NURSETRI

Warsaw, Poland

18th–19th November 2022

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Day 1 – Friday 18th November		
15.30– 16.30	Registration	
16.30 -16.45	Introduction to NURSETRI and JUSTRI	*Mike/Jane*
16.45 – 17.45	Introductions and expectations of the workshop	*All/ Zoe*
17.45 – 18.30	Working in a crisis pandemic/Monkey Pox	*Jane/Jonathan*
18.30 – 19.00	Treatment cascade and local situation/international ambitions	*Janey/local nurse*
Day 2 – Saturday 19th November		
09.00 – 09.20	Immunology and virology	*Anele*
09.20 – 09.30	Transmission	*Zoe*
09.30 – 09.50	PEP and PREP	*Anele*
09.50 – 10.30	U = U and nurse management	*Janey*
10.30 – 11.00	Coffee Break	
11.00 – 11.30	Clinical studies historical context/world situation	*Jonathan/Anele*
11.30 – 12.00	New drug developments/ nurse management of medication	*Anele*
12.00 – 12.30	Managing newly diagnosed patients	*Jane/Local nurse*
12.30 – 13.00	Managing ongoing care/ opportunistic infections	*Jonathan/Local P*
13.00 – 14.00	Lunch	
14.00 – 14.30	Impact of Stigma	*Jane*
14.30 – 15.00	Key populations	*Anele/Jane*
15.00 – 15.30	Refugees	*Jane/Janey/Local nurse*
15.30 – 15.45	Coffee Break	
15.45 – 16.30	Supervision and support	*Zoe*
16.30 – 17.00	Partnership working and the MDT	*Jonathan*

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NURSETRI in Warsaw

REPORT FROM NURSES, 18th – 19th NOVEMBER 2022

This was the first ever NURSETRI meeting in Poland with a Friday evening session with working dinner, and a full day on Saturday. The UK team developed the programme with Dr Justyna Kowalska, and the local HIV Nurse lead, Agnieszka Fidos, both based in the main Warsaw hospital.

We were mindful that the COVID pandemic and the war in Ukraine have had a profound impact on the nurses and HIV services and we made sure that these were given adequate discussion time and were delighted to have local speakers on these topics.

The four-strong NURSETRI team covered a range of experience including acute and outpatient HIV and sexual health clinical care, patient and public involvement and clinical and qualitative research. Jonathan Edwards was new to the team, and Anele Waters, Janey Burr and Jane Bruton have worked with NURSETRI for several years.

There were 26 nurse attendees from the HIV/ Infectious disease clinics and wards in Warsaw and other parts of Poland and two representatives from the Social Education Foundation a local NGO. Most of the attendees were very experienced (20-42 years) nurses with HIV work form 1 year to 25 years. The workshop was conducted in English with simultaneous translation and the slides had been translated into Polish by Kuba Kowalska.

A central aim was to stimulate interactive discussion, which was facilitated by the two excellent interpreters who worked tirelessly throughout. To this end, the programme incorporated a mixture of teaching and learning styles, both lectures and group work.

With such a range of experience in HIV, parts

> **“ The HIV and infectious diseases team had taken the brunt of the pandemic as the inpatient HIV wards admitted COVID patients”**

of the programme were either new or revision which we explained at the beginning, and we asked attendees if they were happy with the programme, which they were.

Friday: 15.30–19.00

Dr Mike Youle briefly introduced the work of JUSTRI, and Jane explained the overall aims of NURSETRI and the meeting objectives. We then invited the delegates to introduce themselves, where they worked and how long they had been a nurse or worked with HIV patients. This was very informative as it highlighted their level of experience and raised how difficult it had been during the COVID pandemic.

Jane presented an overview of the challenges for nurses during the pandemic followed by one by Agnieszka Fidos on the specific issues faced in Poland. She explained that the HIV and infectious diseases team had taken the brunt of the pandemic as the inpatient HIV/ID wards admitted the COVID patients. The pressure on staff was tremendous, working long hours, on very busy wards, some nurses switching from clinic to ward work, having to protect their own families and with little support other than amongst the team themselves. The HIV clinics remained open for the duration of the pandemic

and several nurses shared their experiences.

Jonathan then presented an update on Monkey pox regarding case numbers, vaccination, and treatments and Janey gave a presentation on the treatment cascade and the latest UNAIDS 2030 goals and aspirations. Finally, Magdelena

> **“ Janey introduced some key facts about the refugee crisis in Poland then the nurses broke into groups to discuss how this had impacted them in their work”**

Ankiersztejn-Bartczak, from the Social Education Foundation, talked about the impact of Warsaw becoming a Fast-track City. We finished with dinner in the hotel with a good atmosphere amongst the attendees, reflected in the evaluations.

Saturday 09.00 – 17.00:

Anele opened the day with a review of HIV immunology and virology and Janey followed this with a talk on transmission, including an update on the guidelines for breastfeeding. The local hosts had requested sessions on PEP, PREP and U=U so Anele presented the latest information on PEP and PREP and Janey showed the research that led to the confirmation of U=U and discussed the role of nursing in relation to this. There was some discussion in the coffee break about the difficulties of stigma leading to PLHIV not being open about their diagnosis and that impacting on the development of activists.

