## **President's Report 2022**

We started the year with apprehension as we watched what was happening around the world and especially to our health care colleagues over east. In February, the Nursing Expo was scaled back to a virtual expo, our workshop at PCH was cancelled as health services in Western Australia stopped visitors and started strict rules on isolation and quarantine. COVID has crept silently into our health system, our workplace, our family and loved ones and affected us in more ways than we can imagine.

It is not just a matter of being scrubbed, gowned and gloved for surgery; PPE had to worn for hours on shifts. Can we think of the days before COVID. When we did not have to wear PPE all day, or completely change and shower after an exhausting 10 - hour plus shift before considering hugging loved ones for fear of infecting them with a highly contagious, potentially deadly disease. That's not even taking into account that healthcare workers have worked through all phases of the pandemic, including before vaccinations were made available, and often in unsafe conditions without access to adequate PPE. In addition to the incredible load placed on hospitals, there is a shared burden of continuation of emergency and other urgent surgeries. Thankfully, COVID has peaked and eased. This has seen a gradual return of elective surgeries followed by pressures to catch up and reduce the delay in preventive elective surgeries.

The International Council of Nurses estimates an additional 3 million nurses may quit as a result of COVID -19, and has been concerned by an increase in industrial action globally. Burnout among fatigued health workers may only worsen the problem.

Greater investment in health systems are needed to handle future increases in healthcare demand due to growing and ageing populations. Burnout is not just an individual problem. It is an organisational issue, affecting turnover and intention to leave, as well as the ability to deliver quality healthcare.

These problems are compounded by inadequate staffing due to staff furloughing, sickness, increased cognitive load, rapidly changing guidelines, cancellations of leave and occupational aggression and abuse.

More than ever, we need to take heed and care for our own wellbeing and those around us. Reach out and support our friends and colleagues as these issues will not go away tomorrow. We are resilience and together we will take one step at a time as we get through each day. 'Tomorrow is a new day, with no mistakes in it yet!'

Our membership continues to grow maintain at about 300. Perioperative nursing needs to grow and be represented for what we do for our patients every day. Undergraduate placement in perioperative nursing need to be included or the next generation of nurses will not have adequate exposure to a very important component of surgical nursing. We need to ensure that the next generation of nurses will want to follow in our footsteps and we will still have perioperative nurses looking after patients in years to come. I would like to reach out and invite you to consider joining the committee locally or nationally, ACORN is our professional body and there is so much you can share with all of us here.

In conclusion, I would like to thank you for all for all your support for ACORN WA, including my fellow committee members for their hard work and dedication to be here and keeping the flames of perioperative nursing burning bright.