

QNIS CVD Project

Video transcript

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For many people in prison, because they're coming from vulnerable backgrounds, they are not accessing healthcare. They are not realising or understanding that there is a problem with their heart.

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People who experience severe and enduring mental illness die 15 to 20 years younger and a lot of that is around to cardiovascular disease.

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When I realised that they were looking for nurses to do this, CVD project initially dismissed it because I thought cardiovascular disease doesn't really affect children. But then when I thought about it a deeper level, I thought that's madness because early intervention starts in childhood

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prevention of cardiovascular disease is actually at the root of who we support. They were following up patients who's had a stroke and what we want to do is first and foremost prevent them having another stroke but also the primary prevention as well. And this is where my project comes in. It's identifying atrial fibrillation and hypertension in the community setting. We've got chest, heart and stroke charity shops and our high streets. The plan is to use them to have drop in sessions where the volunteers or

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or the customers can have their blood pressure checked for atrial fibrillation. Often it's not until somebody has gone in with a stroke that AF is identified and we will talk in length for secondary prevention. But we need to look at the primary prevention as well. If we're identifying NATO fibrillation, showing people how to take their blood pressure and things, they will then show others family and friends with hopefully the role and effect.

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An invitation went out to all the prisoners to meet with me so that we could sit and and have a chat about heart health. Basically just started with what would you want to know? What do you already know? Where do you go to for advice around heart health? It was amazing how much information they offered around what they felt they needed. Many of them talked about having information that could be put on the internal television,

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so I decided to pick up on their suggestion to have an animation and found it was actually quite difficult to fit it within the budget. So decided right I'm just going to do it myself. So I've I've taken advice from a member of the family whose background is in 3D animation. So I've been making short films just as practise at the moment, but I've actually got to stage where I'm now ready to to start making the the final product.

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If for one prisoner can look at it and go, I understand that,

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or I could change that, then hopefully that will have an impact. However, it needs a whole sea change, right the way back to how we bring up children.

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Through my development programme I learned a lot about leadership and how to bring people with you. I got pretty nursery nurses put to them what the aim of the project was and instead of sharing what I thought, I asked him what do you think was the best thing? How did we get these children to eat better than actually reinvigorated them? And I think they were quite an unseen part of the workforce and they had ideas that were worth sharing. So that that brought ownership for them, for the project and they have very much laid on the project.

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Once Upon a time we did do winning groups, but through COVID obviously that stopped. So as we've revamped them, we've incorporated the CVD stuff. And yeah, so the the funding from the Burdett Trust has allowed the team to develop weed impacts and hopefully get them wins on a healthy diet rather than processed foods etc.

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So we talk about self-care and looking after ourselves all the time. You know, that's part of our role with service users. But actually, do we do that ourselves

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during the programme? Allowed me to really focus my energies and my efforts and actually let's tackle this properly.

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One of the things I really want to do is inspire other people and my team around me. But it also cause it's a difficult journey, you know, when you're introducing a change. So the programme reminded me about the importance of self-care and also to spread that to the my team that I work with. But for 10 act a big change like somebody to really address their kind of poor physical health. It has to start with soft, gentle conversations, and the staff are starting to do that, that growth. Within the team,

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there's a real desire and energy about making a difference and improving people's physical health.