After coffee Anele and Jonathan presented the history of the development of drug treatments in HIV ending on an overview of the global inequality in provision of medications and the impact of social, legal, and cultural factors impeding access to treatment and care. Anele then described the latest developments and clinical trials in drug treatments, including two-drug regimens and injectables, also nurse management of medications and resistance, during this session we learnt that injectables are now available in Poland.

Following this, one of the local hosts, Agata Waszczuk, presented on the impact of the refugee crisis on HIV services in Warsaw, which showed how their services had adapted well to the additional numbers of PLHIV, and some of the challenges particularly the language barrier and the number of women and children with HIV amongst the refugees. This led to a lively discussion with some nurses describing their different experiences in other cities.

“ In the future, it would be great to be able to share experiences like this between a larger number of hospitals, or even nurses from other countries.”

The final session before lunch was led by Jonathan discussing the management of ongoing care for stable and complex patients including the management of opportunistic infections.

At this point the attendees were keen for us to do a group photograph; there was a great warmth of spirit growing between us.

Jane commenced the afternoon presenting on stigma and discrimination in HIV followed by Anele covering the issues of key populations and explored what they are in Poland. In the next session Janey introduced some key facts about the refugee crisis in Poland then the nurses broke into groups to discuss how this had impacted them in their work. Each group then fed back to the whole meeting, the issues being very similar: dealing with language barriers, needing to refer to different agencies for support, issues with the large numbers of women and children.

“ There was a great warmth of spirit growing between us”

Finally, Jane discussed support and supervision a topic which generated a lot of debate and agreement that although they were good at supporting each other on a day-to-day basis they lacked external support from their managers and from their national nursing organisations.

The attendees showed their appreciation of the meeting with hugs and thanks which was very touching. They generally don’t have this type of opportunity to come together and discuss the issues that are affecting them. They seemed to suggest that having the meeting made them feel appreciated. Overall, we were very pleased at the level of interaction and discussion that took place. We intend to discuss and learn from the feedback given which will help to refine future meetings.

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Evaluation Summary

1. How well did the meeting meet your expectations?

5 Well exceeded expectations — **1** Did not meet expectations

AVERAGE
4.6

2. How would you rate the effectiveness of the following sessions?

5 Very effective — **1** Not effective

LECTURES:	*WORKSHOPS:*	*CASE PRESENTATIONS:*
4.6	**4.7**	**4.7**
AVERAGE	AVERAGE	AVERAGE

3. Please let us know which speakers you found helpful, which less so, and any additional subjects we should have covered

- “ Thank you all, very much.
- “ Jane, Janey, Anele were very good.
- “ More medical cases. Everyone was helpful, especially Jane.
- “ Everybody was very professional and substantive.
- “ All the speakers met my expectations. Every subject was important.
- “ Anele, Janey, Jane – all helpful
- “ I am satisfied by the information heard and mentioned during the lectures. Jane was especially helpful.
- “ We could have tried to talk about specific jobs, actions taken in specific departments in different countries to gather positive schemes in order to improve our work and better the care for patients.
- “ Excellent speakers!
- “ All of the speakers met my expectations; they were very brilliant. The lectures helped me learn something new.
- “ Lectures and conference were very good and interesting. Anele and Janey stood out to me. The subjects were modern and tangible with reality and day to day work.
- “ Different perspective towards HIV positive people and acknowledging their problems.

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4. How will this meeting help you in your day-to-day work? (comments only)

- I don't know yet but it will help.
- It brought a fresh perspective into the problem of stigma and communication with an HIV positive patient.
- Proper approach to HIV positive patients
- I have not been working with infectious diseases for a long time, so all of this information will be very useful.
- Reminded and sensitized on how to treat patients, especially newly diagnosed.
- I hope that I will know how to use the gained knowledge, and sharing it with other nurses and giving better support to patients.
- I will be more sensitive to the needs of patients and their emotions/relationships.
- Maybe I will show more empathy, although I have a lot of it already
- I will help patients out more with my newly found knowledge.
- Broaden my knowledge and experience.
- It will help me look at patients' problems from a different perspective. I deepened my knowledge about HIV and patients.
- I will engage in fulfilling my work even more than before.

5. What is your overall assessment of the meeting?

5 Very effective/Excellent — **1** Not effective/Poor

AVERAGE **4.7**

- It was good to meet
- Very interesting and diverse
- Good communication between lecturers. Good teamwork
- A lot of information about a fresh approach to the problem
- These types of meetings are very important, even smaller meetings between medical facilities would work wonders.
- Very good and constructive meeting.
- Well prepared and interesting both in content and technicality.
- Thank you for the pleasant and fruitful meeting.
- The meeting was very successful and reminded me of many things.
- Meeting was well organized.
- The meeting was very good.

6. Please give suggestions for how future meetings might meet your training needs (comments only)

- I need more of this type of meeting.
- More workshops, less lectures
- Presence of an HIV positive patient to share their perspective and history
- Information about new and contemporary techniques of treatment, and a sharing of personal experiences.
- More workshops and exercises
- More specific examples of how to talk to and comfort patients.
- Exchange of experiences between a larger number of hospitals, or people from other countries.
- Introducing different aspects of life and work

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