part in research and ensure that the findings can be used to tailor care to their needs.

#### What we would expect to see included

As part of the professional strategy, we would expect to see clear communication plans for the public to understand the skills that these professionals can bring to working in this area. Patients need to know that it is not just senior doctors or academics who possess these skills.

## Digital and technology

#### Opportunities in this area

Nurses and midwives have direct access to people who could really benefit from learning and accessing digital technologies. This may present an opportunity to teach them and help upskill and empower people towards management of their own care.

#### **Barriers**

Not everyone is able to keep up with the growing shift towards a digital focused healthcare system. Work must be done to engage these people and ensure that further inequalities are not created whilst attempting to reduce them for others through the use of digital services.

## What we would expect to see included

We would expect the final strategy to include a clear outline of how advancements in technology will be applied to these specific professions and what these changes will mean for patients as well as professionals. Clear pathways should also be made available for professionals to easily learn and develop their skills in this area. This will enable them to stay up to





date with new advancements and be best positioned to support the public in the use of digital services.

## **Modern professional narrative**

#### Opportunities in this area

There is an opportunity for nurses and midwives to address potentially harmful narratives regarding healthcare professions through active engagement within communities. This would enable them to combat misinformation whilst also building trusting relationships with the communities they are working within.

#### **Barriers**

Certain communities may not be trusting of the information provided during active engagement by nurses and midwives. It is therefore important to consider how professionals can build trust within these communities to combat the harmful narratives that may have eroded this trust initially.

#### What we would expect to see included

N/A

#### **Education reform**

## Opportunities in this area

As part of their role in providing care and sharing information with communities it is key to ensure that professionals can access up to date continuous professional development. This is both to ensure that they are up to date on new developments and methodologies but also so that they can share developments and changes within the system with patients effectively. There is also an opportunity for education going forward to include a cultural competency component. This would ensure that nurses





and midwives are best positioned to share knowledge and directly engage with various populations with differing needs to reduce inequalities when working within communities.

#### **Barriers**

A potential barrier to these improvements in education would be staff not being given the time and capacity or resources to learn more or being supported to do so. This may in turn hinder their ability to support and educate whilst working within communities. Steps must therefore be taken to ensure that professionals are truly given the opportunity to access continuous professional development alongside their usual responsibilities.

#### What we would expect to see included

N/A

## Career pathways and post-registration development

#### Opportunities in this area

N/A

**Barriers** 

N/A

What we would expect to see included

N/A

## **Professional culture**

## Opportunities in this area

N/A

#### **Barriers**



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N/A

## What we would expect to see included

N/A



#### Healthwatch Birmingham and Healthwatch Solihull

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