## HCA - Joanne Hall

I started my HCA journey in a dual role. I was a Senior Receptionist, and the opportunity for health care arose, as we needed support for our Practice Nurse. I started more as a Phlebotomist who also took blood pressures. After building my confidence and my needle skills, I moved Surgery and took on a full time HCA position. The main reason being, I loved spending time with our patients, supporting people and building trusting relationships. My Surgery has been the driving force into making my role what it is today. They and the patients have empowered me to include as many skills in my role as I can. It's been hugely important to have our Practice Nurses and GP's as mentors and to work safely within the guidelines.

My role has changed significantly over the past few years. With Chronic disease appointments now including Diabetic foot screening and House of Care. I also have a role in hypertension reviews, STI screening, and I am soon to support the PN team with inhaler technique and peak flow. These are in addition to the day to day appointments of bloods, BP, B12, admin duties, recall systems, HBPM and annual reviews. During each appointment we must be vigilant, ensuring patients are up to date with screening services, and if not encourage them to engage. However apart from the clinical skills we develop, listening to our patients has to be paramount. As we all know many patients will divulge things during conversation that raise a flag, and it's our job to notice and act on this. It can sometimes be a fleeting comment but an important one. Knowing how to support the patient and encourage them to accept help from someone more senior, is a huge part of our role. Acting as an advocate on patient's behalf and sign posting to the correct services can also be crucial. Many Practices now have Links workers, Physios and welfare services. These are very beneficial, especially in today's climate